UNITED STATES SECURITIES	AND EXCHANGE COMMISSION
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Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

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FORM 4

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Dat		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8) Code V		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 Amount (A) or (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Table I - No	n-Derivative \$	Securities Acq	uired,	Disp	oosed of, o	r Bene	ficially C	Owned				
(City)	(State)	(Zip)					Form filed by More than One Reportin							
(Street) RICHMOND VA 23226				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(Last) 1801 BAYBERF P.O. BOX 1810(		(Middle)	3. Date 06/01/	of Earliest Transact 2007	ion (Mo	nth/Da	ıy/Year)			below)		below)		
1. Name and Address of Reporting Person* <u>MOSNER LAWRENCE J</u>				er Name <b>and</b> Ticker <u>NKS CO</u> [ BCC		ng Syi	mbol		k all applicable) Director Officer (give t					
Instruction 1(b).	continue. See			ant to Section 16(a) ection 30(h) of the In					1		nours p	per response:	0.5	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Brink's Units (DSAP)	(1)	06/01/2007		A		0.55 <sup>(1)(2)</sup>		(1)	(1)	Common Stock	0.55 <sup>(1)(2)</sup>	\$0.00	361.96	D	
Brink's Units (DSAP)	(1)	06/01/2007		А		303.49 <sup>(1)(3)</sup>		(1)	(1)	Common Stock	303.49(1)(3)	\$0.00	665.45	D	

**Explanation of Responses:** 

1. The Reporting Person, as a participant in the Directors' Stock Accumulation Plan (the "DSAP"), will be entitled to receive a distribution in The Brink's Company ("Brink's") Common Stock in respect of all Brink's Units in the Reporting Person's account if, after completing at least five years of service as a non-employee director, the Reporting Person terminates service for any of the reasons described in the DSAP. The number of Brink's Units credited to the Reporting Person's account on the Transaction Date is based upon a share price of \$65.90, which is the average trading price of Brink's Common Stock on June 1, 2007, calculated in accordance with the terms of the DSAP.

2. Brink?s Units were credited to the Reporting Person?s account under the DSAP as a result of a dividend payment, in accordance with the terms of the DSAP.

3. Brink's Units were credited to the Reporting Person's account under the DSAP as a result of an annual allocation, in accordance with the terms of the DSAP.

**Remarks:** 

## /s/ Elizabeth C. Restivo

Elizabeth C. Restivo, Attorney-06/05/2007 in-Fact Date

\*\* Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.