SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** SECURITIES

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and A <u>McMaker</u>	ddress of Repo <u>Kurt B</u>	2. Date of E Requiring S (Month/Day 08/24/202	tatement /Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol   BRINKS CO [BCO]						
(Last) 555 DIVIDI (Street) COPPELL	(First) END DRIVE TX	(Middle) 75019	-		Issue	ationship of Reporting k all applicable) Director Officer (give title below) EVP, Chief Finan	10% C Other below)	wner 6 (specify (	A Person	Year) int/Group Filing e Line) by One Reporting by More than One
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				i		unt of Securities cially Owned (Instr.			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Table II - Derivative Securities Beneficially Owned(e.g., puts, calls, warrants, options, convertible securities)										
······································			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Se Underlying Derivative Se (Instr. 4)		curity Convers		e Form:	Ownership (Instr.
		Date Exercisable	Expiration Date	1		Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)	

**Explanation of Responses:** 

**Remarks:** 

No securities are beneficially owned.

## /s/ Kurt B. McMaken

\*\* Signature of Reporting Person

08/24/2022

Date

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 5 (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.

## OMB APPROVAL