FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

| OMB Number: | 3235-0287 | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |

| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | |
|--|---------|-----------------------|---|-------------------|--|-----------------------------|------------------------------------|------|--|
| (City) | (State) | (Zip) | | | | | | | |
| (Street) RICHMOND | VA | 23226 | | X | | , , | oorting Person In One Reporting | J | |
| P.O. BOX 18100 | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | vidual or Joir | it/Group Filin | ig (Check Applic | able | |
| (Last) 1801 BAYBER | | (Middle) | 01/03/2022 | | belowy | | belowy | | |
| (l. aat) | (Firet) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | - | Officer (giv below) | ve title | Other (speci below) | fy | |
| 1. Name and Addr Clough Ian I | 1 6 | 9 Person [*] | 2. Issuer Name and Ticker or Trading Symbol <u>BRINKS CO</u> [BCO] | | ationship of F k all applicab Director | | rson(s) to Issuer 10% Owner | | |
| Instruction 1(b) | | | Filed pursuant to Section 16(a) of the Securities Exchange Act of 19: or Section 30(h) of the Investment Company Act of 1940 | 34 | | <u></u> | | | |
| Obligations may | | | | _ | | Estimated a hours per re | verage burden sponse: | 0.5 | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---------------------------------|--|---|---|---|--------|---------------|---------|---|---|---|--|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130.4) | |
| Common Stock | 01/03/2022 | | Α | | 213(1) | Α | \$65.57 | 17,488 | D | | |

| | 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) | | of Expiration Date Derivative (Month/Day/Year) Securities Acquired (A) or | | Deriv | unt of rities rlying ative rity (Instr. | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 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 | | | | |

Explanation of Responses:

1. The reporting person has elected to receive shares of Brink's common stock as part of his quarterly compensation for service on the Company's Board and Committees. **Remarks:**

| /s/ Linda M. MacNal | y, |
|---------------------|----|
| Attorney-in-Fact | |

01/04/2022

** Signature of Reporting Person 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 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.