FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

/ashington,	D.C.	20549	
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

	nd Address of <mark>Michael F</mark>	Reporting Person*				r Name and IKS CO			ng Sy	ymbol			heck all a		ıble)	g Perso	n(s) to Issu 10% Ov	
(Last) 555 DIV	(F IDEND DR	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/31/2020							ow) `	(give title Other (spelow) secutive Vice President		pecify			
(Street) COPPEL (City)		X tate)	75019 (Zip)	4	I. If Am	endment, D	ate of	f Original F	Filed	(Month/Da	y/Year)	6. Lii	ne) X Fo Fo	rm file	ed by One	Repor	Check Appliting Person	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date				action 2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr.		ties Acquired (A) or d Of (D) (Instr. 3, 4 and		5) Sec Ben Owr	Beneficial Owned Fo		Form: (D) or	orm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
				Code V Amount (A) or (D)			r Price	Tran	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Security or Exercise (Month/Day/Year) if any		Execution Date,	Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou of Securities Underlying Deriva Security (Instr. 3 a 4)		Deriv ve Secu	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transact	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount Number Shares			(Instr. 4)			
Units	(1)	03/31/2020		A		236.36 ⁽²⁾		(1)		(1)	Common Stock	236.36	(2) \$52.0	5 ⁽³⁾	9,356.	.08	D	

Explanation of Responses:

- 1. Units (each of which is the economic equivalent of one share of The Brink's Company ("BCO") common stock) credited to the Reporting Person's stock incentive account under the Key Employees' Deferred Compensation Program (the "Program") will settle in BCO common stock on a one-for-one basis and shall be distributed in accordance with the Reporting Person's deferral election either (1) following the Reporting Person's termination of employment with BCO or (2) on a future date selected by the Reporting Person at the time of his or her deferral election that is during such person's employment with BCO.
- 2. In accordance with the terms of the Program, on the last business day of each month, compensation deferred by the Reporting Person during that month and/or any matching amounts are converted into Units and credited to the Reporting Person's stock incentive account.
- 3. The number of Units credited to the Reporting Person's account on the Transaction Date is based upon a share price of \$52.05, which is the closing price of BCO common stock on the final trading day of the month in which the deferred compensation would have been payable, calculated in accordance with the terms of the Program.

Remarks:

/s/ Lindsay K. Blackwood Lindsay K. Blackwood,

04/02/2020

Attorney-in-Fact

** 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.