FORM 4

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								

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

Name and Address of Reporting Person* O'Brien Dana C.			2. Issuer Name and Ticker or Trading Symbol BRINKS CO [BCO]							eck all applic Directo	cable) or	10% Owner		ner				
(Last) 555 DIV	(Fi	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/01/2020								below)	r (give title Other (sp) below) /P and General Counsel		респу		
(Street) COPPEL (City)			75019 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	e) X Form f Form f						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,		Code (Instr. 5)			d (A) or r. 3, 4 and	Benefici	s ally following	6. Owner Form: Dir (D) or Ind (I) (Instr.	rect clirect E	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code V	Amoui	t	(A) or (D)	Price	Transact	ion(s)			msu. 4)	
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/Yea	Co	Transaction Code (Insti				6. Date Exercisable and Expiration Date (Month/Day/Year)		Am Sec Und Der	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	nership m: ect (D) ndirect	Beneficial Ownership (Instr. 4)
				Co	ode \	v	(A)	(D)	Date Exercisable	Expiration Date	n Titl	le	Amount or Number of Shares					
Units	(1)	09/01/2020			A		3.18(2)		(1)	(1)		ommon Stock	3.18(2)	\$45.41 ⁽³⁾	965.51		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.
- 2. In accordance with the terms of the Program, Units (each of which is the economic equivalent of one share of BCO common stock) were credited to the Reporting Person's account as a result of a dividend payment with respect to BCO common stock.
- 3. The number of Units credited to the Reporting Person's account on the Transaction Date is based upon a share price of \$45.41, which is the closing price of BCO common stock on September 1, 2020, calculated in accordance with the terms of the Program.

Remarks:

/s/ Lindsay K. Blackwood,

Lindsay K. Blackwood,

09/02/2020

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.