## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed purcuant to Section 16(a) of the Securities Evolution Act of 1024

msuuc	uon ±(b).			FIIC							npany Act (			4		<u></u>							
1. Name and Address of Reporting Person* <u>Pirate Capital LLC</u>							2. Issuer Name <b>and</b> Ticker or Trading Symbol BRINKS CO [ BCO ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
(Last) (First) (Middle) 800 CONNECTICUT AVENUE ONE NORTH						3. Date of Earliest Transaction (Month/Day/Year) 06/06/2008									X Director Officer (give title below)			10% Owner Other (specify below)					
(Street) NORWA (City)	net) PRWALK CT 06854					4. If Amendment, Date of Original Filed (Month/Day/Year) 06/06/2008									6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  X Form filed by More than One Reporting Person								
		Tabl	e I - No	n-Deriv	ative	e Se	curitie	es Acc	quired,	, Dis	posed o	f, or	Bene	efici	ally Owi	ed							
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						ar)	2A. Deen Executio if any (Month/D	n Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)		(A) or 3, 4 a	nd Seci Ben Owr	nount of irities eficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
										v	Amount	nt (A) or (D)		Pric	Reported Transaction(s) (Instr. 3 and 4)								
Common	Stock			06/06	5/2008	3			J		13,154	(1)	A	\$0	.00	13,154		D					
		Та						•			sed of, onvertib				-	t							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date, Trans			n of l		6. Date Exercis Expiration Date (Month/Day/Yea		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price of Derivative Security (Instr. 5)	tive derivative ty Securities		Downership Form: Direct (D) Or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
				•	Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nun of	ount nber res									
	nd Address of Capital LI	Reporting Person*																					
(Last) 800 CON ONE NO	NECTICU	(First) T AVENUE	(Midd	dle)		_																	
(Street)	LK	СТ	0685	54																			

# 800 CONNECTICUT AVENUE ONE NORTH

**Hudson Thomas R Jr** 

1. Name and Address of Reporting  $\mathsf{Person}^*$ 

(Street)

(City)

(Last)

06854 **NORWALK** CT

(City) (State) (Zip)

(State)

(First)

(Zip)

(Middle)

### **Explanation of Responses:**

1. On June 6, 2008, shares of the Company's common stock were distributed to shareholders in the Jolly Roger Portfolio Company LTD. Thomas R. Hudson Jr., as a shareholder of the Jolly Roger Portfolio Company LTD, received 13,154 shares of the Company's common stock in that distribution, which were omitted from the Form 4 filed by the Reporting Person on June 6, 2008, and were also omitted from Forms 4 filed by the Reporting Person after June 6, 2008.

#### Remarks:

Thomas R. Hudson Jr., its Portfolio Manager

<u>Thomas R. Hudson Jr.</u> <u>01/27/2009</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.