## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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TATEMENT	OF CHANGES	IN BENEFICIA	L OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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hours par 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

1. Name and Address of Reporting Person*  Marshall McAlister C II  (Last) (First) (Middle)  1801 BAYBERRY COURT					3. E	Issuer Name and Ticker or Trading Symbol     BRINKS CO [ BCO ]  3. Date of Earliest Transaction (Month/Day/Year) 02/20/2015									Relationship of Reporting Person(s) to Issuer neck all applicable)  Director 10% Owner  X Officer (give title below)  VP and Gen Counsel				vner
P.O. BOX (Street) RICHM( (City)	OND V		23226 (Zip)		4. 11	f Ame	ndment,	Date of	f Original F	Filed	(Month/D	Pay/Year)		6. Ind Line)	Form 1	filed by One	e Rep	g (Check Ap orting Perso n One Repo	n
		Tab	le I - Noi	n-Deriv	/ative	e Se	curities	s Aco	auired. [	Disi	osed o	of. or Be	enefi	<u>l</u> ciallv	Owned				
1. Title of Security (Instr. 3)		2. Trans	2. Transaction		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		or	5. Amou Securiti Benefici Owned	Amount of ecurities eneficially wned Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) o (D)	r Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 02/20/				0/2015	2015		F		577 <sup>(1)</sup> D		\$	26.92	33,413(2)			D			
		Т	able II -									, or Ben ble sec			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemd Execution if any (Month/Da	Date,	Date, Transac Code (Ir		ion of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		S (I	Price of erivative ecurity nstr. 5)	9. Number or derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisable		xpiration ate	Title	Amo or Num of Shai	ber					
Market Share Units	(3)	02/20/2015			A		9,187		(4)		(4)	Common Stock	(3	3)	\$0.00	9,187		D	

## **Explanation of Responses:**

- 1. The Company withheld shares of common stock to satisfy the tax withholding obligation for the Reporting Person's Restricted Stock Units that vested on February 20, 2015.
- 2. Includes 9,313 Restricted Stock Units that have not yet vested.
- 3. Each Market Share Unit represents a right to receive, subject to the terms and conditions of the 2013 Equity Incentive Plan and a Market Share Units Award Agreement, a minimum of 0 shares and a maximum of up to 1.5 shares of the Company's common stock, based on the average closing stock price for the twenty trading days leading up to and including December 31, 2017, as compared to the average closing stock price for the twenty trading days leading up to and including December 31, 2014.
- 4. Under the terms of the Market Share Units Award Agreements, the units will become earned and payable, if at all, upon the Compensation and Benefits Committee's determination of the amount of shares of Company common stock payable pursuant to each outstanding Market Share Unit award.

## Remarks:

/s/ Elizabeth C. Restivo,

Elizabeth C. Restivo, Attorney- 02/24/2015

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.