FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0							
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

1. Name ar Colan		Reporting Person*				r Name and I <mark>KS CO</mark>			ng Sy	mbol		(Che	elationship of eck all applica Director	ıble)	g Perso	10% Ow	ner
(Last) 1801 BA P.O. BOX	YBERRY (irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/30/2015						2	X Officer (give title below) Other (specify below) Controller					
(Street) RICHMO		A tate)	23226 (Zip)	4	l. If Am	endment, D	Date of	f Original F	iled (Month/Da	y/Year)	6. In Line	Form file	ed by One	e Repor	Check Appliting Person One Reporti	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date			. Transact Date Month/Day	Execution Date,		Code (Instr.					Form:	: Direct Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	V	Amount	(A) or (D)	Price	Transactio	Transaction(s) (Instr. 3 and 4)			11130.4)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
Derivative Conversion Date Execusecurity or Exercise (Month/Day/Year) if any		3A. Deemed Execution Date if any (Month/Day/Yea	Date, Transacti Code (Ins				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivati Security (Instr. 3 an 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		Ownership C Form: E Direct (D) C	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amount or Number of Shares		(Instr. 4)			
Units	(1)	09/30/2015		A		107.98 ⁽²⁾		(1)		(1)	Common Stock	107.98(2)	\$27.01 ⁽³⁾	606.	13	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 stock incentive account on the Transaction Date is based upon a share price of \$27.01, 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, Attorney-in-Fact

10/02/2015

** 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.