FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C.	20549

	PROVAL
OMB Number:	3235-0287

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0
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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 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* REED AUSTIN F												5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
													X	Officer (g below)	ive title		10% Ow Other (sp below)	
(Last) 1801 BA P.O. BOX	YBERRY (First) COURT	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/11/2005							VP, Gen'l Counsel & Secretary						
(Street)	OND V	⁄A	23226		4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indiv	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5	State)	(Zip)															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Trans Date (Month/				ate	2A. Deemed Execution Date, if any (Month/Day/Yea		Transaction Dispose Code (Instr.		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Own Following Reported		6. Owr Form: (D) or (I) (Ins	Direct I Indirect E tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) or (D)		rice	Transaction(s) (Instr. 3 and 4)				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 2. Conversion On Date Onterivative Security 3. Transaction Date Execution Date (Month/Day/Year) 34. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. S) 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		lying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisable		cpiration ate	Title		unt or per of es		(Instr. 4)			
Units	(1)	03/11/2005		A		108.44 ⁽¹⁾⁽²⁾		(1)		(1)	Common Stock	108	44(1)(2)	(1)	44,478	.26 ⁽³⁾	D	

Explanation of Responses:

- 1. Under the terms of the Key Employees' Deferred Compensation Program (the "Program"), the Reporting Person has chosen to make bi-weekly salary deferrals to an incentive account. As of the end of each fiscal year, the amount of salary deferred to the Reporting Person?s account during that fiscal year, plus any matching amounts, is converted into Units representing shares of The Brink?s Company Common Stock ("BCO") and credited to the Reporting Person's account in accordance with the terms of the Program.
- 2. The number of Units credited to the Reporting Person?s account on the Transaction Date is an estimate based upon trading prices of BCO for the two-week period ended March 11, 2005.
- 3. The total number of Units owned following the reported transaction is an estimate of the total number of Units representing shares of BCO in the Reporting Person's account under the Program.

Remarks:

/s/ Elizabeth C. Restivo

03/15/2005 Elizabeth C. Restivo, 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.