FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	D C	20540	
Washington,	D.C.	20549	

STATEMENT	OF	CHANGES	IN REN	IFFICIAL	OWNERSHIP
	O.	CHAILOE	IIA DEI		CITILITIES

IL	OMB APPROVAL									
ľ	OMB Number: 3235-0287									
	Estimated average burden									
Ш	hours por rosponso:	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*     Deans Alison Ann			<u>M</u>	2. Issuer Name and Ticker or Trading Symbol MINERALS TECHNOLOGIES INC [ MTX ]						X ] Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) $\frac{X}{X}  \text{Director} \qquad \qquad 10\% \; \text{Owner}$						
(Last)	(Fir	st) (	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/07/2023							Officer ( below)	give title	Other (sbelow)	specify	
MINERALS TECHNOLOGIES INC. 622 THIRD AVENUE, 38TH FLOOR				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					
(Street) NEW YO	RK NY	<b>?</b> 1	10017		_								Form filed by More than One Reporting Person				
(City)	(Sta	ate) (	Zip)			Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											
			le I - Non			_			quired, D	<del>-</del>	of, or Ben		_				
Date			2. Trans Date (Month		ear) l	2A. Deemed Execution Date, if any (Month/Day/Yea		, Transaction Dis Code (Instr.		curities Acquired (A) o osed Of (D) (Instr. 3, 4 a		Beneficial Owned Fo	Fo ly (D	rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code V	Amou	nt (A) or (D)	Price	Reported Transaction (Instr. 3 ar					
	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  (Instr. 3)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date (Execution Date, if any (Month/Day/Year)			ate,		ransaction of ode (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable	Expiratio Date	ı Title	Amount or Number of Shares					
PHANTOM STOCK UNITS	(1)	12/07/2023			A		17.468		(2)	(2)	COMMON STOCK	17.468	\$0	11,195.257	D		

## Explanation of Responses:

- 1. Each phantom stock unit is the economic equivalent of one share of Minerals Technologies Inc. Common Stock.
- 2. The phantom stock units were accrued under the Minerals Technologies Inc. Non-Funded Deferred Compensation and Unit Award Plan for Non-Employee Directors and are to be settled in cash upon the reporting person's termination of service as a director.

TIMOTHY JORDAN FOR 12/11/2023 **ALISON DEANS** 

\*\* Signature of Reporting Person Date

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

- $^{\ast}$  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.