FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235		
	Estimated average burden			

716	OMB Number:	3235-028					
	Estimated average I	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 and Address of Reporting Person* WINTER DONALD C			2. Issuer Name and Ticker or Trading Symbol MINERALS TECHNOLOGIES INC [ MTX									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
WINTER DONALD C				1	1								X	Directo	or		10% Ov	vner		
				Ľ	,									Officer below)	(give title		Other (s	specify		
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year)									below)	'		below)				
622 THIRD AVENUE				03/	03/08/2018															
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
NEW Y	ORK N	Y	10017											X	Form 1	filed by One	Rep	orting Perso	n	
														Form 1	filed by Mor	e tha	n One Repo	rting		
(City)	(S	tate)	(Zip)												Perso	n				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of	Security (Ins	tr. 3)		2. Transa	action		2A. Deem		3. 4. Securities Acquired (A)						5. Amou				7. Nature	
Date (Month			Date (Month/D	Day/Ye	ar)   i	Execution Date if any		Code (Instr. 5)		d Of (D) (In	str. 3, 4	and	Benefici	Beneficially (D)		m: Direct or Indirect	of Indirect Beneficial Ownership (Instr. 4)			
				(Month/Day/			ay/Yea	ar) 8)												
					Code	٧	Amount	nount (A) or (D)		ce	Transac (Instr. 3									
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
									s, option											
1. Title of	2.	3. Transaction Date (Month/Day/Year)	3A. Deemed		4.		5. Numb		6. Date Exercisable and		ble and	7. Title and			B. Price of	9. Number of	of	10.	11. Nature of Indirect Beneficial	
Derivative Security	Conversion or Exercise		Execution D		Transa Code (I				Expiration Date (Month/Day/Year)			Amount of Securities			Derivative Security	derivative Securities		Ownership Form:		
(Instr. 3) Price of Derivative (Month/Day/Year) 8) Securities Acquired Underlying Derivative Se									Instr. 5)	. 5) Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)							
	Security	(A) or (Instr. 3 and 4)									",		Following		(I) (Instr. 4)	(111301.4)				
Disposed of (D)												Reported Transaction(s)								
						(Instr. 3, 4 and 5)									(Instr. 4)					
								П		Т			Amou	ınt						
													or Numb	oer						
				0	Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	of Share	s						
Phantom Stock Units	(1)	03/08/2018			A		7.605		(2)		(2)	Common Stock	7.60	)5	\$0	10,965.75	56	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 wer 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.

Thomas J. Meek for Donald C. Winter

04/03/2018

\*\* 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.