Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

S SECURITIES AND EXCHANGE COMMISSION SIALE

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	PROVAL				
OMB Number:	3235-0287				
Expires:	December 31, 2014				
Estimated average	burden				
hours per response:	0.5				

FORM 4	
	UNITED STATES SE

JOHNSON KRISTINA M MINERALS TECHNOLOGIES INC [MTX] (Check a (Last) (First) (Middle)	Director Officer (give title below)	10% Owner Other (specify
		below)
(Street) 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individually 1. If Amendment, Date of Original Filed (Month/Day/Year) 8. Individually 1. If Amendment, Date of Original Filed (Month/Day/Year) 8. Individually 1. If Amendment, Date of Original Filed (Month/Day/Year) 8. Individually 1. If Amendment, Date of Original Filed (Month/Day/Year) 8. Individually 1. If Amendment, Date of Original Filed (Month/Day/Year) 8. Individually 1. If Amendment, Date of Original Filed (Month/Day/Year) 8. Individually 1. If Amendment, Date of Original Filed (Month/Day/Year) 8. Individually 1. If Amendment, Date of Original Filed (Month/Day/Year) 8. Individually 1. I	dual or Joint/Group Filing (C Form filed by One Reportir	
(City) (State) (Zip)	Form filed by More than Or Person	ne Reporting

2. Transaction Date 3. Transaction Code (Instr. 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 1. Title of Security (Instr. 3) 2A. Deemed 5. Amount of Securities 6. Ownership 7. Nature of Execution Date. Form: Direct Indirect Beneficial (Month/Day/Year) if any Beneficially (D) or Indirect (Month/Day/Year) 8) Owned Following (I) (Instr. 4) Ownership (Instr. 4) Reported (A) or (D) Transaction(s) (Instr. 3 and 4) Code v Amount Price

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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		6. Date Exerci: Expiration Dat (Month/Day/Ye	e	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(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(
PHANTOM STOCK UNITS	0 ⁽¹⁾	07/01/2003	07/01/2003	Α		32.5		08/08/1988 ⁽²⁾	08/08/1988 ⁽²⁾	COMMON STOCK	32.5	\$ 49.58	2,727.004 ⁽³⁾	D	

Explanation of Responses:

1. EACH PHANTOM STOCK UNIT, WHEN REDEEMED, WILL HAVE THE VALUE OF ONE SHARE OF THE COMPANY'S COMMON STOCK ON THE FIRST BUSINESS DAY OF THE MONTH IN WHICH PAYMENT IS MADE.

2. THE PHANTOM STOCK UNITS WERE ACCRUED UNDER THE MINERALS TECHNOLOGIES INC. NON-FUNDED DEFERRED COMPENSATION AND UNIT AWARD PLAN FOR NON-EMPLOYEE DIRECTOR'S AND ARE TO BE SETTLED IN CASH UPON THE REPORTING PERSON'S RETIREMENT.

3. THE REPORTING PERSON ALSO DIRECTLY OWNS EMPLOYEE STOCK OPTIONS TO PURCHASE 159 SHARES OF MTX COMMON STOCK AT \$46.625 PER SHARE WHICH BECAME EXERCISABLE IN THREE EQUAL ANNUAL INSTALLMENTS BEGINNING ON JANUARY 24, 2003 AND EXPIRING ON JANUARY 24, 2012.

LINDA A. BUGGELN FOR	07/0
KRISTINA M. JOHNSON	<u>07/0</u>
** Signature of Reporting Person	Date

2/2003

** Signature of Reporting Person

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.