FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

vasimigton	, D.O. 200-0	

Washington, D.C. 20049	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		

OMB Number:	3235-0287
Estimated average burde	en
hours nor rosnonso:	0.5

Check this box if no longer subject t	0
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* CLARK ROBERT L						2. Issuer Name and Ticker or Trading Symbol MINERALS TECHNOLOGIES INC [MTX								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
CLARK RUBERT L					1									X	Directo	r		10% Ov	vner
-																(give title		Other (s	specify
(Last)	(Fi	rst)	(Middle)		3. [3. Date of Earliest Transaction (Month/Day/Year)									below)			below)	
622 THIRD AVENUE					09/	09/10/2015													
					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line)					
NEW YO	ORK N	Y	10017											X Form filed by One Reporting Person					
(Oi)			(7 :)												Form fi Person		than	One Repor	ting
(City)	(S	ate)	(Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of S	Security (Inst	r. 3)		2. Transa Date	action	ction 2A. Deemed Execution Date,			3. 4. Securities Acquired (A) Transaction Disposed Of (D) (Instr. 3, 4			ed (A)) or 5. Amour 4 and Securitie					7. Nature of Indirect	
(Month/Da				Day/Ye				Code (Instr. 5)			,	Beneficia Owned F		ollowing (i) (Ir		str. 4)	Beneficial Ownership		
							Code	v	Amount	(A) or Pr		ce	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)		
			C		Λ	uinad Di	:		au Dan	- fi a i a	. 11 4								
			Table II - [)						urea, ס , option						ownea				
1. Title of 2. 3. Transaction 3A. Deemed 4.					. 5. Numbe			her	6. Date Exercisable and 7. Title at			nd Amo	unt	8. Price of	9. Number of		10.	11. Nature	
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution Da if any (Month/Day/)	ate, T	ransaction Code (Instr.		of Of Derivative Securities Acquired (A) or Disposed of (D) (Instr.		Expiration Date (Month/Day/Year)			of Securities Underlying Derivative Secu (Instr. 3 and 4)			Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported Transaction	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
			3, 4 and 5)									(Instr. 4)							
													Amo	unt					
									D-4-	١.			Num	ber					
				С	Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	of Shar	es					
Phantom Stock Units	(1)	09/10/2015			A		11.016		(2)		(2)	Common Stock	11.0	16	\$0	11,304.1	72	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.

Remarks:

Thomas J. Meek for Robert L. Clark

09/11/2015

** 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.