FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |
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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(h) |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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* STIVERS WILLIAM C | | | | | | 2. Issuer Name and Ticker or Trading Symbol MINERALS TECHNOLOGIES INC [MTX | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer Check all applicable) X Director 10% Owner | | | | |
|--|---|--|--|----------|---|---|----------|---|----------|----------------|--|---------------------------------------|---|---|--|-------|--|---|--|
| (Last) (First) (Middle) MINERALS TECHNOLOGIES INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/28/2004 | | | | | | | | | Officer below) | (give title | | Other (s below) | pecify | |
| 405 LEXINGTON AVENUE (Street) NEW YORK NY 10174 | | | 0174 | 4. 1 | f Ame | endment | , Date o | of Original F | iled | (Month/D | Day/Year) | | Indine) | Form fi | led by One led by More | Repo | (Check Apporting Person | 1 | |
| (City) | (Sta | ate) (2 | Zip) | | | | | | | | | | | 1 013011 | | | | | |
| | | Tab | le I - Non-De | erivativ | e Se | curiti | es Ac | quired, [| Disp | osed | of, or Ber | neficia | lly | Owned | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | ear) | 2A. Deemed Execution Date, if any (Month/Day/Year | | Transaction Dispos | | Dispose | rities Acquired (A) ed Of (D) (Instr. 3, 4 | | or 5. Amour Securitie Beneficia Owned F | | s Illy ollowing | Form: | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Transacti (Instr. 3 a | ion(s) | | | 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 (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date if any (Month/Day/Yea | Code | | | | 6. Date Exer Expiration D (Month/Day/ | ate | | e and 7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4) | | [| . Price of Perivative Pecurity Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | Code | v | (A) | | Date Exercisable | Ex Da | piration te | Title | Amour or Number of Shares | er | | | | | | |
| PHANTOM STOCK UNITS | \$0 ⁽¹⁾ | 04/28/2004 | 04/28/2004 | A | | 15 | | (2) | | (2) | COMMON STOCK | 15 | | \$60.52 | 1,077.21 | 13 | 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.

Remarks:

VICTORIA LUKAUSKAS FOR WILLIAM C. STIVERS

04/30/2004

** 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.