FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

0.5

hours per response:

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*						2. Issuer Name and Ticker or Trading Symbol MINERALS TECHNOLOGIES INC [ MTX								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>JOHNSON KRISTINA M</u>				1				O111 (O2		1201			X Directo	r		10% Ov	vner		
(Last)	_ast) (First) (Middle)				Ľ									Officer below)	(give title		Other (s	specify	
MINERALS TECHNOLOGIES INC.					3. Date of Earliest Transaction (Month/Day/Year)														
					01/0	01/02/2004													
405 LEXINGTON AVENUE						4. If Amendment, Date of Original Filed (Month/Day/Year)							6.1	6. Individual or Joint/Group Filing (Check Applicable					
(Street)								,	3			,	Lin	<del>)</del> )		Ü	`		
NEW YO	RK NY	7 1	0174												,		rting Perso		
,												Form filed by More than One Reporting Person							
(City)	(Sta	ate) (	Zip)																
		Tab	le I - Non	-Deriv	ative	Se	curitie	es Ac	quired, E	Disp	osed	of, or Ber	eficial	y Owned					
1. Title of Security (Instr. 3)  2. Transar Date (Month/Da				Execution D			on Date	Code (Ins					5. Amour Securitie Beneficia Owned F	s F ally ( ollowing (	Form (D) or	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(111301.4)	
		1	Fable II - D									, or Bene ible secu		Owned					
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	oate, T	4. Transactic Code (Inst				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amount or Number of Shares						
PHANTOM STOCK UNITS	\$0 <sup>(1)</sup>	01/02/2004	01/02/20	04	A		32.5		(2)		(2)	COMMON STOCK	32.5	\$59.37	2,883.2	54 <sup>(3)</sup>	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.

## Remarks:

VICTORIA LUKAUSKAS FOR KRISTINA M. JOHNSON

01/05/2004

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.