FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

vvasimigton,	D.O.	200-0	

OI	MB A	PPRC	DVAL	
				_

OMB Number: 3235-0287 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 Eychange Act of 102

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*  PASQUALE MICHAEL F					2. Issuer Name and Ticker or Trading Symbol MINERALS TECHNOLOGIES INC [ MTX ]								_	able)	g Perso	10% Ov	vner		
(Last) (First) (Middle) MINERALS TECHNOLOGIES INC.					3. Date of Earliest Transaction (Month/Day/Year) 01/03/2005								Officer ( below)	give title		Other (s below)	specify		
405 LEXINGTON AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc	6. Individual or Joint/Group Filing (Check Applicable						
(Street) NEW YO	RK NY	· 1	10174											X	Form fil	•		rting Persor One Repor	
(City)	(Sta	ate) (	Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execution Date,		Transaction Disposed Code (Instr.		ities Acquired (A) or d Of (D) (Instr. 3, 4 a		(A) or 3, 4 and 5)	5. Amoun Securities Beneficial Owned Fo Reported	s Form ally (D) o ollowing (I) (Ir		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	/	Amount	Amount (A) or (D)		Price	Transaction	ansaction(s) nstr. 3 and 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/Ye	Cod	nsactio	on of tr. Deri Sec Acq (A) o Disp of (I			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour of Securities Underlying Deriva Security (Instr. 3 a 4)		erivative	8. Price of Derivative Security (Instr. 5)		e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Cod	le V	(A)	(	(D)	Date Exercisable		xpiration ate	Title		Amount or Number of Shares					
PHANTOM STOCK UNITS	\$0 <sup>(1)</sup>	01/03/2005	01/03/2005	A	Ţ	V 45.3	31		(2)		(2)	COMM		45.331	\$66.18	5,162.06	51 <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 REPRESENT DIVIDENDS 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 (I) TO PURCHASE 151 SHARES OF MTX COMMON STOCK AT \$39.53 PER SHARE WHICH BECAME EXERCISABLE IN THREE EQUAL ANNUAL INSTALLMENTS BEGINNING ON JANUARY 28, 2000 AND EXPIRING ON JANUARY 28, 2009 AND (II) TO PURCHASE 168 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 AND EXPIRI

## Remarks:

VICTORIA LUKAUSKAS
FOR MICHAEL F. 01/0
PASQUALE

01/04/2005

Date

\*\* 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.