Instruction 1(b).

FORM 4

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

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
hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1	934
or Section 30(b) of the Investment Company Act of 1940	

1. Name and Address of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer (LARK ROBERT L (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 5. Relationship of Reporting Person(s) to Issuer (Last) (First) (Middle) 0. Date of Earliest Transaction (Month/Day/Year) 0. Other (specify below) 622 THIRD AVENUE 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable) (Street) NEW YORK NY 10017 (City) (State) (Zip) (Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
CLARK ROBERT L MINERALS TECHNOLOGIES INC [MTX] (Check all applicable) (Last) (First) (Middle) 622 THIRD AVENUE 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title Other (specify below) (Street) NEW YORK NY 10017	(City)	(State)	(Zip)			Form filed by More the	an One Reporting Person				
CLARK ROBERT L MINERALS TECHNOLOGIES INC [MTX] (Check all applicable) X Director 10% Owner (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Other (specify below)	· /		10017	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line)	Form filed by One Re	porting Person				
CLARK ROBERT I MINERALS TECHNOLOGIES INC [MTX] (Check all applicable)	. ,	(First) (Middle)									
	1. Name and Address of Reporting Person				(Check	all applicable)					

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)	ction	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(1130.4)

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/Year)	4. Transa Code (8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Phantom Stock Units	(1)	05/15/2019		A		1,901.798		(2)	(2)	Common Stock	1,901.798	\$0	18,203.705	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.

Thomas J. Meek for Robert L. Olark

05/17/2019

** 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.