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, I	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
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1. Name and Address of Reporting Person*  CARMOLA JOHN J						2. Issuer Name and Ticker or Trading Symbol MINERALS TECHNOLOGIES INC    MTX								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
					$1\overline{1}$									X	Directo	or		10% Ov	vner		
(Last)	(5	irst)	(Middle)		- [	1									Officer (give title Obelow) be				pecify		
, ,	`	,	(iviidule)			3. Date of Earliest Transaction (Month/Day/Year)									,			,			
622 THIRD AVENUE							06/17/2021														
38TH FL							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Ctroot)					-   - ' '	1 Ame	indinicint, i	Juic 0	i Originai i	iicu	(WOTH I/DC	ty/ rear)		ine)	ividual of 3	on to Oroup	ı ııııg	(Cricck Ap)	Silcable		
(Street) NEW YO	ORK N	v	10017											X	Form fi	led by One	Repo	orting Perso	1		
	JICIC IV	1	10017												Form fi Person		e than	One Repor	ting		
(City)	(5	itate)	(Zip)												Person						
(City)	(3	nale)	(Zip)																		
		Tab	le I - Nor	ı-Deriv	vativ	e Se	curities	s Acc	quired, I	Dis	posed o	f, or Be	nefici	ally	Owned						
1. Title of S	Security (Ins	tr. 3)		2. Trans	saction					3. 4. Securities Acquired (A)					5. Amou				7. Nature		
Date (Month/D					/Day/Ye	ear)	Execution Date, if any (Month/Day/Year)		Code (Instr.   5)		Disposed Of (D) (Instr. 3, 5)		str. 3, 4 a	ına	Securities Beneficially		Form: Direct (D) or Indirect	of Indirect Beneficial Ownership (Instr. 4)			
						- [								Reported	d i						
									Code	٧	Amount	(A) or (D)		е	Transaction(s) (Instr. 3 and 4)						
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
											onverti										
1. Title of	2.	3. Transaction	3A. Deemed	d	4.		5. Numl	oer	6. Date Ex	ercis	able and	7. Title ar	nd Amou	nt :	B. Price of	9. Number	r of	10.	11. Nature		
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution I		Transa Code (			Expiration Date of Securities (Month/Day/Year) Underlying						Derivative Security			Ownership Form:	p of Indirect Beneficial			
(Instr. 3)		8)		Securities Acquired		Derivative Secu							Beneficial Owned	ally Direct	Direct (D) or Indirect						
Derivative Security							(A) or									Following		(I) (Instr. 4)	(111501.4)		
			Disposed of (D) (Instr.									Reported Transaction(s)									
				L			3, 4 and 5)							_		(Instr. 4)					
													Amou	nt							
									Date	,	Expiration		Numb	er							
					Code	v	(A)		Exercisabl		Date	Title	Share	s L							
Phantom Stock Units	(1)	06/17/2021			A		10.283		(2)		(2)	Common Stock	10.28	33	\$0	16,146.9	009	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 John J. Carmola

06/21/2021

\*\* 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.