FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|-------------------|---------------|------------------|
| | | | |

OMB APPROVAL OMB Number: 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* McLaughlin Erica | | | | | 2. Issuer Name and Ticker or Trading Symbol CABOT CORP [CBT] | | | | | | | | Check all appli Directo | | | 10% | son(s) to Issuer 10% Owner Other (specify | | |
|--|--|------------|------------|---|---|--|-----------------------------------|--|---|---------------|--|---|---|---|---------|---|---|--|--|
| (Last) (First) (Middle) C/O CABOT CORPORATION | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2018 | | | | | | | | Senior Vice President, CFO | | | | | | | |
| (Street) BOSTO | | MA 02210 | | | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | | (Zip) | | | | | | | | | | | | | | | | |
| Table I - Non-Deri 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | ion | n 2A. Deemed Execution Date, | | te, | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect g (I) (Instr. 4) | | Ownership | | | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | | , | | | |
| Common | Common Stock 05 | | 05/15/2 | 018 | 8 | | | A | | 1,839(1) | A | \$0.00 | 11,258 | 3 | D | | | | |
| Common Stock | | | | | | | | | | | | 1.37(2) | I | | ti C | Through the Trustee for the Corporation's 401(k) Plan | | | |
| | | Т | able | | | | | | | | sposed of , converti | | | | | , | | | |
| 1. Title of Derivative Security (Instr. 3) | Title of 2. 3. Transaction 3A. Deemed Execution Date or Exercise (Month/Day/Year) if any | | tion Date, | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | derivative Securities Beneficially Owned | | 10. Owners Form: Direct or India (I) (Inst | ship ([D) (rect (| 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exerc | isable | Expiration Date | Title | Amoun or Numbe of Shares | | | | | | |
| Employee Stock Option (Right to Buy) | \$61.17 | 05/15/2018 | | | A | | 8,910 | | (| 3) | 05/14/2028 | Commor Stock | 8,910 | \$0.00 | | 8,910 | D | | |

Explanation of Responses:

- 1. Reflects units subject to time-based vesting.
- 2. Reflects retirement plan contributions by the Corporation.
- 3. The option vests over a three year period as follows: 30% on November 10, 2018, 30% on November 10, 2019 and 40% on November 10, 2020.

Remarks:

By: Kristine L. Ouimet, pursuant to a power of attorney 05/17/2018 from Erica McLaughlin

** 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.