FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATE	MENT	OF	СНА	NG

OMB APPROVAL 3235-0287 **ES IN BENEFICIAL OWNERSHIP** 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

Name and Address of Reporting Person* CORDEIRO EDUARDO E					2. Issuer Name and Ticker or Trading Symbol CABOT CORP [CBT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner V Officer (give title Other (specify					
(Last) (First) (Middle) C/O CABOT CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 03/09/2018								X Office (give title below) below) Executive Vice President, CFO				
TWO SEAPORT LANE, SUITE 1300 (Street) BOSTON MA 02210 (City) (State) (Zip)				4.	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						
(Oity)				lon Do	rivetis	,,, C,	ouritio.	. ^ -	· auira		ionocod o	of or B	onoficio	Ily Owned				
1. Title of Security (Instr. 3)		2. Transaction 2 Date (Month/Day/Year)		2A. Exe	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported		6. Owners Form: Dire (D) or Indi (I) (Instr. 4	rect Indire rect Bene Owne	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				. 4)		
Common	Common Stock 03/11/2		/2018	18		F		7,330	D	\$62.03	73,956		D					
Common Stock												6,103.86(1)		Trus I the Corp		ough the tee of coration's (k) Plan		
			Table I								posed of, , converti			/ Owned			•	
1. Title of Derivative Security 1. Title of Derivative Security 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Yea			Execution if any			action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		ate	7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	Code	v	/ (A) (I	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Share	s	Trans (Instr	saction(s) : 4)		
Phantom	(2)	02/00/2010	l		١ , ١	I	02.0205		l 6	5)	(3)	Commor	1 02 020		100	112 7267	ь.	

Explanation of Responses:

- 1. Reflects retirement plan contributions by the Corporation, including contributions that have occurred since the date of the reporting person's last ownership report.
- 2. 1 for 1
- 3. Represents dividends paid on phantom stock units acquired under the Corporation's Supplemental 401(k) Plan, and will be settled upon the reporting person's retirement or other termination of employment.

Remarks:

By: Kristine L. Ouimet, pursuant to a power of attorney 03/12/2018 from Eduardo C. Cordeiro

** 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.