FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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OMB APPR	JAVC						
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1. Name and Address of Reporting Person* MACLEOD RODERICK						2. Issuer Name and Ticker or Trading Symbol CABOT CORP [CBT]											ip of Reporting Person(s) to plicable) ctor 10%		on(s) to Is		
(Last) (First) (Middle) C/O CABOT CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 01/12/2007										Office	er (give title w)		Other (specify below)		
TWO SEAP	PORT LA	NE ————————————————————————————————————			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)						
(Street) BOSTON	MA	A 0)2210												X		n filed by Ond n filed by Mod on		•		
(City)	(Sta	ate) (2	Zip)																		
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Acc	uired,	Dis	osed o	f, or	r Bene	eficia	ally C	Owne	ed				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution Date,		Code (Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)					4 and Secur Benef		cially I Following	Form: (D) or	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	. 1	Transaction(s) (Instr. 3 and 4)				(11150.4)				
Common Sto	ock			01/12	12/2007				A		2,500)	A	\$	0	53,100			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
Security or (Instr. 3) Pr	ve Conversion Date Execution Date, Transaction of Code (Instr. Derivativ				ative rities ired osed . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) Amount of Securities Underlying Derivative Security (Inst and 4) Date Expiration Favoreisable Date					ount	nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		vnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Explanation of Responses:

Remarks:

Michaela Allbee, pursuant to a

power of attorney from

01/17/2007

Roderick MacLeod

** 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.