FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C. 20549	

OMB APP	ROVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours per response.	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Sec	ction 30(h)	of the	Investment	Com	pany Act	of 194	0						
Name and Address of Reporting Person*  Keohane Sean D					2. Issuer Name <b>and</b> Ticker or Trading Symbol  CABOT CORP [ CBT ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
											X	Director	or 10% Ov		vner			
(Last)	(F	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/29/2023							X	Officer (g	give title		Other (s	specify	
C/O CABOT CORPORATION					12/2//2025							President and CEO						
TWO SEAPORT LANE, SUITE 1400				Ì	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Ind Line)	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)												X	X Form filed by One Reporting Person					
BOSTO	N M	ΛA	02210										Form filed by More than One Reporting Person					
(City)	(\$	State)	(Zip)		Rule	10b5-1	l(c)	Transa	ctic	n Indi	icatio	on						
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																
		T	able I - Non	-Deriva	tive S	ecuritie	s Ac	quired, [	Disp	osed o	of, or	Bene	ficially	Owned				
Date			2. Transac Date (Month/Da	Execution Date,		Transaction Dis			Securities Acquired (A) of sposed Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount		(A) or (D)	Price	Reported Transactio (Instr. 3 an	ion(s)			(Instr. 4)	
			Table II - I					uired, Di , options						wned				
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/Yea	Code	saction (Instr.	Derivative		6. Date Exercisab Expiration Date (Month/Day/Year)		Securities Unde		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reported	re es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership ct (Instr. 4)	
				Code	, v	(A)	(D)	Date Exercisable		xpiration ate	Title	N:	mount or umber of nares		Transaction(s (Instr. 4)		,	

## **Explanation of Responses:**

(1)

1. 1 for 1

Stock Units

Phantom

2. The reported phantom stock units were acquired under the Corporation's supplemental 401(k) plan and are to be settled upon the reporting person's retirement or other termination of service.

980.8453

(D)

By: Jennifer Lombardi, pursuant

980.8453

to a power of attorney from 01/03/2024

\$83.5

39,406.702

D

Sean D. Keohane

(2)

Commor

\*\* 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).

12/29/2023

\*\* 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.