FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL									
	OMB Number:	3235-0287								
1	Estimated average burden									

0.5

hours per response:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 Instruction 1(b). or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Venchang Comp. D.						2. Issuer Name and Ticker or Trading Symbol CABOT CORP CBT								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Keohane Sean D							1 001		. 02	. 1				X Directo	r		10% Ow	ner		
-					-										(give title	е	Other (sp	pecify		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 11/08/2019								below)						
C/O CABOT CORPORATION														President and CEO						
TWO SEAPORT LANE, SUITE 1300																				
							4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
(Street)														X Form filed by One Reporting Person						
BOSTON MA 02210																- 1				
,					-									Form filed by More than One Reporting Person						
(City) (State) (Zip)																				
		Tal	ole I - I	Non-Der	ivativ	e Se	curities	Ac	quire	ed, D	isposed o	f, or B	eneficia	ally Owned						
1. Title of Security (Instr. 3) 2. Transaction									3.		4. Securities Acquired (A) or			5. Amount of		. Owners		7. Nature of		
Date (Month/Day/					ay/Year)	Year) Execution Date, if any (Month/Day/Year)		·	Transaction Code (Instr. 8)		. 5)			Securities Beneficially	(1	orm: Dire	rect Benefi	Indirect Beneficial Ownership (Instr. 4)		
								ar)						Owned Follow Reported	١,	l) (Instr. 4)				
									Code	V	Amount	(A) or (D)	Price	Transaction(s (Instr. 3 and 4						
Common Stock 11/08/20							19		A		26,876	A	\$0.00	181,547	181,547		D			
Common Stock 11/11/201						19			F		5,594	D	\$49.47	175,953	175,953		D			
								\neg									Thro	ugh the		
						1												tee for		
Common	Stock					1								12,076.7	76	I	the			
						1												oration's		
																	401(k) Plan		
		,	Table	II - Deriv	ative	Secu	urities <i>A</i>	١cq	uired	I, Dis	posed of,	or Be	neficial	ly Owned				·		
				(e.g.,	puts	calls	s, warra	nts	, opt	ions	, convertil	ole sec	urities))						
1. Title of	2.	3. Transaction	3A. Dec		4.	5. Number of Derivative Securities					ercisable and 7. Title and			8. Price of	9. Numl		10.	11. Nature		
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution if any (Month/Day							ration [th/Day		Amount of Securities Underlying Derivative Secur		Derivative Security	derivati Securit		Ownership Form:	of Indirect Beneficial Ownership (Instr. 4)		
(Instr. 3)	Price of Derivative			/Day/Year)	8)		Acquired (A) or Disposed		` '		,			(Instr. 5)	Benefic	cially	Direct (D) or Indirect			
	Security						of (D) (Instr.					(Instr. 3 and 4)		"	Following Reported	ing	(I) (Instr. 4)	(3 4)		
							3, 4 and 5)						1	\dashv	Transac	ction(s)				
					Code	v	(A)	(D)			L	Title	Amount or		(Instr. 4)	')				
									Date Exer	cisable	Expiration Date		Number of Share							
Employee											Ì							Ì		
Stock Option	\$50.23	11/08/2019			A		147,471			(1)	11/07/2029	Comon	147,47	71 \$0.00	549,428		D			
(Right to						,1				11,0,,2525	Stock	","		5,50,	,0	2				

Explanation of Responses:

1. The option vests over a three year period as follows: 30% on November 8, 2020, 30% on November 8, 2021 and 40% on November 8, 2022.

Remarks:

By: Kristine L. Ouimet, pursuant to a power of attorney 11/13/2019 from Sean D. Keohane

** 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.