SEC	Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL						
OMB Number:	3235-0287					
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1. Name and Ad BERUBE 1	dress of Reporting F BRIAN A	Person [*]	2. Issuer Name and Ticker or Trading Symbol <u>CABOT CORP</u> [CBT]		tionship of Reporting Per all applicable) Director	rson(s) to Issuer 10% Owner		
(Last) C/O CABOT	(First)	(Middle) N	3. Date of Earliest Transaction (Month/Day/Year) 05/15/2007	- X	Officer (give title below) Vice President,Ger	Other (specify below) neral Counsel		
TWO SEAPORT LANE, SUITE 1300			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	ndividual or Joint/Group Filing (Check Applicable			
(Street) BOSTON	МА	02210		Line) X	Form filed by One Rep Form filed by More that Person	porting Person		
(City)	(State)	(Zip)						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock	05/15/2007		F		6,520	D	\$45.7	56,952	D		
Common Stock								3,411.0564	Ι	Through the Trustee of the Corporation's Retirement Savings Plan.	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

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/Year)	4. Transa Code (8)		of Deriv Secu Acqu (A) o Disp of (D	r osed) r. 3, 4	Expiration Date Sec (Month/Day/Year) De		Securities Derivative	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Series B ESOP Convertible Preferred Stock	(1)							(2)	(2)	Common stock	8,245.419		56.3296	I	Through the Trustee of the Corporation's Retirement Savings Plan.

Explanation of Responses:

1. Each share is convertible into 146.3782 shares of the Corporation's common stock.

2. Under the Retirement Savings Plan, the Corporation allocates Series B ESOP Convertible Preferred Stock to each participant's account on a quarterly basis. Subject to certain terms and conditions of the Retirement Savings Plan, participants may elect to receive distributions of their vested account balance in the form of shares of the Corporation's common stock or cash. Generally, a participant is 20% vested in his account after 2 years of service with the Corporation; 40% vested after 3 years of service; 60% vested after 4 years of service; and 100% vested after 5 years of service.

Remarks:

<u>Michaela</u>	<u>Allbee</u> ,	<u>pursu</u>	ant	to	а
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power of attorney from Brian 05/17/2007

<u>____</u>

Date

** Signature of Reporting Person

<u>Berube</u>

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.