FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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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 Section 30(h) of the Investment Company Act of 1940

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1. Name and Address of Reporting Person* Keohane Sean D						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					
reolidite Seali D														Office	ctor er (give 1	titla			
						O Data of Fauliant Transaction (Marth/Day/March								X below	titie	Other (specify below)		респу	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 11/24/2015								Executive Vice President				ent		
C/O CABOT CORPORATION				111	11/24/2015								Executive vice Freshen						
TWO SEAPORT LANE, SUITE 1300						4 If Amandment Date of Original Filed (Month/Day 2/2-2)								6. Individual or Joint/Group Filing (Check Applicable					
, <u> </u>					- 4. "	If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)													X Form filed by One Reporting Person						
BOSTON MA 02210														Form filed by More than One Reporting					
(City)	(St	ate) (Zip)											Person					
		Tabl	e I - I	Non-Deriv	ative	Seci	uritie	s Ac	quir	ed, D	isposed o	f, or E	Benefici	ally Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			.	Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount Securities Beneficiall Owned Fol	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 11/24/20)15	.5			A	П	1,449(1)	A	\$0.00	44,5	59 D)			
																		Thro	ugh the
															Trustee for				
Common Stock								ΙI				11,051.	27 ⁽²⁾	I		the			
								ΙI								Corp	oration's		
																	401(k) Plan	
		Та	ble I								oosed of, convertib			y Owned					
		l				,uii3,	_												
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any	Execution Date, if any		4. Transaction Code (Instr. 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ate Exei ration I nth/Day		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Owners Form: Direct (I or Indire (I) (Instr	hip d E D) (ect (11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, (A) (D)		Date Exercisable		Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. Reflects performance based units earned on the basis of the Corporation's performance in fiscal year 2015, which remain subject to time-based vesting.
- 2. Reflects retirement plan contributions by the Corporation, including contributions that have occurred since the date of the reporting person's last ownership report.

Remarks:

By: Kristine L. Ouimet,
pursuant to a power of attorney 11/25/2015
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.