FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB Number: 3235-0104

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or section s	o(ii) oi tile iiiv	vestment Company Act of 1940							
1. Name and Address of Reporting Person* MCCANCE HENRY F				2. Date of Event Requiring Statement (Month/Day/Year) 03/10/2005			3. Issuer Name and Ticker or Trading Symbol CABOT CORP [CBT]							
(Last) C/O CABOT CORF) (First) (Middle) CABOT CORPORATION					Relationship of Reporting Person(s) to Issuer (Check all applicable)					5. If Amendment, Date of Original Filed (Month/Day/Year)			
TWO SEAPORT LANE							X Director Officer (give title below)		10% Owner Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street) BOSTON	MA	02210					,		(-)		Х	,	e Reporting Person re than One Reporting Person	
(City)	(State)	(Zip)												
Table I - Non-Derivative Securities Beneficially Owned														
1. Title of Security (Instr. 4)					2. Amount of (Instr. 4)	f Securities Beneficially Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		n: Direct 4. nstr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock							0	D						
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)														
1. Title of Derivative Se	E	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Der (Instr. 4)		1		Exercise Price of Derivative		5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
				Date Exercisable	Expiration Date	Title		Nu	nount or imber of iares	Security				

Explanation of Responses:

Remarks:

Michaela Allbee, pursuant to a power of attorney from Henry McCance

03/21/2005

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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*If the form is filed by more than one reporting person, see Instruction 5 (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.

POWER OF ATTORNEY

Know all by these presents, that the undersigned hereby constitutes and appoints each of Jane A. Bell, Michaela Allbee and Brian A. Berube, signing singly, the under

(1) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of Cabot Corporation (the "Company"), Forms 3, 4, and

(2) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Form 3, 4, or 5 (incl

) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary,

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with respect to the undersigned's

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 11th day of March, 2005.

/s/ Henry F. McCance

Signature