FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | D.C. 20549 |
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| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|------------------|

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-02 | | | | | | | |
| 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 Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* MCCANCE HENRY F | | | | 2. Issuer Name and Ticker or Trading Symbol CABOT CORP [CBT] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---|--|--|--|--|--|--------------|--|--------|--------------------------|-----------------|---|---|---|---|---|--|
| MCCANCE HEIRKI F | | | | - | | | | | | | | X | Director | | | 10% O | vner |
| (Last) | (F BOT CORP | irst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 03/31/2006 Officer (give title below) | | | | | | | | | | Other (s below) | specify | |
| TWO SE | EAPORT LA | ANE | | 4 | . If Am | endment, | , Date | e of Original Fi | led (| Month/Day/ | Year) | | dividual or Jo | oint/Group | Filing | (Check App | olicable |
| (Street) | N M | IA | 02210 | , | | | | | | | | Line) | Form fil | • | | rting Person One Repon | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | |
| | | Та | ble I - Non-E | Perivati | ive S | ecuriti | es A | cquired, D | Disp | osed of | , or Ben | eficially | Owned | | | | |
| Date | | | Transacti ate lonth/Day | | 2A. Deemed Execution Date if any (Month/Day/Ye | | Code (Instr. | | | | | Beneficial Owned Fo | ly | Form: (D) or | i. Ownership Form: Direct D) or Indirect I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction (Instr. 3 ar | | | | | |
| | | | Table II - De | | | | | quired, Di | • | , | | • | Owned | | | | |
| 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 | Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisab Expiration Date (Month/Day/Year) | | of Securities | | es g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securitie: Beneficia Owned Following Reported Transacti (Instr. 4) | e C S Illy D O (I | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | | piration ate | Title | Amount or Number of Shares | | | | | |
| Phantom Stock Units | (1) | 03/31/2006 | | A | | 279.49 | | 08/08/1988 ⁽²⁾ | 08 | 3/08/1988 ⁽³⁾ | Common Stock | 279.49 | \$33.99 | 279.4 | 19 | D | |

Explanation of Responses:

- 1. 1 for 1
- 2. Immediately exercisable
- 3. The shares of phantom stock become payable in monthly installments upon the reporting person's termination of service as a director.

Remarks:

Michaela Allbee, pursuant to a power of attorney from Henry

McCance ** Signature of Reporting Person

Date

04/04/2006

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.