SEC For	m 4																			
FORM 4			UNITED STATES SECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549															OMB	APPRO	VAI
Section obligat	this box if no le n 16. Form 4 o ions may conti tion 1(b).		STAT		ed pu	A pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									RSHIP			OMB Number: 3235-024 Estimated average burden hours per response: 0		
1. Name and Address of Reporting Person <sup>*</sup> Wolfgruber Matthais L.						2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>CABOT CORP</u> [ CBT ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					wner
	C/O CABOT CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 03/12/2021									Officer (give title Other (specify below) below)					specify
TWO SEAPORT LANE, SUITE 1400       (Street)       BOSTON     MA       02210					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									e) X	X Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(5	State)	(Zip)												Person					
Table I - Non-Deriv       1. Title of Security (Instr. 3)     2. Transa Date (Month/L)				sactio	'n	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			(A) or	or and 5) Beneficially Owned Foll Reported		lly Dilowing	Form:	Direct Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			<u> </u>				Code		Amount	(D)		Price	(1	Transaction(s) (Instr. 3 and 4)						
			Table II -						uired, Dis , options						Owr	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Code (In					6. Date Exe Expiration I (Month/Day	Date	of Securit		ecurities lerlying ivative S	s ecurity	Der Sec	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported	re es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					ode	v			Date Exercisable			or Num		Amount or Number of Shares			Transact (Instr. 4)		<sup>i)</sup>	

Explanation of Responses:

(1)

1. 1 for 1

Phantom

Stock Units

2. Represents dividends paid on phantom stock units acquired under the Corporation's Non-Employee Director's Deferral Plan and will be settled upon the reporting person's termination of service as a director. **Remarks:** 

(2)

## By: Jennifer Lombardi,

96.7885

(2)

Common Stock

pursuant to a power of attorney 03/16/2021 from Matthias L. Wolfgruber

\$53.05

14,767.1525

D

\*\* Signature of Reporting Person Date

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

 $\ast$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

03/12/2021

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

A

96.7885

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.