FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OIVID APPROVAL										
OMB Number:	3235-0287									
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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

1. Name and Address of Reporting Person* CORDEIRO EDUARDO E				2. Issuer Name and Ticker or Trading Symbol CABOT CORP [CBT]								5. Relationship of Reportir (Check all applicable) Director Officer (give title			10%	Ssuer Owner r (specify		
(Last) (First) (Middle) C/O CABOT CORPORATION TWO SEAPORT LANE, SUITE 1300				05	5/10/2	005			`	th/Day/Year	6	X Office (give title String (Specify below) Vice President 6. Individual or Joint/Group Filing (Check Applicable						
(Street) BOSTON	M.	A	02210		_ -	If Amendment, Date of Original Filed (Month/Day/Year)							X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(St	•	(Zip)		<u> </u>													
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/			ction	on 2A. Deemed Execution Date,		3. 4. Secur Transaction Dispose Code (Instr. 5)		4. Securiti	d of, or Benefic ities Acquired (A) or d Of (D) (Instr. 3, 4 and		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			05/10/	2005)05			F		3,053	D	\$29.45	61,40	8	D		
Common Stock												1,537.12		I		hrough the rustee for e orporation's etirement avings Plan		
			Table I								sposed c			ly Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 2. (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 6. (Month/Day/Year) 7. (Month/Day/Year)		on Date,	4. Transa Code (8)		5. Number tion of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivativ Security (Instr. 3 and 4)			9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership t (Instr. 4)			
					Code	v			Date Exercisa	Expirati sable Date		Title	Amount of Number of Shares					
Series B ESOP Convertible Preferred Stock	(1)								(2)		(2)	Common	4,052.13	3	27	7.68	I	Through the Trustee for the Corporation's Retirement Savings Plan

Explanation of Responses:

- 1. Each share is convertible into 146.4 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:

Michaela Allbee, pursuant to a

Power of Attorney from

** Signature of Reporting Person

05/11/2005

Eduardo Cordeiro

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.