SEC Form 4															
FORM	4	UNITED	D STAT	ES S	ECURITIES				ECC	OMMIS	SION				
		Washing	ton, D.C.	2054		OMB APPROV			VAL						
Check this box if no lo Section 16. Form 4 or obligations may contin Instruction 1(b).	pursuar	t to Section 16(a) of the In	curitie		HP OMB Number: 3235-0 Estimated average burden hours per response:			3235-0287 en 0.5							
1. Name and Address of Reporting Person* DELGROSSO DOUGLAS G				2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>CABOT CORP</u> [ CBT ]							5. Relationship of Reporting Person(s) to Is (Check all applicable) X Director 10% 0				
(Last) (Fit	(First) (Middle)				of Earliest Transad 2023	ay/Year)		Officer (give below)			(specify				
C/O CABOT CORPORATION TWO SEAPORT LANE, SUITE 1400				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indi Line) X	, ·				
(Street) BOSTON M.	A	02210									Person				
(City) (St	ate)	(Zip)		Rule 10b5-1(c) Transaction Indication         Check this box to indicate that a transaction was made pursuant to a contract, instrustive defense conditions of Rule 10b5-1(c). See Instruction 10.								uction or written plan that is intended to			
	Tab	le I - Nor	n-Deriva	tive S	ecurities Acq	uired, I	Disp	osed of, o	r Bene	ficially	Owned				
Date			2. Transad Date (Month/Da	ay/Year) Execution Date, if any (Month/Day/Year) B: (Month/Day/Year) (Month/Day/Year) (Mont			4 and Securities Beneficially Owned Follo Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
	•				curities Acqui				Benef		wned				

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)	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		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)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Phantom Stock Units	(1)	06/09/2023		A		26.2817		(2)	(2)	Common Stock	26.2817	\$73.4	4,848.9937	D	

Explanation of Responses:

1.1 for 1

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:** 

> By: Jennifer Lombardi, pursuant to a power of attorney 06/13/2023

from Douglas G. Del Grosso

\*\* Signature of Reporting Person

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).

\*\* 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.

Date