## Edgar Filing: CABOT CORP - Form 4

CABOT CO Form 4	ORP												
May 15, 20	08												
FORM		STATES	SECU	DITIES		FVC	ч <b>U</b> г	ANCE	COMMISSIC	NT.	IB API	PROVAL	
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						N OMB		3235-0287				
if no lo	nger						CT			Expire	s:	January 31, 2005	
subject Section Form 4	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP ( Section 16. SECURITIES Form 4 or						VNEKSHIP O	Estima burden	Estimated average burden hours per response 0				
Form 5 obligati may con <i>See</i> Inst 1(b).	ons ntinue. Section 17	(a) of the	Public U		olding	Com	par	ny Act o	ge Act of 1934 of 1935 or Sect 940				
(Print or Type	Responses)												
1. Name and Address of Reporting Person <u>*</u> CORDEIRO EDUARDO E			2. Issuer Name <b>and</b> Ticker or Trading Symbol CABOT CORP [CBT]						5. Relationship of Reporting Person(s) to Issuer				
(Last)						(Cl	Check all applicable)						
C/O CABOT CORPORATION, TWO SEAPORT LANE			(Month/Day/Year) 05/13/2008						Director 10% Owner X Officer (give title Other (specify below) below) Vice President				
]			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
BOSTON,	MA 02210								Person	y whole that o	ne rep	Julig	
(City)	(State)	(Zip)	Tal	ble I - Noi	n-Deriva	tive S	Secu	irities Ac	equired, Disposed	l of, or Bene	ficially	Owned	
1.Title of Security (Instr. 3)	(Month/Day/Year) Execution Date, if Transaction(A) or any Code (Instr. 1 (Month/Day/Year) (Instr. 8)		Dispo 3, 4 a (4	osec and a A) or	d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	auritiesOwnershipneficiallyForm:medDirect (D)lowingor Indirectported(I)nsaction(s)(Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common	05/12/2000				/ Amou		D)	Price \$		D			
Stock	05/13/2008			F	8,174	D	)	32.37	98,287	D			
Common Stock									2,174.7005 (1)	I	Tru the Cor Ret	ough the stees for poration's irement ings Plan	

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

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Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Date

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address								
	Director	10% Owner	Officer	Other				
CORDEIRO EDUARDO E C/O CABOT CORPORATION TWO SEAPORT LANE BOSTON, MA 02210			Vice President					
Signatures								
By: Jane A. Bell, pursuant to a power of attorney from Eduardo E. 05/15/2								

En, pursuant to a power of attorney from Eduardo E Cordeiro

\*\*Signature of Reporting Person

## **Explanation of Responses:**

- \* 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).
- Reflects retirement plan contributions by the Corporation, including contributions that have occurred since the date of the reporting (1) person's last ownership report.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.