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Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed p	D STATES SECU W CMENT OF CHA ursuant to Section 7(a) of the Public 30(h) of the	V ashingto ANGES II SECU n 16(a) of Utility Ho	n, D.C. 209 N BENEFI JRITIES the Securiti olding Com	549 CIAI ies Ex ipany	L OWN	NERSHIP OF e Act of 1934, 1935 or Sectio	OMB Number: Expires: Estimated burden h response	•
(Print or Type Responses)								
1. Name and Address of Reportin BERUBE BRIAN A	Symbo		nd Ticker or ' P [CBT]	Tradin	g	5. Relationship of Issuer		
(Last) (First) C/O CABOT CORPORATION, TWO S LANE, SUITE 1300	(Middle) 3. Data (Mont 06/21		Transaction			Director X Officer (give below)		0% Owner Other (specify
(Street)		mendment, Month/Day/Y	Date Original ear)			6. Individual or Jo Applicable Line) _X_ Form filed by 0 Form filed by N	One Reporting	Person
BOSTON, MA 02210						Person	nore than one	Reporting
(City) (State)	(Zip) T	able I - Nor	n-Derivative S	Securi	ties Acq	uired, Disposed o	f, or Benefic	ially Owned
1.Title of Security (Instr. 3)2. Transaction Dat (Month/Day/Year)	e 2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transacti Code (Instr. 8) Code V	4. Securities onor Disposed (Instr. 3, 4 a Amount	of (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common 06/21/2007 Stock		C	6,366.72		\$ 47.12	9,803.11	I	Through the Trustee of the Corporation's Retirement Savings Plan.
Common 06/21/2007 Stock		Ι	6,366.72	D	\$ 47.12	3,436.39	I	Through the Trustee of the Corporation's Retirement Savings Plan.
						43,472	D	

Common Stock

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Series B ESOP Convertible Preferred Stock	<u>(1)</u>	06/21/2007		С	43.495	(2)	(2)	Common stock	6,366.72

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Plane / Planess	Director	10% Owner	Officer	Other			
BERUBE BRIAN A C/O CABOT CORPORATION TWO SEAPORT LANE, SUITE 1300 BOSTON, MA 02210			Vice President, General Counsel				
Signatures							
Jane A. Bell, pursuant to a power of attorney from Brian Berube		06/22/2007					
**Signature of Reporting Perso	n		Date				
Explanation of Respon	ses:						
* If the form is filed by more than one reportin	g person, s	ee 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).

(1) Each share is convertible into 146.3782 shares of the Corporation's common stock.

(2)

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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.

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.