Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	STATE
Check this box if no longer subject to	SIAIE
Section 16. Form 4 or Form 5	
obligations may continue. See	

MENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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* Schwartz Gil D					2. Issuer Name and Ticker or Trading Symbol CBS CORP [CBS, CBS.A]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) 51 WES	(F Γ 52ND ST	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/18/2016									X	Officer (give title Other (see below) Sr.EVP, Chief Commun. Office			·	
(Street)	ORK N	ΙΥ	10019		4. If Amendment, Date of 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 Person					
(City)	(5	State)	(Zip)												1 013011				
		Tak	ole I - Non-	Deriva	tive	Sec	urities	s Ac	quired, I	Disp	osed of	f, or Be	nefici	ally	Owned				
Date				2. Transac Date (Month/Da		r) Ex	2A. Deemed Execution Date if any (Month/Day/Yea		Code (Instr					4 and Securiti Benefici Owned		s Illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) c	r Pric	е	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
	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 Da if any (Month/Day/Y	Co	l. Transaction Code (Instr.				6. Date Exercis: Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		(8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
				Co	ode V	,	(A)	(D)	Date Exercisable		Expiration Date	Title	Amou or Numb of Share	er					
Employee Stock Option (right to buy) ⁽¹⁾	\$45.79	02/18/2016		I	A		52,373		02/18/2017	(2)	02/18/2024	CBS Class B common stock	52,3'	73 5	\$0.0000 ⁽¹⁾	52,373	3	D	
Restricted Share Units ⁽³⁾	(4)	02/18/2016		I	A		10,482		02/18/2017	(4)	(4)	CBS Class B common stock	10,48	82 8	\$0.0000 ⁽³⁾	10,482	2	D	
Restricted Share Units ⁽³⁾	(5)	02/18/2016		A	(6)		7,190		02/19/2016	(5)	(5)	CBS Class B common	7,19	0 8	\$0.0000 ⁽³⁾	13,992	2	D	

Explanation of Responses:

- 1. Right to buy under Issuer's long term incentive plan.
- 2. This option vests in four equal annual installments beginning on February 18, 2017.
- 3. Granted under the Issuer's long term incentive plan.
- 4. These Restricted Share Units vest in four equal annual installments beginning on February 18, 2017 and are settled by delivery of a corresponding number of the Issuer's shares upon vesting.
- 5. These Restricted Share Units vest in four equal annual installments beginning on February 19, 2016 and are settled by delivery of a corresponding number of the Issuer's shares upon vesting.
- 6. On February 18, 2016, the performance target associated with these Restricted Share Units was certified as having been achieved.

/s/ Kimberly D. Pittman, 02/19/2016 Attorney-in-fact

** Signature of Reporting Person 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.