Instruction 1(b)

FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |

Estimated average burden hours per response: 0.5

| | | | | | or | Section | n 30(h) | of the | Ínvestme | nt Co | mpany Act | of 1940 |) | | | | | | | |
|---|---|--|--|----------|------------------|---|-----------------|---|--|--|-----------------------|---|-------------------|-----------|---|---|---------------|--|---|--|
| Name and Address of Reporting Person* COUNTRYMAN GARY L | | | | | | 2. Issuer Name and Ticker or Trading Symbol CBS CORP [CBS, CBS.A] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| COUNTRYMAN GARY L | | | | | | | _ | -, | _ | | | | | X Directo | or | | 10% Ov | wner | | |
| (Last) | (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/15/2013 | | | | | | | | | Officer (give title below) | | | Other (s below) | specify | |
| SI WEST SEND STREET | | | | | | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6 Ir | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) | | | | | 4.1 | AIIICI | iument, | Date | or Origina | u ruet | ı (MOHUI) Da | ıyı rear, | , | Line | | Joint/Group | , Lilling | (Check Ap | plicable | |
| NEW YO | ORK N | Y | 10019 | | | | | | | | | | | | X Form f | iled by One | Repo | orting Perso | n | |
| | | | | | | | | | | | | | Form f Persor | | e thar | One Repo | rting | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Non | n-Deriva | ative | e Sec | uritie | s Ac | quired | , Dis | posed o | f, or I | Bene | ficial | ly Owned | i | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | ar) E | xecution any | a. Deemed ecution Date, any onth/Day/Year) | | 3. 4. Securit Transaction Disposed Code (Instr. 8) | | ties Acquired (A) I Of (D) (Instr. 3, | | | | es ally Following | Form (D) o | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | | v | Amount (A) or (D) | | () or () | Price | Reporte Transac (Instr. 3 | tion(s) | | | (Instr. 4) | |
| | | 7 | Fable II - I | | | | | | | | osed of, convertil | | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, T | Transa Code (| | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | c | Code | v | (A) | | Date Exercisa | ble | Expiration Date | Title | OI No Of | umber | | | | | | |
| Restricted | | | | | | | | Π | | I | | CBS | 5_ ⁻ | | | | I | | | |

Explanation of Responses:

(2)

Share Units⁽¹⁾

1. Granted under the Issuer's RSU Plan for Outside Directors.

02/15/2013

2. The Restricted Share Units will vest on February 15, 2014 and will be settled by delivery of a corresponding number of shares of the Issuer's Class B Common Stock upon vesting, unless the Reporting Person has elected to defer settlement.

02/15/2014⁽²⁾

/s/ Angeline C. Straka, Attorney-in-fact

3,809

\$0.0000(1)

Class B

commor stock

(2)

** Signature of Reporting Person

Date

3,809

02/20/2013

D

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.