## 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

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|             |      |       |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| Instruction 1(b).  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*  ANDELMAN DAVID R  2. Issuer Name and Ticker or Trading Symbol  CBS CORP [ CBS, CBS.A ]  3. Date of Earliest Transaction (Month/Day/Year)  Officer (give title below)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  1. Title of Security (Instr. 3)  Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Securities Person(s) to (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  X Director 10% Officer (give title below)  And Date (Check all applicable)  Y Disposed  | Schor   |  |
|--|---|--|
| ANDELMAN DAVID R  (Last) (First) (Middle)  51 WEST 52ND STREET  (Street) NEW YORK NY  (City) (State)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  1. Title of Security (Instr. 3)  (Check all applicable) X Director 10% Officer (give title below)  And David D | ccuor   |  |
| (Last) (First) (Middle)  51 WEST 52ND STREET  4. If Amendment, Date of Original Filed (Month/Day/Year)  (Street)  NEW YORK NY  10019  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  1. Title of Security (Instr. 3)  Officer (give title below)  Othe below  Othe below  Othe below  Officer (give title below)  A. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Line)  X Form filed by One Reporting Person  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  1. Title of Security (Instr. 3)  2. Transaction  2. Transaction  2. Transaction  2. Transaction  3. 4. Securities Acquired (A) or  5. Amount of  6. Ownership   |   |  |
| (Street) NEW YORK NY 10019  (City) (State) (Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  1. Title of Security (Instr. 3)  2. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership  | (specify  |  |
| 1. Title of Security (Instr. 3)  2. Transaction  2. Deemed  3.  4. Securities Acquired (A) or  5. Amount of  6. Ownership  | son   |  |
|  |   |  |
| (Month/Day/Year)   if any   Code (Instr.   5)   Beneficially   (D) or Indirect   (Month/Day/Year)   8)   Owned Following   (I) (Instr. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |
| Code V Amount (A) or (D) Price (Instr. 3 and 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) Price of Derivative Security Security (Instr. 3) Price of Derivative Security Security Security Price of Derivative Security Securi | Beneficial<br>Ownership<br>(Instr. 4)               |  |

## **Explanation of Responses:**

(1)

(1)

1. Reporting Person has elected to defer payment of Board retainer and fees pursuant to the Issuer's deferred compensation arrangement for directors. Deferred amounts (including any cash dividends credited during the previous quarter) are deemed invested quarterly in the number of Phantom Common Stock Units equal to the number of shares of Class A and Class B Common Stock that such amounts would have purchased when converted. Phantom Common Stock Units are paid out after the Director's retirement from the Board and are settled in cash.

Date

Exercisable

(1)

(1)

Expiration

(1)

(1)

Title

CBS

Class A

commor

stock

CBS

Class B

commor

Date

## Remarks:

Phantom

Class A

Common

Stock

Units Phantom

Class B

Common

Stock Units

07/05/2006 /s/ Andelman, David R.

\*\* Signature of Reporting Person Date

Number

of Shares

368

368

\$27.06

\$27.05

3,555

3,573

D

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).

07/01/2006

07/01/2006

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

A

Α

(A) (D)

368

368

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.