FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

Washington, D.C. 20549	
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or Section 30(h) of the Investment Company Act of 1940

3 ,	OMB APPRO				
ES IN BENEFICIAL OWNERSHIP	OMB Number:	-;			

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWN
obligations may continue. See Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

Name and Address of Reporting Person* Mayria Dayra						2. Issuer Name and Ticker or Trading Symbol CBS CORP [CBS, CBS.A]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Morris Doug					٦									X	Direct	or		10% O	wner	
(Last) 51 WES	(F Γ 52ND ST	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/01/2009									Officer (give title below)			Other (specify below)		
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)						monanes, sale of original rived (monanesay) real)								Line)						
NEW YORK NY 10019														X Form filed by One Reporting Person						
					_									Form filed by More than One Reporting						
(City)	(\$	tate)	(Zip)											Person						
(City)	(3	tate)	(Ζιρ)																	
		Tab	le I - Non	n-Deriv	vative	e Se	curitie	s Ac	cquired,	Disp	osed o	of, or Bo	enefici	ally O	wne	d				
1. Title of Security (Instr. 3) 2. Trans Date (Month					ction 2A. Deemed Execution Dat if any (Month/Day/Yo			Code (I					, 4 and Secur Benef Owne		ies ially Following	Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial Ownership		
										v	Amount	(A) (D)	or Pric	, т		ed ction(s) and 4)			(Instr. 4)	
		T	able II - [Deriva	tive S	Secu	rities	Aca	uired, Di	spo	sed of.	or Ben	eficial	lv Ow	ned					
									s, options											
1. Title of Derivative Security (Instr. 3)	1. Title of Derivative Conversion Date Courty or Exercise (Month/Day/Year) 3A. Deemed Execution Date, 17rar Cod			Transa Code (5. Nun of Deriva Securi Acquii (A) or Dispos of (D) (Instr. and 5)	tive ties ed	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			of s ng e	8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares							
Phantom Class A Common Stock Units	\$0 ⁽¹⁾	07/01/2009			A		1,544		(1)		(1)	CBS Class A common stock	1,544	\$6	.95	9,188		D		
Phantom Class B Common Stock Units	\$0 ⁽¹⁾	07/01/2009			A		1,546		(1)		(1)	CBS Class B common stock	1,546	\$6	.94	9,246		D		

Explanation of Responses:

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.

Remarks:

<u>Doug Morris</u> <u>07/06/2009</u>

** 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.