FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL						
l	OMB Number:	3235-0287						
l	Estimated average burden							
l	hours per response:	0.5						

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

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1. Name and Address of Reporting Person* <u>Ianniello Joseph R</u>							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	st) (First) (Middle) WEST 52ND STREET						f Earlie	est Tran	saction (M	onth/	Day/Year)		X	Officer (give title below) Chief Opera		Other (spec below) ating Officer		specify			
Street) NEW YORK NY 10019					- 4. I	f Ame	ndmer	nt, Date	of Original	Filed	l (Month/Da		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting								
(City)	(S	tate)	(Zip)												Persor		TC tricer	опеттеро			
4 == 11 . 6.4			le I - No	1					-	Dis	posed o						la o		7. Nature		
1. Title of Security (Instr. 3) 2. Tran Date (Month					n/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.						5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct Indirect str. 4)	of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	r Price	:	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
CBS Clas	s B commo	on stock		06/04	4/2014	4			М		7,635	A	\$0	(1)	181	,153		D			
CBS Class B common stock 06/04/						/2014					4,255	D	\$59	.84	176,898			D			
CBS Class B common stock															3,	854			By 401(k)		
CBS Class B common stock															2,	303		I	By Spouse - 401(k) Plan ⁽²⁾		
		7									osed of, convertib				wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Execution if any (Month/Da	Date,	Code (Ins		n of		6. Date Ex Expiration (Month/Da	Date	:	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		D	Price of erivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amour or Number of Shares	er							
Restricted Share Units ⁽³⁾	(4)	06/04/2014			M			7,635	06/04/2014	4 ⁽⁴⁾	(4)	CBS Class B common	7,635	5 :	\$0.0000	22,908	8	D			

Explanation of Responses:

- $1.\ On\ June\ 4,\ 2014,\ the\ closing\ price\ of\ the\ CBS\ Class\ B\ common\ stock\ on\ the\ NYSE\ was\ \$59.84.$
- 2. The Reporting Person disclaims beneficial ownership of these securities and this report shall not be deemed an admission that the Reporting Person is the beneficial owner of such securities for purposes of Section 16 or any other purposes.
- 3. Granted under the Issuer's long term incentive plan.
- 4. The Restricted Share Units will vest in four equal annual installments beginning on June 4, 2013 and will be settled by delivery of a corresponding number of the Issuer's shares upon vesting.

/s/ Joseph R. Ianniello 06/06/2014

** 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.