FORM 4

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to | STATEMENT OF CHA |
|--|------------------|
| Section 16. Form 4 or Form 5 | |

ANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* ANDELMAN DAVID R | | | | 2. Issuer Name and Ticker or Trading Symbol CBS CORP [CBS, CBS.A] | | | | | | | | 5. Relationship of Repo (Check all applicable) X Director | | | ing Person(s) to Issuer 10% Owner | | | |
|--|--|--|--|---|--------------|---|-----|---------|---|---|--|---|--|--|---|--|---|--|
| (Last) 51 WES | (Fi Γ 52ND ST | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/01/2010 | | | | | | | | | office elow | r (give title ') | Other below) | (specify |
| (Street) NEW YO | EW YORK NY 10019 | | | | 4. If | 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 | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/L | | | | ate | Execution Da | | | on Date | Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | nd Securi Benefi Owned | | ies F ially (Following (| 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | (A) or (D) | | Tra | Reported Transaction(s) Instr. 3 and 4) | | | (Instr. 4) |
| | | Ta | able II - De (e. | | | | | | uired, Dis | | | | | | ed | | | |
| 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 | ed 4. Date, Transacti | | ction | | | 6. Date Exercisal Expiration Date (Month/Day/Year | | ole and | | | 8. Price Derivat Securit (Instr. 5 | derivative y Securities Beneficial Owned Following Reported | Following Reported Transaction(s | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | С | Code | v | (A) | (D) | Date Exercisable | | piration te | Title | Amount or Number of Shares | | | | | |
| Phantom Class A Common Stock Units | \$0 ⁽¹⁾ | 01/01/2010 | | | A | | 725 | | (1) | | (1) | CBS Class A common stock | 725 | \$14.0 | 7 | 15,323 | D | |
| Phantom Class B Common Stock Units | \$0 ⁽¹⁾ | 01/01/2010 | | | A | | 726 | | (1) | | (1) | CBS Class B common stock | 726 | \$14.0 | 5 | 15,400 | 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:

David R. Andelman

01/05/2010

** 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.