FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
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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*						2. Issuer Name and Ticker or Trading Symbol CBS CORP [CBS, CBS.A]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
REDSTONE SHARI													X	Direc	tor	10% (Owner
(Last) (First) (Middle)					Date of Earliest Transaction (Month/Day/Year)								X	Office	er (give title v)	Other below	(specify)
51 WEST 52ND STREET					07/01/2011								Vice Chair				
OI WES	1 32ND 31	KEEI															
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				
NEW Y	ORK N	NY 10019											X Form filed by One Reporting Person				
			-									Form filed by More than One Reporting Person					
(City) (State) (Zip)														reisi	ווכ		
		Tab	le I - Non-Dei	ivativ	e Sec	uriti	es A	cquired, [Disp	osed (of, or B	enefic	ially C	Owne	d		
1. Title of	nsaction				3.		4. Securities Acquired (A)				5. Amo		6. Ownership	7. Nature of Indirect Beneficial			
Da (N				h/Day/Ye	ear) if	Execution Date if any		Code (Instr.				nstr. 3, 4	Benefi		cially	Form: Direct (D) or Indirect	
ľ					(1	(Month/Day/Yea		ear) 8)						Owned Report		(I) (Instr. 4)	Ownership (Instr. 4)
								Code	v	Amount	(A) (D)	or Pri	~ ·	Transaction(s)			(
		_									' /	- ·			, ,		
		Та	able II - Deriv e.g					juired, Dis s, options						ned			
1. Title of	2.	4.	-		ımber	6. Date Exercisable and 7. Title and					_	ice of	9. Number o	f 10.	11. Nature		
Derivative	Conversion or Exercise		3A. Deemed Execution Date, if any	Transa		of		Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Instr. 3		Deriv	erivative ecurity	derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form:	of Indirect Beneficial
Security (Instr. 3)	Price of	(Month/Day/Year)	(Month/Day/Year)	Code 8)	(IIISII.								(Instr. 5)			Direct (D)	Ownership
	Derivative Security															or Indirect (I) (Instr. 4)	(Instr. 4)
							osed			and 4)		(1	
						of (D) (Instr. 3, 4 and 5)									(Instr. 4)	(S)	
									Т			Amoun	t				
												or Numbe	r				
				Code	l _v	(A)	(D)	Date Exercisable		oiration e	Title	of Shares					
Phantom				1		 	, ,		-				+			_	
Class A	(1)	0=/01/0011		Ι.		l		(1)		(1)	CBS Class A	441					
Common Stock	(1)	07/01/2011		A		441		(1)		(1)	common	441	\$28	3.96	6,826	D	
Units											stock						
Phantom											CBS						
Class B Common	(1)	07/01/2011		A		448		(1)		(1)	Class B	448	\$28	3.55	6,840	D	
Stock Units											common stock						

Explanation of Responses:

1. Reporting Person has elected to defer payment of Board/Committee fees, as applicable, 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.

> /s/ Angeline C. Straka, 07/06/2011 Attorney-in-fact

** 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.