П

## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

hours per response:	0.5
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	hours per response:

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1. Name and Address of Reporting Person* ANDELMAN DAVID R						2. Issuer Name and Ticker or Trading Symbol <u>CBS CORP</u> [ CBS, CBS.A ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
														Х					-
(Last) 51 WES	(F T 52ND ST	_	3. Date of Earliest Transaction (Month/Day/Year) 01/01/2011									Office belov	er (give title v)		Other (specify below)				
			4 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)											Line)								
	א אפר	V	10019											Х	Form	n filed by One	e Rep	porting Perse	on
	VEW YORK NY 10019										Form filed by More than One Reporting								
,					-									Person					
(City)	(S	tate)	(Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) Date (Month/I						ar) if	A. Deemed Execution Date, f any		Code (Instr. 5)				Securit Benefi	ties Fo cially (D		6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial		
							(Month/Day/Ye			r) 8)					Owned Report			(Instr. 4)	Ownership (Instr. 4)
									Code	v	Amount	t (A)	or Prie	ce		ction(s)			. ,
<u> </u>	(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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		ransaction Code (Instr.		imber vative irities iired r osed ) r. 3, 4 5)	6. Date Exercisable Expiration Date (Month/Day/Year)			e and Amount of Securities Underlying Derivative Security (Ir and 4)		Der Sec	Price of ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	/	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	Amoun or Numbe of Shares	r					
Phantom Class A Common Stock Units	(1)	01/01/2011			A		581		(1)		(1)	CBS Class A common stock	581	\$1	19.03	18,011		D	
Phantom Class B Common Stock Units	(1)	01/01/2011			A		580		(1)		(1)	CBS Class B common stock	580	\$:	19.05	18,086		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.

\*\* 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.