FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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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* Ambrosio Anthony G						2. Issuer Name and Ticker or Trading Symbol CBS CORP [CBS, CBS.A]									all applic Directo	,		n(s) to Iss 10% Ov Other (s	vner
(Last) (First) (Middle) 51 WEST 52ND STREET						3. Date of Earliest Transaction (Month/Day/Year) 04/15/2011									below)	P, HR &	Admin	below)	specify
(Street) NEW YORK NY 10019 (City) (State) (Zip)					4.1	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					
(City)				Non-Der	 ivativ	e Se	curit	ies A	cquire	ed, D	isposed o	f, or B	Seneficia	ally	Owned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day)				tion	2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Disposed Of	(A) or		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3 a	ion(s)		(Instr. 4)
CBS Class B common stock 04/15/20					2011	1			M		20,200	A	\$5.2	99,698		698	D		
CBS Class B common stock 04/15/20:					2011	.1			S ⁽¹⁾		20,200	D	\$24.483	35 ⁽²⁾ 79		498)	
CBS Class B common stock														4,133		I		3y 401(k)	
CBS Class B common stock														1.4598		I		By Custodian For Child	
			Table								sposed of, , converti				wned				
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution urity or Exercise (Month/Day/Year) if any		on Date, Tran		nsaction of Der Sec Acq (A) Disp of (I		umber vative urities uired or oosed o) (Instr. and 5)	6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title Amour Securi Under Deriva Securi and 4)	nt of ties lying tive ty (Instr. 3	S	E. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e C s F ally C g (LO. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amour or Number of Shares	er					
Employee Stock Option (right to	\$5.2	04/15/2011			M			20,200	02/24/	/2010 ⁽⁴	02/24/2017	CBS Class commo	B 20,20	00	\$0.0000	384,54	49	D	

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 29, 2010.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices from \$24.22 to \$24.99, inclusive. The reporting person undertakes to provide upon request by the staff of the U.S. Securities and Exchange Commission, the Issuer or any security holder of the Issuer, full information regarding the number of shares sold at each separate price within the range set forth in
- 3. Right to buy under Issuer's long term incentive plan.
- 4. These options vest in four equal annual installments beginning on February 24, 2010.

/s/ Angeline C. Straka, Attorney-in-fact

04/19/2011

** 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.