FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

	OWD 74 TTG	J V/ (L
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287
OTATEMENT OF STIANOES IN BENEFICIAL SYNEROIM	Estimated average burd	den

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* SALERNO FREDERIC V					2. Issuer Name and Ticker or Trading Symbol CBS CORP [CBS, CBS.A]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
SALLKINO I KLDLKIC V					1										X Director			10% O	wner	
(Last) 51 WES) (First) (Middle) VEST 52ND STREET					3. Date of Earliest Transaction (Month/Day/Year) 10/01/2010									Office below	er (give title v)		Other (below)	specify	
					4 If	Amer	ndmen	t Date	of Original F	iled i	(Month/Γ)av/Year)		6 Indiv	idual or	.loint/Groun	Filina	ı (Check Aı	nnlicable	
(0)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NEW Y(NEW YORK NY 10019													X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)			Person									on					
		Tab	le I - Non-[Deriva	ative	Sec	uritie	es A	cquired, [Disp	osed	of, or B	enefic	ially	Owne	d				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Executio			on Date	Code (Ir	Transaction Dispose Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3, 4			5. Amo Securit Benefic Owned Report	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	or Pri	се	Transa	ransaction(s) nstr. 3 and 4)			(iiisti. 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. Deemed Execution Da if any (Month/Day/Y	~ c	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisal Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Der	Price of ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F D O (I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				С	ode	v	(A)	(D)	Date Exercisable		piration te	Title	Amoun or Numbe of Shares	r						
Phantom Class A Common Stock Units	(1)	10/01/2010			A		619		(1)		(1)	CBS Class A common stock	619	\$1	16.36	13,592		D		
Phantom Class B Common Stock	(1)	10/01/2010			A		618		(1)		(1)	CBS Class B common stock	618	\$1	16.38	13,648		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.

> /s/ Frederic V. Salerno 10/04/2010 ** 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.