FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-0287
Estimated average b	ourden

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

hours per response: 0.5 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* REDSTONE SUMNER M					2. Issuer Name and Ticker or Trading Symbol CBS CORP [CBS, CBS.A] 5. Relationshi (Check all ap											able)	g Perso			
(Last) 51 WEST 5	(Firs	,	iddle)		3. Date of Earliest Transaction (Mon 10/29/2014						Day/Year)			X	below)	give title Executive	Other (below) Chairman		specify	
(Street) NEW YOR (City)	K NY		0019 (p)		4. If A	mendr	ment,	Date of	Original	Filed	(Month/Day/	Year)		. Indivine)	,					
1. Title of Security (Instr. 3) 2. Tran: Date					rative Securities Acq ction ay/Year) 2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transa Code (8)	ction	4. Securities Disposed Of	(A) or		5. Amour Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)	
CBS Class l	10/29/	2014				M		47,800	A	\$30.	.21 250		,293	D						
CBS Class 1	CBS Class B common stock 1					/2014					47,800	D	\$54.0)6 ⁽¹⁾	202,493		D			
CBS Class l													9,62	7,200		I	By NAI and NAI EH ⁽²⁾			
		Ta									osed of, c				wned			'		
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,	4. Transa Code (l 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	tion D		7. Title at Amount of Securitie Underlyin Derivativ Security and 4)	of s ng e	[8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficial Owned Following Reported Transacti (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er						
Stock Option	\$30.21	10/29/2014			M			47,800	(3))	03/16/2015	CBS Class B	47,80	00 8	\$0.0000 ⁽¹⁾	668,6	69	D		

Explanation of Responses:

1. In accordance with the Reporting Person's employment agreement with the Issuer, on March 16, 2007, the Reporting Person's deferred compensation account balance with the Issuer was converted into Stock Option Equivalents ("SOEs") that expire on March 16, 2015. Each SOE corresponds to one share of the Issuer's Class B Common Stock and, when notionally exercised, results in a credit (no shares are issued) in the Reporting Person's deferred compensation account equal to the difference between the closing price of the Class B Common Stock on the New York Stock Exchange on the date of exercise and the exercise price of the SOEs. The notional exercise reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on May 16, 2014.

2. Of these securities, (i) 3,827,200 shares are owned directly by NAI Entertainment Holdings LLC (NAI EH). The shares owned directly by NAI EH may also be deemed to be beneficially owned by NAI, and such shares, as well as the shares owned directly by NAI, may also be deemed to be beneficially owned by Summer M. Redstone, who is the controlling stockholder of NAI.

3. Current.

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

stock

10/30/2014

** 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.