FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

9.011, 2.0. 200 10	│ OMB APPROVAL

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

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]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify						
(Last) (First) (Middle) 51 WEST 52ND STREET						3. Date of Earliest Transaction (Month/Day/Year) 04/03/2009											below	elow)		other (specing below) Administration		
(Street) NEW YORK NY 10019					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)											Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S		(Zip) le I - No	n-Deriv	vative	Se	curiti	es A	can	iired	Dis	nosed	of o	. Bei	neficia	ally O	wne	·d				
1. Title of Security (Instr. 3) 2. Transplate (Month/I			action	ar) it	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (I	ction	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)				or 5. Amou Securiti Benefic Owned		unt of es ially Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
										Code V		Amount (A) or (D)		Price	e Reporte Transac (Instr. 3		tion(s)			(Instr. 4)		
CBS Class B common stock					04/03/2009							506	A \$		\$ <mark>0</mark> (1)	37,249(2)			D		
CBS Class B common stock 0					04/03/2009							172		D	\$4.8	\$4.85		37,077		D		
CBS Class B common stock																		2,958			By 401(k)	
CBS Class B common stock																	1.364			I	By Custodian For Child	
	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. Deem Execution if any (Month/Da	Date,	4. Transa Code (8)					Date Exe piration onth/Day	Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		str. 3	8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V		v	(A)	(D)	Dat Exe	te ercisabl		xpiration ate	Title	0 1 0 3	Amount or Number of Shares							
Restricted		I				1		1	1		- 1		CB	s I		1					1	

04/03/2009

Explanation of Responses:

\$0⁽⁴⁾

1. On April 3, 2009, the closing price of the CBS Class B common stock on the NYSE was \$4.85.

04/03/2009

- 2. Includes shares acquired periodically pursuant to a dividend reinvestment program meeting the requirements of Rule 16a-11
- 3. Granted under the Issuer's long term incentive plan.
- 4. The Restricted Share Units are settled by delivery of a corresponding number of the Issuer's shares upon vesting.

Remarks:

Restricted

Share Units⁽³⁾

Anthony G. Ambrosio

506

\$<mark>0</mark>

Class B

commor

(4)

04/07/2009

0

D

** 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.