FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
bligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

1. Name and Address of Reporting Person* Ambrosio Anthony G							2. Issuer Name and Ticker or Trading Symbol CBS CORP [CBS, CBS.A]								c all applic Director	able) r	g Pers	on(s) to Iss	wner	
(Last) (First) (Middle) 51 WEST 52ND STREET						3. Date of Earliest Transaction (Month/Day/Year) 08/12/2011								X Officer (give title Other (specify below) below) EVP, HR & Administration						
(Street) NEW YORK NY 10019					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					
(City)	(5	State)	(Zip)												Person					
		Tak	ole I - I							ed, D	isposed c	f, or E	Beneficia	lly	Owned					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yd						Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			Beneficia Owned F		s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3 a	ion(s)		[(Instr. 4)	
CBS Class B common stock 08/12/20						1		M		15,173	A	\$5.2		95,0)98 ⁽¹⁾		D			
CBS Class B common stock 08/12/20						1			S ⁽²⁾		15,173	D	\$25.000	3 ⁽³⁾ 79		925		D		
CBS Class B common stock															4,3	378			By 401(k)	
CBS Class B common stock															1.4	598		I	By Custodian For Child	
			Table								posed of,				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any		ed 4. Date, Transa Code (5. Nu		6. Date Expirat (Month		cisable and ate	7. Title Amou Securi Under Deriva Securi	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amour or Numbe of Shares	r						
Employee Stock Option (right to buy) ⁽⁴⁾	\$5.2	08/12/2011			M			15,173	02/24	/2010 ⁽⁵	02/24/2017	CBS Class commo	B 15,17	3	\$0.0000	318,6	43	D		

Explanation of Responses:

- 1. Includes shares acquired periodically pursuant to a dividend reinvestment program meeting the requirements of Rule 16a-11.
- $2. \ The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May 24, 2011.$
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$25.00 to \$25.01, 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 this footnote.
- 4. Right to buy under Issuer's long term incentive plan.
- 5. These options vest in four equal annual installments beginning on February 24, 2010.

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

08/16/2011

** 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.