FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: Estimated average burden 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* CALIFANO JOSEPH A						2. Issuer Name and Ticker or Trading Symbol CBS CORP [CBS, CBS.A]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
CALITAINO JUSEFII A															Direc	tor	10% C	Owner	
(Last) (First) (Middle) 51 WEST 52ND STREET					3. Date of Earliest Transaction (Month/Day/Year) 10/01/2006										Officer (give title Other below) below)			(specify)	
				ŀ	4 If /	۸man	dmon	t Doto	of Original E	ilad /M	lonth/D	\au/Voor\		2 Individ	dual or	· loint/Croup	Filing (Chook A	pplicable	
(Street)					If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
NEW YO	ORK N	Y	10019											Λ	Form	orm filed by More than One Reporting			
(City)	(State) (Zip)														1 010011				
		Tab	le I - Non-D	Derivat	tive	Sec	uriti	es A	cquired, D	ispo	sed (of, or B	enefic	ially C	wne	d			
Date				Transac ate lonth/Da		r) E	2A. Deemed Execution Date f any Month/Day/Ye		Code (In	ion D				and Securi Benef Owner		ies cially Following	. Ownership orm: Direct D) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	/ A	mount	t (A) or (D)		۳ l.		ed ction(s) 3 and 4)		(Instr. 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 Dat if any (Month/Day/Ye	d 4. Date, Trans		nsaction de (Instr.		rative rities tired rosed) : 3, 4	6. Date Exercisab Expiration Date (Month/Day/Year)		le and 7. Title Amou Secur Under Deriva		7. Title and Amount of Securities Jnderlying Derivative Security (Instr. 3		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	ode \	v	(A)	(D)	Date Exercisable	Expir Date	ration	Title	Amount or Number of Shares	er					
Phantom Class A Common Stock Units	(1)	10/01/2006		1	A		14		(1)	(1)	CBS Class A common stock	14	\$28	3.22	2,188	D		
Phantom Class B Common Stock Units	(1)	10/01/2006		1	A		14		(1)	(1)	CBS Class B common stock	14	\$28	3.17	2,201	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. The relevant 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.

Remarks:

10/03/2006 /s/ Califano, Jr., Joseph A.

** 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.