FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

wasiiiigton,	D.C. 20549	

OMB APPROVAL								
OMB Number:	3235-0287							
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* COHEN WILLIAM S				2. Issuer Name and Ticker or Trading Symbol CBS CORP [CBS, CBS.A]									Relationship of Reporting Person(s) to Issuer (Check all applicable)						
COLLE	N WILLI	AIVI J												X	Direct	tor	10% C)wner	
(Last) 51 WES	ast) (First) (Middle) 1 WEST 52ND STREET				3. Date of Earliest Transaction (Month/Day/Year) 04/01/2017										Officer (give title below)			Other (specify below)	
					4 15	A 100 0 1		t Doto	of Original F	ilad i	/Manth/F) (\/\car\		C India	بامارية	laint/Craun	Filing (Chaple A	nalicable	
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
NEW YORK NY 10019				X											Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(S	tate)	(Zip)											Person					
					<u> </u>								ļ						
		Tab	le I - Non-D	Deriva	ative	Sec	uriti	es A	cquired, D	Disp	osed	of, or B	enefic	ially	Owne	d			
Date				Execution Date			Execution Date, if any		, Transaction Disposed Code (Instr. 5)		urities Acquired (A) or led Of (D) (Instr. 3, 4 an				ies cially Following	Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or Pri	се	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
		Ta	able II - De												wned				
			(e.	g., pu	ts, c	alls,	, war	rants	s, options	, co	nverti	ble sec	urities	5)					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rersion cercise (Month/Day/Year) Date (Month/Day/Year) if any (Month/Day/Year) if any (Month/Day/Year) Security (Month/Day/Year) Execution Date, if any (Month/Day/Year) Security Sec			of Deriv Secu Acqu (A) of Dispo of (D) (Instr	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)					8. Price of Derivative Security (Instr. 5)			10. 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	Amour or Number of Shares	er					
Phantom Class A Common Stock Units	(1)	04/01/2017			A		334		(1)		(1)	CBS Class A common stock	334	\$	70.36	31,677	D		
Phantom Class B Common Stock Units	(1)	04/01/2017			A		338		(1)		(1)	CBS Class B common stock	338	\$	69.36	31,983	D		

Explanation of Responses:

1. Reporting Person has elected to defer payment of Board/Committee fees, as applicable, 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/ Kimberly D. Pittman, Attorney-in-fact 04/04/2017

** 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.