BRISKMAN LOUIS J

Form 4

January 06, 2009

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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 OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * **BRISKMAN LOUIS J**

(Middle) (Last) (First)

(Street)

(State)

51 WEST 52ND STREET

NEW YORK, NY 10019

(City)

2. Issuer Name and Ticker or Trading Symbol

CBS CORP [CBS, CBS.A]

3. Date of Earliest Transaction

(Month/Day/Year) 01/02/2009

4. If Amendment, Date Original

Filed(Month/Day/Year)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 4. Securities

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) (Instr. 3)

Execution Date, if (Month/Day/Year)

(Zip)

TransactionAcquired (A) or Code Disposed of (D) (Instr. 8)

(Instr. 3, 4 and 5)

(A)

Beneficially Owned Following Reported Transaction(s)

Issuer

below)

Person

5. Amount of

Securities

Director

Applicable Line)

X_ Officer (give title

(Instr. 3 and 4) Code V Amount (D) Price

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

4.

Code

1. Title of Derivative Conversion

Security

or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if

any

5. Number Transactionof

6. Date Exercisable and **Expiration Date** Derivative (Month/Day/Year)

7. Title and Amount of **Underlying Securities** (Instr. 3 and 4)

1

D

OMB APPROVAL

OMB 3235-0287 Number:

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burden hours per response...

5. Relationship of Reporting Person(s) to

(Check all applicable)

EVP and General Counsel

6. Ownership

Form: Direct

(D) or Indirect Beneficial

6. Individual or Joint/Group Filing(Check

X Form filed by One Reporting Person Form filed by More than One Reporting

(I)

(Instr. 4)

0.5

10% Owner

Other (specify

7. Nature of

Ownership

(Instr. 4)

Indirect

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr.		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					(I	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Putative Debenture	(1)	01/02/2009		D(2)			638	(3)	<u>(3)</u>	CBS Class B common	6,381.9778	\$

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

BRISKMAN LOUIS J 51 WEST 52ND STREET NEW YORK, NY 10019

EVP and General Counsel

Signatures

/s/ Briskman, Louis J. 01/06/2009

**Signature of Date
Reporting Person

Explanation of Responses:

- * 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).
- (1) The conversion rate is 10.0031 shares per \$100 debenture.
- (2) Cancellation on a scheduled installment payment date of Putative Debentures that were out-of-the money. The Reporting Person received the face value of the Putative Debentures (\$100 per debenture) in connection with the cancellation.
- The Putative Debentures reflect deferral of an award under the Issuer's annual performance plan or long term incentive plan. Putative

 (3) Debentures convert to shares (if in-the-money) and are paid in a lump sum or installments following termination of service. Transactions reported herein were triggered by the Reporting Persons termination of previous service with the Issuer in 2002.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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