## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person * Taylor Douglas C				2. Issuer Name and Ticker or Trading Symbol CLIFFS NATURAL RESOURCES INC. [CLF]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director							
200 PUBLIC SQUARE, SUITE 3300				3. Date of Earliest Transaction (Month/Day/Year) 12/02/2014													
(Street) CLEVELAND, OH 44114-2315				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by More than One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)				T	able I - Noi	ivative Se	ecurities	ired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea			2A. Deemed Execution Date, i any (Month/Day/Year	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			` ′		Beneficial Ownership			
				Code	V	Amount (A) or (D)		Price		(I) (Instr. 4)		(Instr. 4)					
Common	Shares		12/02/2014		A		5,208 (1)	A	\$ 0	7,916,202			D				
Common Shares									7,200			I	2	Douglas C. Taylor 2005 Family Trust (2)			
Reminder:	Report on a s	separate line fo		Derivative Securit	ies Acquir	Pers cont the f	ons who ained in orm disp sposed of	responding this for Ben	rm ard curre	e not requently valid	ction of inf uired to res OMB conf	spond unl		SEC 1	474 (9-02)		
1. Title of	2.	3. Transaction	1	e.g., puts, calls, w	arrants, op 5.	1 ′	converti ate Exerci			itle and	8. Price of	9 Number	r of 1	0.	11. Nature		
Derivative Security	Conversion Date or Exercise (Month/Day/Y Price of Derivative Security		Execution Day Year) any	cution Date, if Transaction Code nth/Day/Year) (Instr. 8)		and l	d Expiration Date Ionth/Day/Year)		Am Und Sec			Derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly C F C S C O on(s) (I	Ownershiftorm of Derivative Curity: Direct (Dar Indirect	of Indirect Beneficial Ownership (Instr. 4)		
				Code V	(A) (D)	Date Exer	cisable E	Expiration Date	n Titl	Amount or Number of Shares							

### **Reporting Owners**

		Relationsl	nips	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Taylor Douglas C 200 PUBLIC SQUARE SUITE 3300 CLEVELAND, OH 44114-2315	X			

#### **Signatures**

/s/ James D. Graham by Power of Attorney	12/04/2014		
**Signature of Reporting Person	Date		
L			

#### **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) Reflects the number of restricted shares granted to the Reporting Person as Part II of the Annual Equity Grant on December 2, 2014 pursuant to the 2014 Nonemployee Directors' Compensation Plan.
- These shares are held in a trust for the benefit of the reporting person's children. The reporting person's spouse is a trustee of the trust. The reporting person disclaims (2) beneficial ownership of these securities, and the filing of this report is not an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

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.