FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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 * Graham James D | | | | 2. Issuer Name and Ticker or Trading Symbol CLIFFS NATURAL RESOURCES INC. [CLF] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Ofther (specify below) EVP, Chief Legal Officer & Sec | | | | | | |
| (Last) (First) (Middle) 200 PUBLIC SQUARE, SUITE 3300 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2015 | | | | | | | | | EVP, Ch | iei Legai Off | icer & Sec | | | |
| (Street) CLEVELAND, OH 44114 | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person | | | | | | |
| (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acqui | | | | | | quir | ired, Disposed of, or Beneficially Owned | | | | | | | |
| 1.Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | (Instr. 8) | | ction | (A) or Disposed of (D) (Instr. 3, 4 and 5) | | of | f Beneficia | | nt of Securities illy Owned Following Transaction(s) and 4) | | \ / | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | C | ode | V | Amount | (A) or (D) | Price | e | | | | (I) (Instr. 4) | (IIIstr. 4) |
| Common | Shares | | 12/31/2015 | | | | | F | | 2,646 (1) | D | \$ 1.58 | 8 1 | 15,342 | .792 | | D | |
| Reminder: | Report on a s | separate line to | or each class of secur | Derivati | ve Sec | uriti | ies Ac | cquire | Perso conta the fo | ons who ained in orm dis sposed o | this fo | orm a curr | are r rent ially | not requ tly valid | OMB conf | ormation spond unlead rol number | ss | 1474 (9-02) |
| Security | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/ | 3A. Deemed Execution Da | 4. Tri Cc Year) (li | ransact | tion) | 5. | per rative rities ired r posed) . 3, d 5) | 6. Da and F (Mon | | isable n Date | 7. An Un Se (In 4) | Titl mounder nder nstr. | Amount or Number of Shares | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owners Form of Derivati Security Direct (or Indire | Beneficia Ownersh (Instr. 4) |

Reporting Owners

| D (1 0 N / | Relationships | | | | | | | | |
|--|---------------|--------------|--------------------------------|-------|--|--|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | | | |
| Graham James D 200 PUBLIC SQUARE SUITE 3300 CLEVELAND, OH 44114 | | | EVP, Chief Legal Officer & Sec | | | | | | |

Signatures

| /s/ James D. Graham | 01/05/2016 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date |

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) Surrender of shares in payment of tax liability incurred on December 31, 2015, the date of restricted share units vesting in three equal annual installments to the Reporting Person granted on January 12, 2015.

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.