FORM	4
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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).

(Print or Type Pesponses)

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

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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 Type Responses)								1			
1. Name and Address of Reporting Po SIEGAL MICHAEL 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 10% Owner Officer (give title below) Other (specify below)				
200 PUBLIC SQUARE, SUIT	(Middle) TE 3300	3. Date of Earliest 02/01/2016	Transactio	n (M	onth/Day/	Year)					
(Street) CLEVELAND, OH 44114-23	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	(A) or Disposed			of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form: Direct (D)	Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
Depositary Shares ⁽¹⁾	02/01/2016		S		2,500	D	<u>(2)</u>	0	I	Michael D. Siegal Revocable Trust	
Common Shares	02/01/2016		Р		2,263	A	<u>(2)</u>	18,963	I	Michael D. Siegal Revocable Trust	
Common Shares						_		23,614	D		

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

Persons who respond to the collection of information

SEC 1474 (9-02)

contained in this form are not 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)													
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n Nu	umber and Expiration Date A		Amount of Derivative		Derivative	Ownership	of Indirect		
Security	or Exercise	(Month/Day/Year)	any	Code	of	*		Unde	rlying	Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Der	rivative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Sec	urities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				Aco	quired			4)			0	Direct (D)	
					(A)							1	or Indirect	
						posed						Transaction(s)	< / .	
					of ((Instr. 4)	(Instr. 4)	
					(Instr. 3,									
					4, and 5)									
										Amount				
							Date	Expiration		or				
							Exercisable	*	Title	Number				
								Dute		of				
				Code V	(A) (D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
SIEGAL MICHAEL D 200 PUBLIC SQUARE SUITE 3300 CLEVELAND, OH 44114-2315	Х						

Signatures

/s/ James D. Graham by Power of Attorney

**Signature of Reporting Person

02/25/2016 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) Depositary shares each representing 1/40th interest in a share of the Issuer's 7.00% Series A Mandatory Convertible Preferred Stock (the "Series A Preferred Stock").
- (2) On February 1, 2016, the Series A Preferred Stock converted into the Issuer's common shares at an effective conversion rate of .9052 common share per depositary share.

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.