# 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)														
Name and Address of Reporting Person * Stoliar Gabriel				2. Issuer Name and Ticker or Trading Symbol CLIFFS NATURAL RESOURCES INC. [CLF]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) 200 PUBLIC SQUARE, SUITE 3300				3. Date of Earliest Transaction (Month/Day/Year) 07/01/2016												
(Street)				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						
		[ 44114-231														
(City	·)	(State)	(Zip)		Т	able I	- Non	ı-Deri	ivative	Securities	Acqu	ired, Disp	osed of, or l	Beneficially	Owned	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)		of	Beneficia	nt of Securities ally Owned Following Transaction(s) and 4)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					(	Code	V	Amou	(A) or nt (D)	Price				(I) (Instr. 4)	(=======)	
Common Shares		07/01/2016				A		4,355 (1)		\$ 5.74	97,196	196		D		
Common Shares 07/01/2		07/01/2016				F		1,307 (2)		\$ 5.74	95,889		D			
Reminder:	Report on a s	separate line for	r each class of secur		•			Perso conta the fo	ons wl ained i orm di	no respo in this for splays a	rm are curre	not requesting ntly valid	OMB con	formation spond unle trol numbe	ss	1474 (9-02)
			Table II - I							of, or Ben tible secu		lly Owned				
Security	2. Conversion or Exercise Price of Derivative Security	sion Date Execution any (Month/Day/Year) (Month/Day/Year)	3A. Deemed Execution Date	4. Tra	nnsaction de	5. Num of	ber vative rities nired or osed 0) r. 3,	6. Da and E (Mor	ite Exer	cisable on Date	7. T Ame Und Secu	itle and ount of lerlying urities tr. 3 and	of Derivative Der Security (Instr. 5) Ben Ow. Foll Rep Tran (Ins		Owners Form of Derivati Security Direct (1 or Indire	Beneficia Ownersh : (Instr. 4)
				С	ode V	(A)	(D)	Date Exerc	cisable	Expiration Date	n Title	Amount or Number of Shares				

### **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Stoliar Gabriel 200 PUBLIC SQUARE SUITE 3300 CLEVELAND, OH 44114-2315	X							

#### **Signatures**

/s/ James D. Graham by Power of Attorney	07/06/2016		

**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).
- Reflects the number of common shares issued to the Reporting Person in payment of the Reporting Person's quarterly retainer in lieu of cash for the third quarter pursuant to (1) the Reporting Person's election to participate in the Cliffs Natural Resources Inc. Nonemployee Director Retainer Share Election Program. The Reporting Person elected to participate in the Retainer Election Program at 100%.
- (2) Surrender of shares in payment of tax liability in connection with the Reporting Person's participation in the Retainer Election Program.

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.