# 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* 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)  _X_ Director					
(Last) (First) (Middle) 200 PUBLIC SQUARE, SUITE 3300				3. Date of Earliest Transaction (Month/Day/Year) 01/01/2016												
(Street) CLEVELAND, OH 44114-2315				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	)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, any (Month/Day/Yea	if Co (In	(Instr. 8)		4. Securities Acquire (A) or Disposed of (D) (Instr. 3, 4 and 5)			d 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		ollowing	Ownership Form: Direct (D)		7. Nature of Indirect Beneficial Ownership	
				(	Code	V	Amoun	(A) or (D)	Price				or Indirect (I) (Instr. 4)		str. 4)	
Common Shares 01		01/01/2016			A		3,956 (1)	A	\$ 1.58	23,614	D		D			
Common Shares										16,700			Ι	D.	chael Siegal vocable	
Depositary Shares (2)										2,500			Ι	D.	chael Siegal vocable ist	
Reminder:	Report on a s	separate line fo	or each class of secur				Personn cont the	sons wh tained in form dis	o responsible this formation this formation the second sec	orm ar	e not requently valid	ction of inf uired to res OMB con	spond ur	iless	SEC 14	74 (9-02)
				Derivative Secur [e.g., puts, calls, v												
Security (Instr. 3)	2. 3. Transaction Conversion or Exercise Price of Derivative Security 3. Transaction (Month/Day/Year		Year) Execution Da	4. Transaction Code Year) (Instr. 8)	of Deri Secu Acq (A) Disp of (I (Ins	Number a		6. Date Exercisable and Expiration Date (Month/Day/Year)		Am Un Sec	Fitle and nount of derlying curities str. 3 and	8. Price of Derivative Security (Instr. 5)  Benefic Owned Follow: Reporte Transac (Instr. 4)		Ve Owners: Some of Derivation Security Or Indication(s) (I)		Beneficia Ownershi (Instr. 4)
							Date		Expiration  Date	on Tit	Amount or Number of					

## **Reporting Owners**

	Relationships						
	Director	10% Owner	Officer	Other			
Reporting Owner Name / Address							

SIEGAL MICHAEL D 200 PUBLIC SQUARE SUITE 3300 CLEVELAND, OH 44114-2315	X								
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### **Signatures**

/s/ James D. Graham by Power of Attorney	01/06/2016
**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 first quarter pursuant to the (1) reporting person's election to participate in the Cliff's Natural Resources Inc. Nonemplayee Director Retainer Share Election Program. The reporting person elected to
- (1) 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 25%.
- (2) Depositary shares each representing 1/40th interest in a share of the Issuer's 7.00% Series A Mandatory Convertible Preferred Stock.

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.