# FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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   |   |   |            |            |  |  |  | -  |  |   |   |  |                         |
|--|---|----|--|---|---|---|------------|------------|--|--|--|--|--|---|---|--|-------------------------|
| 1. Name and Address of Reporting Person* GREEN SUSAN MIRANDA |   |    |  | 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 10% Owner Officer (give title below) Other (specify below) |   |   |  |                         |
| (Last) (First) (Middle) 5917 RYLAND DRIVE                    |   |    |  | 3. Date of Earliest Transaction (Month/Day/Year) 11/05/2010                     |   |   |            |            |  |  | //Year)  |  |  |   |   |  |                         |
| (Street)   |   |    |  | 4. If Amendment, Date Original Filed(Month/Day/Year)                            |   |   |            |            |  |  | n/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  |   |   |  |                         |
| BETHESDA, MD 20817 (City) (State) (Zip)                      |   |    |  |   | Table I - Non-Derivative Securities Acqui |   |            |            |  |  |  | ired, Disposed of, or Beneficially Owned |  |   |   |  |                         |
| 1.Title of Security<br>(Instr. 3)                            |   |    | 2. Transaction<br>Date<br>(Month/Day/Year) | any   | Deemed<br>ution Date, if                  |   | (Instr. 8) |            | (  | (A) or Disposed of (Instr. 3, 4 and 5) |  | of (D)                                   | Beneficia<br>Reported  | nt of Securities<br>ally Owned Following<br>I Transaction(s)  |   | Ownership<br>Form:                             | Beneficial              |
|  |   |    |  | (Month/   | Day/1                                     | r ear)  |            | ode        | V  | Amoun                                  | (A) or (D)   | Price                                    | (Instr. 3 and 4)   |   |   | Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4) | Ownership<br>(Instr. 4) |
| Common   | Stock   |    | 11/05/2010                                 |   |   |   | ,          | S          | ç  | 936                                    |  | \$<br>70                                 | 6,337.3  | 73  |   | D  |                         |
|  |   |    | Table II - I                               |   |   |   |            | t<br>quire | the for<br>d, Disp                                       | rm dis                                 | splays a c   | currer<br>eficial                        | ntly valid   |   | spond unle<br>trol numbe  |  |                         |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)          | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security |    | 3A. Deemed<br>Execution Date<br>Year) any  | 4.<br>te, if Transaction<br>Code<br>Year) (Instr. 8)                            |   | 5 ion N ion S ion | 5.         |            | 6. Date Exercisable and Expiration Date (Month/Day/Year) |  | 7. Title and<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 and<br>4) |  | Security<br>(Instr. 5)   | 9. Number of<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s<br>(Instr. 4) | Owners<br>Form of<br>Derivati<br>Security<br>Direct (1<br>or Indire | Beneficia<br>Ownershi<br>(Instr. 4)            |                         |
|  |   |    |  |   |   |   |            |            | Date<br>Exerci   |  | Expiration<br>Date   | Title                                    | Amount<br>or<br>Number<br>of   |   |   |  |                         |

#### **Reporting Owners**

|  | Relationships |              |         |       |  |  |
|--|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address                                 | Director      | 10%<br>Owner | Officer | Other |  |  |
| GREEN SUSAN MIRANDA<br>5917 RYLAND DRIVE<br>BETHESDA, MD 20817 | X             |              |         |       |  |  |

# **Signatures**

| Traci L. Forrester by Power of Attorney | 11/05/2010 |
|---|------------|
| **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).

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.