FORM 4	4
--------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

(Drint or Type Deen

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

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

SEC 1474 (9-02)

### 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

1. Name and Address of Repor Mee Terrence R	2. Issuer Name <b>and</b> Ticker or Trading Symbol CLIFFS NATURAL RESOURCES INC. [CLF]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner XOfficer (give title below)Other (specify below) SVP Global Iron Ore & Metallic				
(Last) (First) 1100 SUPERIOR AVEN	3. Date of Earlies 08/31/2011	t Transactio	on (N	Ionth/Day	/Year)	SVP Global Iron Ore	& Metallic				
(Street) CLEVELAND, OH 4411	4. If Amendment,	Date Origi	inal F	Filed(Month	/Day/Yea	ar) ·	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)	T	able I - No	n-De	rivative S	Securit	ies Acqui	ired, Disposed of, or Beneficially Owned			
1.Title of Security 2. Transaction   (Instr. 3) Date   (Month/Day)		2A. Deemed Execution Date, if any	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form:	Beneficial	
		(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock	08/31/2011		S		1,000	D	\$ 82.196	12,180	D		
Common Stock								724	Ι	By VNQDC (1)	

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

Persons who respond to the collection of information 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	e Conversion	Date	Execution Date, if	Transacti	ion	Numł	Number and Expiration Date		on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of	of (Month/Day/Year)		/Year)	Underlying Security		Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	Derivative			Securities (Instr. 5)		Beneficially	Derivative	Ownership	
	Derivative					Secur	Securities			(Instr. 3 and		Owned	Security:	(Instr. 4)	
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) o	ŗ						Reported	or Indirect	
						Dispo	sed						Transaction(s)	(I)	
						of (D)	)						(Instr. 4)	(Instr. 4)	
						(Instr. 3,									
						4, and	l 5)								
											Amount				
								Date	Emination		or				
								Exercisable	Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

## **Reporting Owners**

			Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Mee Terrence R 1100 SUPERIOR AVENUE SUITE 1500 CLEVELAND, OH 44114-2544			SVP Global Iron Ore & Metallic				

### **Signatures**

/s/ Madeline Costanzo by Power of Attorney	09/02/2011
--	------------

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) Held for the benefit of the Reporting Person by the Cliffs Natural Resources Inc. 2005 Voluntary Non-Qualified Deferred Compensation Plan ("VNQDC").

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.