

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

OMB APPROVAL				
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Estimated average burden				
nours per respons	se 0.5			

## INITIAL STATEMENT OF 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)							
Name and Address of Reporting Person*  Paradie Terrance M	Statement (Mont	2. Date of Event Requiring Statement (Month/Day/Year)  10/01/2012		3. Issuer Name and Ticker or Trading Symbol CLIFFS NATURAL RESOURCES INC. [CLF]			
(Last) (First) (Middl 200 PUBLIC SQUARE, SUITE 330	le)			4. Relationship of Reporting Person(s) to Issuer		endment, Date Original th/Day/Year)	
(Street) CLEVELAND, OH 44114-2315			Director X Officer (give tit below)	all applicable)  all applicable)  10% Owne  Other (spe below)  ef Financial Office	Applicable I  _X_Form fi	lual or Joint/Group Filing(Check Line) lled by One Reporting Person led by More than One Reporting Person	
(City) (State) (Zip	)	Table I - Non-Derivative Securities Beneficially Owned					
1.Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock 6,152.604			D				
Common Stock	ommon Stock 6,261			I	VNQDC		
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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)							
1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Date	Security (Instr. 4)	Underlying Derivative	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
Reporting Owners	R	elationships			,		

	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Paradie Terrance M 200 PUBLIC SQUARE SUITE 3300 CLEVELAND, OH 44114-2315			SVP & Chief Financial Officer	

## **Signatures**

/s/ Terrance M. Paradie	10/09/2012
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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.