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)																	
1. Name and Address of Reporting Person* CUNNINGHAM SUSAN M				CL	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)						
						3. Date of Earliest Transaction (Month/Day/Year) 10/01/2013													
(Street) CLEVELAND, OH 44114-2315				4. If	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		(State)		(Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
(Instr. 3) Date (Month/Day/Year)			Execu	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		D) Benefici		unt of Securities cially Owned Following ed Transaction(s) d and 4)		6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	V	Amour	or (D)		Price					1)	
Common Shares 10/01/2013					A		288.32 (1)	29 A	\$ 2	0.81	20,231.8333 (2)		(2) D						
Reminder:	Report on a s	ерагате ппе	for each	Table II -	· Deriv	rative Secu	ıritie	s Acqı	Po co th	ersons whomation with the contract of the cont	ho respondin this splays	forn a c	n are urren ficiall	not requ tly valid	ction of inf uired to res OMB conf	spond unle	ess	SEC 14	74 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transact Date (Month/Da		3A. Deemed Execution D any (Month/Day	ate, if	4. Transactic Code (Instr. 8)	5. N of D S A (/ / D of (I 4 ,	Jumber of Derivation of Deriva	ive es ed	ons, conver Date Exer and Expirati Month/Day	cisable on Date		7. Tit Amo Unde Secur (Instr 4)	Amount or Number of Shares		9. Number Derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Ow For Der Sec Dire or I n(s) (I)	nership n of ivative urity: ect (D) ndirect tr. 4)	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

Reporting Owners

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

Signatures

/s/ Carolyn Cheverine by Power of Attorney	10/03/2013		
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 number of Common Shares credited to the account of the Reporting Person in payment of the Reporting Person's required quarterly retainer for the fourth quarter (1) under the Cliffs Natural Resources Inc. Nonemployee Directors' Compensation Plan (the "Plan"). Full shares earned pursuant to the Plan in 2013 will be issued effective January 1, 2014.
- The Board of Directors of Cliffs Natural Resources Inc. declared dividends of \$0.15 per share, payable to all holders of record as of May 17, 2013 and August 15, 2013. The (2) amount shown reflects 11.014 and 89.881 shares credited on June 3, 2013 and September 3, 2013, respectively, to the Reporting Person pursuant to the Dividend Reinvestment and Stock Purchase Plan.

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.