F	ORM	5
-1	Check this box if no	longer

Γ	Check this box if no longer
	subject to Section 16. Form 4
	or Form 5 obligations may
	continue. See Instruction 1(b).
	Form 3 Holdings Reported

Form 4 Transactions

Reported

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

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ANNUAL 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 Report Cheverine Carolyn	2. Issuer Name and Ticker or Trading Symbol CLIFFS NATURAL RESOURCES INC. [CLF]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X_Officer (give title below) Other (specify below)				
(Last) (First) 200 PUBLIC SQUARE, 5	(Middle) SUITE 3300	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2013				VP, GC & Secretary				
(Street) CLEVELAND, OH 4411	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Reporting (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 Acqui					ired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or		of (D)	Issuer's Fiscal Year (Instr. 3 and 4) Form: Direct (I or Indire (I)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Shares							3,375	D		
Common Shares							277.482 (1)	Ι	VNQDC (2)	

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 SEC 2270 (9-02) 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 (a.g., pute calls, warrants, options, convertible acquirities)

	(<i>e.g.</i> , 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	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Numl	ber	and Expiration Date		Amount of		Derivative	of	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day/Year)		Underlying		Security	Derivative	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative	;		Securities (1		(Instr. 5)	Securities	Derivative	Ownership
	Derivative				Secur	rities			(Instr. 3 and			Beneficially	Security:	(Instr. 4)
	Security				Acqu	ired			4)				Direct (D)	
					(A) o								or Indirect	
					Dispo								(I)	
					of (D	· · · · · · · · · · · · · · · · · · ·						Fiscal Year	(Instr. 4)	
					(Instr	· · · ·						(Instr. 4)		
					4, and	15)								
										Amount				
							Date	Expiration		or				
							Exercisable	1	Title	Number				
							LACICISADIC	Date		of				
					(A)	(D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Cheverine Carolyn 200 PUBLIC SQUARE SUITE 3300 CLEVELAND, OH 44114-2315			VP, GC & Secretary				

Signatures

/s/ Carolyn Cheverine	02/07/2014
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).
- (1) Balance shown reflects 2.255, 1.928 and 1.693 shares acquired June 3, 2013, September 3, 2013 and December 2, 2013, respectively, pursuant to the dividend reinvestment feature of the Issuer's 2005 Voluntary Non-Qualified Deferred Compensation Plan ("VNQDC").
- (2) Held for the benefit of the Reporting Person by the VNQDC.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.