

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

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

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## 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 Reporting Person *					2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Stoliar Gabriel					CLIFFS NATURAL RESOURCES INC. [ CLF ]								C. X_Director	X Director 10% Owner				
(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)								Officer (gi	Officer (give title below) Other (specify below)					
200 PUBLIC SQUARE, SUITE 3300						10/1/2015												
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)								Y) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)				
CLEVELAND, OH 44114-2315 (City) (State) (Zip)														X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
			Table 1	I - Non-D	)eriva	tive Sec	urities Ac	quir	ed, Di	ispose	d of	, or I	Beneficially Own	ed				
1. Title of Security (Instr. 3)  2. Trans. D			2. Trans. Da	2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	de	e 4. Securities Acquor Disposed of (D (Instr. 3, 4 and 5)		(D)	red (A)	5. Amount of Securi Following Reported (Instr. 3 and 4)	ties Beneficially Owned Transaction(s)		Ownership Form:	7. Nature of Indirect Beneficial		
						Code	V	Amou	(A)		Price				Ownership (Instr. 4)			
Common Shares 10/1/2015				10/1/2015	;		A		10593 (1)	3 A	1	\$2.36		59368		D		
Common Shares 10/1/2015				10/1/2015			F		3178	<u>(2)</u> I	)	\$2.36		56190				
	Tabl	le II - Der	rivative	Securitie	s Ben	eficially	Owned (	e.g.	, puts	, calls,	wa	rran	ts, options, conve	ertible sec	curities)			
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deer Execution Date, if a	n (Instr.	Acquire Dispose		ve Securities d (A) or		5. Date Exercisable and Expiration Date			Securit Deriva	and Amount of ies Underlying tive Security 3 and 4)	nderlying Derivative Security Security		Derivative Security:	Beneficial	
	Security			Cod	le V	(A)	(D)	Date	e rcisable	Expirat Date	ion		Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)		
Evalenation of	D.	1	ı			/		,		ı					1. /	1 -	<u> </u>	

- On July 13, 2015 the Board of Directors of Cliffs Natural Resources Inc. (the "Company") approved the Nonemployee Director Retainer Share Election
- 1) Program (the "Retainer Election Program") pursuant to which the nonemployee directors may elect to receive all or any portion of their annual retainer and any other fees earned in cash in common shares of the Company beginning with the fourth quarter 2015 payment. The number of shares reported reflect the reporting person's election to participate in the Retainer Election Program at 100%.
- Surrender of shares in payment of tax liability in connection with the Reporting Person's participation in the Retainer Election Program.

### **Reporting Owners**

Panorting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Stoliar Gabriel 200 PUBLIC SQUARE SUITE 3300 CLEVELAND, OH 44114-2315	X						

### **Signatures**

/s/ James D. Graham by Power of Attorney 10/5/2015 \*\* Signature of Reporting Person Date

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

- 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.

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.