

CLIFFS NATURAL RESOURCES INC.

Reported by BRLAS LAURIE

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 03/10/11 for the Period Ending 03/08/11

Address 200 PUBLIC SQUARE

STE. 3300

CLEVELAND, OH 44114-2315

Telephone 216-694-5700

CIK 0000764065

Symbol CLF

SIC Code 1000 - Metal Mining

Industry Metal Mining
Sector Basic Materials

Fiscal Year 12/31





[] 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

OMB APPROVAL OMB Number: 3235-0287 Expires: February 28, 2011 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person * BRLAS LAURIE				*										tionship of Reporting Person(s) to Issuer (all applicable)			
					CLIFFS NATURAL RESOURCES INC. [CLF]								Direct	or	_	10% O	wner
(Last)					3. Date of Earliest Transaction (MM/DD/YYYY)							below)	_X _ Officer (give title below) Other (specify elow) Other (specify executive VP and CFO				
200 PUBLIC SQUARE, SUITE 3300 (Street) CLEVELAND, OH 44114-2315												6. Individual or Joint/Group Filing (Check Applicable Line)					
(City) (State) (Zip)												_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tal	ole I - Non	-Deri	ivativ	e Securi	ties Acq	ui	red, Di	spo	sed (of, or	Beneficially	y Owned			
1.Title of Security (Instr. 3)			2. T Date	rans.	2A. Deemed Execution Date, if any	Code (Instr. 8) Dis (Ins		Acquired Disposed (Instr. 3,	equired (A) or sposed of (D) (A) (A) (O) (A) (O) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C		Follo (Inst	llowing Reported Transaction(s) str. 3 and 4) Ownership of Form: Direct (D)		Beneficial Ownership			
Common Stock				3/8/	/2011		Code A (1)	V	Amount 3050	· ·	\$0.00	-	4	7035		D	
Common Stock													1	5642		I	By VNQDC
Ta	ble II - De	erivat	ive Securi	ties B	Benefi	cially O	wned (e	e.g.	. , puts	cal	lls, w	arrai	nts, options	, convert	ible secur	rities)	•
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Trans. Date	Deemed Execution	rans. Code Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date				curities rivativ str. 3 a		lying rity	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V	(A)	(D)	Date Expiration Exercisable Date		Tit		nount or Number of ares			(s) (Instr. 4)	.,		

Explanation of Responses:

- (1) Reflects the number of restricted share units granted to the Reporting Person on March 8, 2011 for the Performance Period 2011 to 2013 from the Issuer's Amended and Restated Cliffs 2007 Incentive Equity Plan.
- (2) Held for the benefit of the Reporting Person by the Cliffs Natural Resources Inc. 2005 Voluntary Non-Qualified Deferred Compensation Plan (VNQDC).

Reporting Owners

Paparting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
BRLAS LAURIE 200 PUBLIC SQUARE SUITE 3300 CLEVELAND, OH 44114-2315			Executive VP and CFO						

Signatures

/s/ Nancy L. Watts by Power of Attorney

3/10/2011

** 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.