

CLIFFS NATURAL RESOURCES INC.

Reported by SCHWARTZ ALAN G

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 01/05/10 for the Period Ending 01/04/10

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

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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, 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 *				*	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
SCHWARTZ	ALAN	G				FFS N. L. [CLF		RA	AL RE	SO	URC	EES	X Dire	ctor		10% (Owner
(Last)	(First)		(Middle)			3. Date of Earliest Transaction (MM/DD/					I/DD/YY	YYY)	Officer (give title below) Other (specify below)				specify
YALE LAW STREET	SCHOO)L, 1	27 WA	LL			1/	4/:	2010								
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)					
NEW HAVE	N, CT 0 (State)		(Zip)												Reporting Per han One Rep		n
		Tab	ole I - Nor	ı-Deri	ivativ	ve Securi	ities A	cqı	uired, D	isp	osed o	f, or B	Seneficiall _:	y Owned			
1.Title of Security (Instr. 3)				2. Tr Date	;	2A. Deemed Execution Date, if any	3. Trans. Code (Instr. 8)			ose	5)	Follow	ount of Securit ing Reported 3 3 and 4)			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
Common Stock				1/4/	2010		A (1)		108.4834	A	\$46.09		23868	3.9785 ⁽²⁾		D	
Tab	ole II - De	rivati	ive Securi	ities B			1	_		, c	alls, wa	arrant	ts, options			ities)	
1. Title of Derivate Security (Instr. 3)	curity Conversion Trans. Deemed Execution Code			Frans. Code (Instr. 8)	Deri Secu Acqu Disp	umber of vative rities hired (A) or osed of (D) r. 3, 4 and	6. Date Exercisable and Expiration Date Date Expiration Exercisable Date			S E (I	Title and securities Derivative Instr. 3 and Share	Underly e Security and 4)	ing	Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (s) (Instr. 4)	Security: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- (1) 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 first quarter of 2010 under the Cliffs Natural Resources Inc. Nonemployee Directors Compensation Plan. ("Plan") Full shares earned in 2010 will be issued effective January 2, 2011.
- (2) On November 9, 2009, Cliffs Natural Resources Inc. (the "Company") declared a dividend of \$.0875 per share, payable to all holders of record as of November 20, 2009 of common stock payable on December 1, 2009. The amount shown reflects 41.2425 shares acquired pursuant to a Dividend Reinvestment and Stock Purchase Plan for the Company's Common Stock.

Reporting Owners

Paparting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
SCHWARTZ ALAN G YALE LAW SCHOOL 127 WALL STREET NEW HAVEN, CT 06520	X							

Signatures

Traci L. Forrester by Power of Attorney

1/5/2010

** 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.