

|  |
|--|
|  |
|--|

|  |
|--|
|  |
|  |

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |

\* 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) Reflects the number of restricted stock units granted to the Reporting Person on May 26, 2015 under the the Cliffs Natural Resources Inc. 2015 Equity and Incentive Compensation Plan.

(2) Balance shown reflects 24 shares acquired December 1, 2014, 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.