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CUNNING Form 4 July 02, 200	HAM SUSAN N 19	1									
FORM	ЛД								OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							MMISSION	OMB Number:	3235-0287		
Check this box if no longer									Expires:	January 31, 2005	
subject t Section	F CHANGES IN BENEFICIAL OWN SECURITIES					ERSHIP OF	Estimated average burden hours per				
Form 4			~ .		~	_			response	. 0.5	
Form 5 obligation may corn See Insta 1(b).	ons Section 1'	7(a) of the	Public U	Jtility Hol		any A	Act of 1	Act of 1934, 935 or Section			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> CUNNINGHAM SUSAN M			2. Issuer Name and Ticker or Trading Symbol CLIFFS NATURAL RESOURCES INC. [CLF]				Is	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 200 PUBL	(First) IC SQUARE, ST	(Middle) FE. 3300	3. Date of	of Earliest T Day/Year)	ransaction		_	_X Director Officer (give t elow)		Owner r (specify	
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				А	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CLEVELA	ND, OH 44114						_	Form filed by Mo erson			
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative Se	curiti	es Acquii	red, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)) Execution any	Date, if	3. Transactic Code (Instr. 8) Code V	4. Securities onr Disposed (Instr. 3, 4 and Amount	of (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	07/01/2009			$A^{(1)}$	185.4905	A (D)	\$ 24.26	9,164.8642 (2)	D		

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 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

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
CUNNINGHAM SUSAN M 200 PUBLIC SQUARE STE. 3300 CLEVELAND, OH 44114	Х						
Signatures							
George W. Hawk, Jr. by Power Attorney	of	07/	/02/2009				

**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).
- Reflects number of Common Shares credited to the account of the Reporting Person in payment of the Reporting Person's Required
 (1) Quarterly Retainer for the third quarter of 2009 under the Cliffs Natural Resources Inc. Nonemployee Directors Compensation Plan. Full shares earned in 2009 will be issued effective January 2, 2010.

The Board of Directors of Cliffs Natural Resources Inc. (the "Company") declared a dividend of \$.04 per share, payable to all holders of
 (2) record as of May 22, 2009 of common stock payable on June 1, 2009. The amount shown reflects 5.7175 shares credited to the Reporting Person pursuant to the Company's 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.