FORM 4

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

OMB APPRO	OVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 * SCHWARTZ ALAN G			2. Issuer Name and Ticker or Trading Symbol CLEVELAND CLIFFS INC [CLF]					5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/01/2003			-	Office	r (give title belo	ow)(Other (specify be	low)		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					- -	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				e Line)	
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, it any (Month/Day/Year	(Instr. 8	(4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		f (D) Beneficia		Transaction(ollowing (s)	Ownership Form:	. Nature f Indirect geneficial Ownership
					Code	V	Amount	(A) or (D)	Price				or Indirect (Instr. 4)	
Reminder:	Report on a s	separate fine to	reacti class of secui	tiles belieficially C	whea and	Perso	ons wh	o respon this for	n are	not requ		spond unles	ss	474 (9-02)
Reminder:	Report on a s	separate fine to	Table II -	Derivative Securi	ties Acqu	Perso conta the fo	ons whained in orm dis	o respon this form plays a co	n are urren ficiall	not requ tly valid	uired to res		ss	474 (9-02)
1. Title of Derivative Security	•	3. Transaction	Table II - 1 3A. Deemed Execution Day		ties Acqu arrants,	Persoconta the fo ired, Dis options, 6. Da and E (Mon	ons whained in orm dis	o respon this forr plays a c of, or Bene ible secur cisable n Date	ficially ities) 7. Tit Amou Unde Secur	not requested the and the and the and the erlying	OMB conf	spond unles	f 10. Ownersh Form of Derivativ Security: Direct (E or Indirec	11. Natur ip of Indirec Beneficia Ownersh (Instr. 4)

Reporting Owners

D (O N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SCHWARTZ ALAN G						
	X					
,						

Signatures

/s/ J. E. Lenhard; by power of Attorney	07/02/2003
***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).

(1) Reflects payment of 40% of Reporting Person's Quarterly Retainer payable in Common Shares under the Cleveland-Cliffs Inc Nonemployee Directors Compensation Plan. Full shares earned in 2003 will be issued effective January 2, 2004.

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.