FORM 4

Check this box if no longer subject to

Instruction 1(b).

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

OMB APP	ROVAL
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longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See*

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

•	pe Responses									_		0.00	- / / /	-	
Name and Address of Reporting Person* MCALLISTER FRANCIS R			2. Issuer Name and Ticker or Trading Symbol CLEVELAND CLIFFS INC [CLF]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X Director 10% Owner						
536 EAS	*	.O. BOX 1330				Othe	r (specify below)								
(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						
COLUM	COLUMBUS, MT 53019								_	roun fried by More than One Reporting Person					
(Cit	y)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned					d						
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year) 3. Trans Code (Instr. 8)		de	(A	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		ed (Ownership of Borm:	eneficial wnership		
						(Code	V An	nount (D)					Instr. 4)	
Reminder:	Report on a s	separate line for eacl	n class of securities l	beneficial	lly ow	ned direct	tly or i	Persons					tion contain	ed SEC 14	74 (9-02)
Reminder:	Report on a s	separate line for eacl		· Derivati	ive Se	ecurities A	Acquir	Persons in this fo displays	orm are no a currentl sed of, or Be	t required ty valid OM	to respond IB control	l unless th		ed SEC 14	74 (9-02)
1. Title of	2. Conversion	3. Transaction	Table II - 3A. Deemed Execution Date, if	Derivati (e.g., put 4. Transact Code	ive Sets, cal	ecurities A	Acquir nts, or of 6 a (A)	Persons in this fo displays	orm are no a currentle sed of, or Be vertible sec ercisable ion Date	t required ty valid OM	to respond IB control Owned d Amount	l unless th number.		10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natu of Indire Benefici Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - 3A. Deemed Execution Date, if any	Derivati (e.g., put 4. Transact Code	ive Sets, cal	ecurities A Ils, warra 5. Number Derivative Securities Acquired (or Dispose D) (Instr. 3, 4.	Acquir nts, or of 6 a (A) d of	Persons in this fo displays red, Dispos ptions, con 6. Date Exe and Expirat	erm are not a currentle sed of, or Be evertible sec ercisable ion Date y/Year)	required y valid OM neficially Ourities) 7. Title and of Underly Securities (Instr. 3 an	to respond IB control Owned d Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natu of Indire Benefici Ownersl (Instr. 4)

Reporting Owners

D # 0 N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
MCALLISTER FRANCIS R 536 EAST PIKE P.O. BOX 1330 COLUMBUS, MT 53019	X					

Signatures

/s/ John E. Lenhard, by power of atty.	11/03/2003
**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) Converted common stock on a 1-for-1 basis.
- (2) Reflects number of Common Shares underlying deferred compensation credited to the account of the Reporting Person in payment of 100% of the Reporting Person's Meeting Fees under the Cleveland-Cliffs Inc Nonemployee Directors Compensation Plan. Each Stock Unit is generally distributable following termination of service as a Director.

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.