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

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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* ORESMAN STEPHEN B				2. Issuer Name and Ticker or Trading Symbol CLEVELAND CLIFFS INC [CLF]					:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner						
49 SUNS	(Last) (First) (Middle) 49 SUNSWYCK ROAD				3. Date of Earliest Transaction (Month/Day/Year) 01/01/2004					•	Office	r (give title belo	ow)	Other (specify b	elow)	
(Street) DARIEN, CT 06820			4. If	4. If Amendment, Date Original Filed(Month/Day/Year)					·) (6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu					es Acqui	ired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Execution		Code (Instr. 8)		on 4. Securities Acquired (or Disposed of (D) (Instr. 3, 4 and 5)		(/	Benefici Reported	unt of Securities ially Owned Following ad Transaction(s)		6. Ownership Form:	Beneficial
					(Month	n/Day/Year)	Code	e V	Amount	(A) or (D)	Price	(Instr. 3 and 4)				Ownership (Instr. 4)
Common	Shares		01/01	/2004			A(1)	49.0677	A	\$50.95	2,957.3	333		D	
Reminder: F	Report on a s	separate line	for each	class of sec	urities b	eneficially	owned d	Pe	ersons wh	o respo			ction of inf			1474 (9-02)
Reminder: F	Report on a s	separate line	for each		- Deriva	ative Secur	ities Ac	Pe co th quired,	ersons whontained in e form dis	o responding this formula of the second seco	orm are a currer eneficiall	not reqเ ntly valid	uired to res	ormation spond unle trol numbe	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2.	3. Transact Date (Month/Da	ion	Table II	- Deriv a (<i>e.g.</i> , p	ative Secur outs, calls, 4. Transaction Code	ities Ac varrant	quired, ss, option 6. an (1) titles red seed 3,	ersons whontained in e form dis	oresponding this for this for Be tible securisable on Date	eneficiall urities) 7. Ti Amo Unde Secu	not reqเ ntly valid	OMB conf	spond unle	of 10. Ownersh Form of Derivatir Security Direct (I or Indire	ip of Indir Benefic Owners (Instr. 4

D (O N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
ORESMAN STEPHEN B 49 SUNSWYCK ROAD DARIEN, CT 06820	X					

Signatures

/:	s/ John E. Lenhard; by power of attorney	01/02/2004
	**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 2004 will be issued effective January 3, 2005.

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.