Instruction 1(b).

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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 * MORLEY JOHN C			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_ Director 10% Owner					
,	(Last) (First) (Middle) 31095 CHAGRIN BLVD., SUITE 210N			3. Date of Earliest Transaction (Month/Day/Year) 02/03/2004					-	Officer (given	ve title below)	Other	(specify below)	
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
	PEPPER PIKE, OH 44124								_					
(Cit	y)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned					d					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		emed on Date, /Day/Yea	if Code (Instr		4. Securities A (A) or Dispose (Instr. 3, 4 and	d of (D) Owned Follow		ving Reporte	ed C	Ownership of	Beneficial
						Со	de V	Amount (A)				(I)	Indirect (Indirect) (Indirect) (Indirect)	nstr. 4)
Reminder:	Report on a s	separate line for each	class of securities b	eneficial	ly owned	directly		_	ond to the	collection	of informa	tion contains	ed SEC 14	74 (9-02)
Reminder:	Report on a s	separate line for each		Derivati	ive Secur	rities Acc	Perso in this displa quired, Disp	ns who resp form are no ys a current	t required ly valid OM eneficially (I to respond MB control	l unless th	ition containe e form	ed SEC 14	474 (9-02)
1. Title of	2. Conversion	3. Transaction	Table II -	Derivati (e.g., pu 4. Transaci Code	5. N Securition Deri Security Acquired or D (D)	rities Acc warrants umber of vative urities uired (A) isposed (Perso in this displa	ns who resp form are no ys a current	t required ly valid ON eneficially (curities)	I to respond MB control Owned and Amount ying	unless th number.		10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indire Benefici Owners! (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., pu 4. Transaci Code	ive Secur ts, calls, 5. N Securities Or Deriving Securities Or D (D) (Instand	rities Accessariants umber of vative urities uired (A) risposed (C) r. 3, 4, 5)	Perso in this displa	ns who resp form are no ys a current cosed of, or Be convertible sec exercisable ration Date Day/Year)	trequired ly valid ON eneficially (curities) 7. Title an of Underly Securities (Instr. 3 an	I to respond MB control Owned and Amount ying	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. Nature of Indire Benefic Owners: (Instr. 4

Reporting Owners

B 41 0 N 4	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
MORLEY JOHN C 31095 CHAGRIN BLVD. SUITE 210N PEPPER PIKE, OH 44124	X				

Signatures

/s/ John E. Lenhard; by Power of Attorney	02/03/2004
**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) Converted common stock on a 1-for-1 basis.
- 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.