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

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average	burden				
hours per response	0.5				

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

	e Responses)														
1. Name and Address of Reporting Person * LEROUX ROBERT J (Last) (First) (Middle) 1100 SUPERIOR AVENUE				2. Issuer Name and Ticker or Trading Symbol CLEVELAND CLIFFS INC [CLF] 3. Date of Earliest Transaction (Month/Day/Year) 02/01/2002 4. If Amendment, Date Original Filed(Month/Day/Year) 11/20/2002					5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Vice President & Controller 6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(Street)									Line)						
CLEVEL	AND, OH	44114									. roim med o	y More than Or	ie Reporting Fers	ni	
(City)		(State)	(Zip)			Tab	le I -	Non-Deriva	tive Securit	ies Acquire	d, Dispose	d of, or Ber	neficially Ow	ned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)			ZA. Deemed Execution Date, if any (Month/Day/Year) ZA. Deemed 3. Trans (Code (Instr. 8)		(A) or Disposed of (I (Instr. 3, 4 and 5)		1 of (D) Ow 5) Tra (In	Owned Following Reported Transaction(s) (Instr. 3 and 4)		eed	Ownership Form:	Beneficial Ownership			
Reminder: R	Report on a se	parate line for ea	ch class of securities	beneficiall	y ow	vned di	irectly	Persons	who respo	ond to the			nation nd unless ti		1474 (9-02)
										rrently vali					
	I.	la m	(e.g., puts, o		warra		form disposoptions, con	plays a cu ed of, or Be vertible sec	rrently vali neficially O urities)	d OMB c	ontrol nun	nber.		l
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Yea	3A. Deemed Execution Date,	4. Transac Code	calls,	yarra 5.	per rative rities ired rosed) . 3,	form dispos	plays a cu ed of, or Be vertible sec rcisable ion Date	rrently vali	Amount			Ownersh Form of Derivativ Security: Direct (I or Indire	Benefic Owners (Instr. 4
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, any	4. Transac Code	calls,	5. Numb of Deriv Secur Acqu (A) or Dispo of (D) (Instr. 4, and	per rative rities ired rosed) . 3,	ired, Disposoptions, con 6. Date Exerand Expiration	ed of, or Be vertible sec rcisable ion Date //Year)	rently vali eneficially O urities) 7. Title and of Underly Securities	Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(Ownersh Form of Derivativ Security: Direct (I or Indire s) (I)	of Indir Benefic Owners (Instr. 4

Keporung Owners

P (1 0 N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
LEROUX ROBERT J 1100 SUPERIOR AVENUE CLEVELAND, OH 44114			Vice President & Controller			

Signatures

Robert J. Leroux	03/03/2005
**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) Convertible into Common Shares on a 1-for-1 basis.
- Represents a grant of Retention Units to the Reporting Person under the Cleveland-Cliffs Inc Long-Term Incentive Program covering the period January 1, 2002 through December (2) 31, 2004 (Incentive Period). Payment of the Retention Units will be made in cash after the completion of the Incentive Period based upon the employment by the Company of the Reporting Person and the market value of a Common Share of the Company on the last day of the Incentive Period.

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.