FORM 4

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

OMB APPROVAL							
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

(Fillit of Type	e Responses)																
1. Name and Address of Reporting Person *- LEROUX ROBERT J				2. Issuer Name and Ticker or Trading Symbol CLEVELAND CLIFFS INC [CLF]						:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 1100 SUPERIOR AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 03/08/2005								X Officer (give title below) Other (specify below) Vice President & Controller					
(Street) CLEVELAND, OH 44114				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-l					on-Derivative Securities Acqu				nired, Disposed of, or Beneficially Owned				
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Year	(Instr. 8)		4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Reported Tra	Owned Following ransaction(s)		Ownership Form:	7. Nature of Indirect Beneficial Ownership				
				(Wolldi) Da	ay/ I cal	Cod	e V	/ Am	nount	(A) or (D)		(I)		or Indirect	lirect (Instr. 4)		
Common	Stock		03/08/2005			A(1)	2,7	737	A	\$ 0	8,044]	D		
Common	Stock											3,342]	[By VNQDC (2)	
			Table II - l				forn	n dis _l Dispos	plays	a curi	rently va	alid OMB c		nd unless th	ie		
1. Title of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day/Year) Price of Derivative Security 3. Transaction Date Execution Date any (Month/Day/Year) (Month/Day/Year)		4. if Transac Code	5. No of Do of (In	5.		and Expiration Date (Month/Day/Year) of Un Secur			s		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Beneficia Ownershi (Instr. 4)				
				Code	V (.	A) (D)	Date Exerc	isable		ration	Title	Amount or Number of Shares					
Retention Units	<u>(3)</u>	03/09/2005		A	2	70	Ĺ	<u>(4)</u>	(<u>(4)</u>	Commo Shares	2.70	\$ 0	270	D		

Reporting 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	03/10/2005
**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) Represents a grant of Restricted Stock to the Reporting Person under the Cleveland-Cliffs Inc 1992 Incentive Equity Plan (as Amended and Restated May 13, 1997).
- (2) Held for the benefit of the Reporting Person by the Cleveland-Cliffs Inc Voluntary Non-Qualified Deferred Compensation Plan (VNQDC).
- (3) 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, 2005 through December
- (4) 31, 2007 (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.