FORM 4

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

(Print or Ty	pe Response	s)														
1. Name an Taylor D		Reporting Per	rson*	2. Issuer Nam CLEVELAN				0 3			5. Relation		orting Perso eck all appli			
200 PUB	^	(First) ARE, SUITI	(Middle) E 3300	3. Date of Earli 04/24/2018	est T	ransactio	n (Mo	onth/Day/	Year)		Office	er (give title belo	ow)	Other (s	pecify belo	w)
CI EVEI	AND OF	(Street)	5	4. If Amendmen	nt, D	ate Origii	nal Fi	led(Month/l	Day/Year)		_X_ Form fil	ual or Joint/C ed by One Repo ed by More than	orting Person		Applicable	Line)
(City		(State)	(Zip)		Tab	le I - Non	-Der	ivative So	curities	Acqu	ired, Disp	osed of, or I	Beneficially	Owne	d	
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)		, if	3. Transa Code (Instr. 8)	ction	4. Secur (A) or D (Instr. 3,	isposed	of (D)	Beneficia Reported	nt of Securiti Ily Owned F Transaction	ollowing	Form	ership of B	Nature Indirect eneficial
				(Month/Day/Ye	ear)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 a	nd 4)		Or Ind (I) (Instr.	lirect (I	wnership nstr. 4)
Common	Shares		04/24/2018			A		13,736 (1)	A	\$ 0	108,761			D		
Common	Shares										28,150			I	C T 20 F	ouglas aylor 005 amily rust (2)
Reminder:	Report on a s	separate line fo	r each class of secur				Pers cont the f	ons who ained in orm disp	respo this for plays a	rm are curre	e not requ ntly valid	ction of inf uired to res OMB cont	spond unl		SEC 14	74 (9-02)
				Derivative Secu e.g., puts, calls,		-		-	*		lly Owned					
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Execution Day Year) any	4. Transactic Code (Instr. 8)	Of D Se A (A D Of (I	umber	and l	ate Exerci Expiration nth/Day/Y	Date	Am Uno Sec	itle and ount of lerlying urities tr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number Derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly For Direction or n(s) (I)	wnership orm of erivative ecurity: irect (D) Indirect	Beneficia Ownershi (Instr. 4)
				Code V	V (.	A) (D)	Date Exer		xpiratio Oate	n Titl	Amount or Number of Shares					

Reporting Owners

		Relationsl	nips	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Taylor Douglas C 200 PUBLIC SQUARE SUITE 3300 CLEVELAND, OH 44114-2315	X			

Signatures

/s/ James D. Graham by Power of Attorney	04/26/2018	8	}	,					,								,	,															,					,	,)	,	,	,			,	;	,													-	-	-	-	-	-		-		-													ı			ı					,))	;)	3	3	;	,	
**Signature of Reporting Person	Date								Ī	ĺ	Ì	Ì				i			Ī		i	•	•					ĺ	Ī				Ī		Ī	Ī							Ī		Ī	Ī		Ī		Ī	Ī	Ī	Ī	Ī			_		Ī	Ī											Ī	Ī	Ī	Ī	Ī		Ī	Ī	Ī	Ī	Ī	Ī	Ī	i	i	Ī	Ī	Ī	Ī		Ī				Ī	Ī	Ī		Ī				Ī

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 the number of restricted shares granted to the Reporting Person as the 2018 Director Restricted Shares pursuant to the Amended and Restated 2014 Nonemployee Directors' Compensation Plan.
- These shares are held in a trust for the benefit of the Reporting Person's children. The Reporting Person's spouse is a trustee of the trust. The Reporting Person disclaims (2) beneficial ownership of these securities, and the filing of this report is not an admission that the Reporting Person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

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.