## FORM 4

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

OMB APPROVAL
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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

(Print or Ty	pe Response	s)																	
1. Name an Taylor D	nd Address of ouglas C	2. Issuer Name CLEVELANI			~ .		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner												
200 PUBLIC SQUARE, SUITE 3300				3. Date of Earlies 07/02/2018	st Transactio	on (Mo	onth/Day	/Year)	Office	er (give title belo	ow)	Other (specif	y below)						
(Street) CLEVELAND, OH 44114-2315				4. If Amendment	, Date Origi	inal Fi	led(Month	/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person										
(City		(State)	т	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
(Instr. 3) Date			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yea	3. Transa Code (Instr. 8)	action	4. Secu (A) or 1 (D)		quired l of	5. Amoun Beneficia	nt of Securition Ily Owned F Transaction	es ollowing	6. Ownershi Form: Direct (D						
					Code	V	Amoun	(A) or (D)	Price				or Indirection (I) (Instr. 4)	t (Instr. 4)					
Common Shares  Common Shares			07/02/2018		A		1,357 (1)	A	\$ 8.43	110,118			D						
										28,150			I	Douglas C. Taylor 2005 Family Trust (2)					
Reminder:	Report on a s	separate line for		Derivative Securi	ties Acquir	Pers cont the f	ons wh ained ir orm dis	o respo this fo plays a	orm are curre	e not requently valid	ction of inf uired to res OMB conf	spond unle	ess	C 1474 (9-02)					
1 77:41		2 T	,	e.g., puts, calls, w							0 D : C	0.31 1	C 10	11.37					
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	Execution Dat (Year) any	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	and (Mo	ate Exerc Expiration nth/Day/	n Date	Am Und Sec	itle and ount of derlying urities tr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number Derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form Derive Secur Direct or Ind	of Benefic Owners (ty: (Instr. 4					
				Code V	(A) (D)	Date Exer	cisable	Expiration Date	on Title	Amount or Number of Shares									

### **Reporting Owners**

		Relationships										
Reporting Owner Name / Address	eporting Owner Name / Address Director Ov											
Taylor Douglas C 200 PUBLIC SQUARE SUITE 3300 CLEVELAND, OH 44114-2315	X											

#### **Signatures**

/s/ James D. Graham by Power of Attorney	07/05/2018	3															
**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).
- Reflects the number of common shares issued to the Reporting Person in payment of the Reporting Person's quarterly retainer in lieu of cash for the third quarter pursuant to (1) the Reporting Person's election to participate in the Cleveland-Cliffs Inc. Nonemployee Director Retainer Share Election Program. The Reporting Person elected to participate in the Retainer Election Program at 25%.
  - 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.