FORM 4

(Print or Type Perponses)

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

| Time of Ty | pe response | 3) | | | | | | | | | | | | | |
|---|---|--|--|---|----------------------------------|--|--|-----------|--------------------------------------|--|---------------------------------------|----------------|--|---|-------------|
| 1. Name and Address of Reporting Person* BRINZO JOHN S | | | 2. Issuer Name and Ticker or Trading Symbol CLEVELAND CLIFFS INC [CLF] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner | | | | | |
| (Last) (First) (Middle) 1100 SUPERIOR AVENUE, 15TH FLOOR | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/14/2006 | | | | | | | X Officer (give title below) Other (specify below) Chairman & CEO | | | | | |
| CLEVEI | LAND, OH | (Street) I 44114 | | 4. If A | Amendment, | Date Origi | nal Fil | led(Month | n/Day/Year) | | _X_ Form file | ed by One Repo | Group Filing orting Person One Reporting | | ble Line) |
| (City | 7) | (State) | (Zip) | | Ta | ble I - Noi | ı-Deri | ivative S | Securities | Acqui | ired, Dispo | sed of, or I | Beneficially | Owned | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. 8) | | 4. Securities Acquir (A) or Disposed of ((Instr. 3, 4 and 5) | | of (D) | Beneficial | lly Owned Following Transaction(s) | | Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | Code | V | Amoun | it (D) | Price | | | | (Instr. 4) | |
| Commor | Stock | | 03/14/2006 | | | A | | 8,721 | A (1) | \$ 86 | 102,858 | | | D | |
| Commor | Stock | | | | | | | | | | 71,869 | | | I | By VNQDC |
| Reminder: | Report on a | separate line fo | r each class of secur | ities be | eneficially ov | | Perse conta | ons wh | o respor | m are | not requ | | ormation spond unle | ess | 1474 (9-02) |
| | | | | | itive Securiti uts, calls, wa | es Acquir | ed, Di | sposed (| of, or Ben | eficial | • | | | | |
| 1. Title of Derivative Security | 2. Conversion or Exercise Price of | (Month/Day/Yea | 3A. Deemed Execution Dat Year) any | te, if Transaction Code Code (Instr. 8) To Derivative | | 5. Number of Derivative Securities | and Expiration Date (Month/Day/Year) and Expiration Date U | | 7. Ta Amo Und Secu (Inst | itle and ount of erlying urities tr. 3 and | | | Owners Form o Derivat Securit | ive Ownersh | |
| (Instr. 3) | Derivative Security | | | | | (A) or Disposed of (D) (Instr. 3, | | | | 4) | | | Reported Transaction | Direct (or India (I) (Instr. 4 | ect |

Reporting Owners

| P. (1. O. N. / | Relationships | | | | | | |
|--|---------------|--------------|----------------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| BRINZO JOHN S 1100 SUPERIOR AVENUE 15TH FLOOR CLEVELAND, OH 44114 | X | | Chairman & CEO | | | | |

Signatures

George W. Hawk, Jr. by Power of Attorney

03/16/2006

| **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).

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.