Check this box if no D longer subject to Section 16. Form 4 or Form 5 obligations	rsuant to Section	HANGES IN B n 16(a) of the S	BENEFICIAI Securities Excl ent Company A nd Ticker or Tra	COWNERSHI	DMMISSION P OF SECURITI 034 or Section 30(OMB Nu Estimate hours pe	MB APPROVAL umber: 3235 ed average burde er response	5-0287
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- (1) 19,176 Shares held for the benefit of the Reporting Person, under Indirect Ownership (I), by the Cleveland-Cliffs Inc Voluntary Non-Qualified Deferred Compensation Plan (VNQDC).
- (2) Disposition of shares as gift requires no dollar amount.

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.