

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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

1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Taylor Doug	las C						ND-CLI					X Director	incubic)	100	6 Owner	
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)								Officer (give title below) Other (specify below)			
200 PUBLIC SQUARE, SUITE 3300						7/1/2020										
	(Stre	et)		4.	If Ar	nendme	nt, Date O	rigin	al File	d (MM/DI	D/YYYY	6. Individual o	or Joint/G	roup Filing (Check Appl	icable Line)
CLEVELAND, OH 44114-2315 (City) (State) (Zip)												X_Form filed by	X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
			Table I	- Non-De	rivat	ive Secu	ırities Acc	quir	ed, Dis	posed o	f, or B	eneficially Own	ed			
1.Title of Security (Instr. 3)			. Trans. Date	2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	de 4. Securitie or Disposed (Instr. 3, 4		sed of (D)			Amount of Securities Beneficially Owned ollowing Reported Transaction(s) nstr. 3 and 4)		Ownership Form:	7. Nature of Indirect Beneficial Ownership	
							Code	V	Amount	` '	Price					(Instr. 4)
Common Shares 7/1/2020				7/1/2020			A		2130 (1)	A	\$5.37	16	161197.21			
Common Shares													28150			Douglas C. Taylor 2005 Family Trust (2)
	Tab	le II - De	rivative	Securities	Ben	eficially	Owned (e.g.,	puts, c	alls, wa	rrants	s, options, conve	tible secu	ırities)		
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deem Execution Date, if an	(Instr. 8)	Code 5. Numb Derivati Acquired Disposed (Instr. 3,		e Securities (A) or of (D)				Securiti	es Underlying ive Security	Derivative Security	Securities Beneficially Owned	Ownership Form of Derivative Security:	Beneficial
	Security			Code	le V	(A)	(D)	Date Exer	cisable E	expiration Date		amount or Number of thares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

- (1) 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 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%.
- (2) 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 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.

Reporting Owners

1 0							
Paparting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	ips Officer	Other			
Taylor Douglas C							
200 PUBLIC SQUARE	X						
SUITE 3300	Λ						
CLEVELAND, OH 44114-2315							

Signatures

/s/ James D. Graham by Power of Attorney

**Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.