FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL

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

	ions may contii tion 1(b).	nue. See		Filed							ies Exchang mpany Act o		1934			hours	per re	sponse:	0.5
1. Name and Address of Reporting Person [*] Cutshall Patrick L						2. Issuer Name and Ticker or Trading Symbol <u>ALLETE INC</u> [ALE]								5. Relationship of Reporting Person(s) to Issu (Check all applicable) Director 10% Owne Officer (give title Other (spe					wner
(Last) (First) (Middle) 30 WEST SUPERIOR STREET					3. Date of Earliest Transaction (Month/Day/Year) 02/09/2023										elow)			Other (specify below) ISURE	
(Street) DULUT (City)	4. If <i>A</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								ine) X Fo Fo									
		Table	I - No	n-Deriva	tive S	Secu	rities	s Acq	uired	, Dis	posed of	, or B	enefic	ially O	wned	ł			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,			3.TransactionCode (Instr.8)					4 and Secur Benef		icially d Following		n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Amount	(A) o (D)	r Price	Tra	Transaction(s) (Instr. 3 and 4)				(
Common	Stock	02/09/2023 F 197.41 D \$59.85 6,334.58 D					D												
Common Stock															1,883	3.5		I	By RSOP Trust
		Tal	ble II -								osed of, convertib				ned	,			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) of Dispo of (D)	r osed) r. 3, 4	Expiration D		ate (ear) Expiration	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of Title Share		nt er		Number of erivative ecurities eneficially wned ollowing eported ransactior nstr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

Ingrid K. Johnson for Patrick 02/10/2023

L. Cutshall

** 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 Number.