# 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).
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Last (First) (Middle)   121 SW SALMON STREET 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Other (specify below)   121 SW SALMON STREET 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line)   (Street) PORTLAND OR 97204 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line)   (City) (State) (Zip) Rule 10b5-1(c) Transaction Indication Form filed by More than One Reporting Person	1. Name and Addr Millegan Mi	1 0	Person*	2. Issuer Name and Ticker or Trading Symbol <u>PORTLAND GENERAL ELECTRIC CO</u> / <u>OR/</u> [ POR ]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Street) PORTLAND OR 97204 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line)   (City) (State) (Zip) Rule 10b5-1(c) Transaction Indication   Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to the formula of the formula	. ,	(First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year)	1							
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to	(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	Line)	Form filed by One Re Form filed by More th	eporting Person					
	(City)	(State)	(Zip)	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to								

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, 1		tion Istr.	4. Securities Disposed Of and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock	07/21/2023		A		2,949	A	\$ <mark>0</mark>	12,828	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (II 8)		Secu Acqu (A) o Disp of (D	vative rities uired r osed ) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/N	ate	Deriv Secu	unt of rities rlying ative	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

## Explanation of Responses:

**Remarks:** 

### Kristina Benson Power of

Attorney on behalf of Michael 07/21/2023 **Millegan** 

\*\* 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.