FORM 4

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

or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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

1. Name and Address of Reporting Person* HOCHSCHILD ROGER C						2. Issuer Name and Ticker or Trading Symbol PRINCIPAL FINANCIAL GROUP INC									(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
HOCHSCHILD ROGER C					PF	PFG]										X Direc	tor		10% Ov	vner	
(Last)	(Last) (First) (Middle) 711 HIGH STREET					3. Date of Earliest Transaction (Month/Day/Year) 12/20/2023										Office below	er (give title		Other (s below)	pecify	
/111110	II STREET				4. If	Amer	dment	, Date	of Or	riginal l	iled	(Month/D	ay/Yea	ar)	6.1	ndividual o	Joint/Grou	p Filing	g (Check Ap	plicable	
(Stroot)					1					Ü		`	,	,	Lin	- /	,	`		·	
(Street) DES MOINES IA 50392																•		orting Perso	I		
ES WOINES IX 30372																Form filed by More than One Reporting Person					
(City) (State) (Zip)				Rı	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 satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.															
		Tab	le I - Nor	n-Deriv	ative	Sec	uritie	s Ac	qui	ired, l	Disp	osed o	of, or	r Ben	eficia	ly Owne	d				
1. Title of Security (Instr. 3) 2. Trans Date (Month/I						ay/Year) 2A. Deemed Execution Date if any (Month/Day/Year)			Code (Instr.			4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			d (A) or r. 3, 4 and	Benefic Owned	ies ially Following	Form (D) o	6. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									6	Code	v	Amount		(A) or (D)	Price	Report Transa (Instr. 3	ction(s)			Instr. 4)	
Common Stock 12/2				12/20	0/2023					A		265	A \$0 ⁽¹		3	31,226		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	Code (Ins				6. Date Exercisal Expiration Date (Month/Day/Year				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Securities General Owned Following Reported Transacti (Instr. 4)	Own Forn Dire or In (I) (Ii	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	e rcisable		xpiration ate	Title		Amount or Number of Shares						
Phantom Stock	(2)	12/20/2023			A		189			(3)		(3)	Comr		189	\$78.36	23,23	0	D		

Explanation of Responses:

- 1. Grant of restricted stock units.
- 2. The units convert to common stock on a one-for-one basis.
- 3. The reported phantom stock units were acquired pursuant to the Principal Deferred Compensation Plan for Non-Employee Directors and may be transferred at any time into another investment alternative under the Plan. Interests under the Plan will be settled upon the reporting person's retirement.

Chris Agbe-Davies as 12/22/2023 Attorney-in-Fact

** 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.