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

| wasinington, | D.C. | 20343 | |
|--------------|------|-------|--|
| | | | |

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|
| | | | |

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

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* GRISWELL J BARRY | | | | 2. Issuer Name and Ticker or Trading Symbol PRINCIPAL FINANCIAL GROUP INC | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|--|--|------------|---------------------------------|---|---|--|--|----------------------|---|--|--|---|--|---|-----------|---------------------|--------|
| GRISV | ELL J B | AKKI | | | PFG] | | | | | | | | Director | r | | 10% Owi | ner |
| (Last) | (F | irst) | (Middle) | | | | | | | | | 2 | Officer below) | (give title | | Other (sp below) | ecify |
| 711 HIGH STREET | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/26/2008 | | | | | | Chairman and CEO | | | | | | |
| (Street) | | | | | 4. If Am | endment, I | Date (| of Original Fi | led (Mo | Ionth/Da | y/Year) | 6. In Line | dividual or Jo) | oint/Group F | Filing (C | heck Appli | icable |
| DES MC | OINES IA | A | 50392 | | | | | | | | | 2 | √ Form fil | led by One I | Reportir | ng Person | |
| (City) | (S | state) | (Zip) | | Form filed by More than Person | | | | | | than O | ne Reporti | ng | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date | | | 2. Transac Date (Month/Da | Execution Date, | | Code (In | Transaction Disposed Of (D) (Instr. 3, 4 | | | 5. Amount of Securities Beneficially Owned Following Reported | | Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | Code V Amount (A) or (D) | | r Price | Transacti | Transaction(s) | | | msu. 4 <i>j</i> | | | | | | |
| 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) | erivative Conversion Date Execution Date, Tr ecurity or Exercise (Month/Day/Year) if any Co | | Cod | nsaction Derivative I | | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4) | | ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | ly D | Ownership Form: Direct (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | Cod | · V | (A) | (D) | Date Exercisable | | oiration e | Title | Amount or Number of Shares | | (Instr. 4) | ni(s) | | |
| Employee Stock Option (Right to Buy) | \$60.1 | 02/26/2008 | | A | | 214,480 | | (1) | 02/2 | 26/2018 | Common Stock | 214,480 | \$0 | 214,480 | 0 | D | |

Explanation of Responses:

 $1. \ The \ option \ vests \ in \ three \ equal \ annual \ installments \ beginning \ February \ 26, \ 2009.$

Remarks:

Joyce N. Hoffman, by Power of 02/28/2008 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 Number.