FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-02									
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hours per response:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					10.1	2. Januar Names and Tisker or Trading Complet										F. Polationship of Poporting Porcon(s) to Issuer					
1. Name and Address of Reporting Person* RIVERA ALFREDO						2. Issuer Name and Ticker or Trading Symbol PRINCIPAL FINANCIAL GROUP INC									(Ch	Relationship of Reporting Person(s) to Issu (Check all applicable) X Director 10% Own					
<u> </u>					PF	PFG]										X Direc	.01		10% OV	vrier	
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 09/29/2023										Office below	r (give title		Other (s below)	specify	
711 HIG	H STREET				-										_						
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)															X Form filed by One Reporting Person						
DES MO	DES MOINES IA 50392															Form filed by More than One Reporting Person					
(City) (State) (Zip)				Rι	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.															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date			_ Co	Transaction Dispose Code (Instr. 5)			rrities Acquired (A) ed Of (D) (Instr. 3, 4			Benefic Owned	es ially Following	Form (D) o	Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership	
									Co	ode V	,	Amount	(A) or (D)		Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock 09/				09/29	9/2023				1	A		87	A		\$0 ⁽¹⁾	8	8,160		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/Day	Date, Transactio					6. Date Exercisable a Expiration Date (Month/Day/Year)				and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)		Owr Forn Dire or Ir (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	cisable		piration ate	Title	1	Amount or Number of Shares						
Phantom Stock Units	(2)	09/29/2023			A		8		(3	(3)		(3)	Comm		8	\$72.07	858		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 Attorney-in-Fact

10/03/2023

** 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.