FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours por rosponso:	0.5							

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* OKEEFE MARY A (Last) (First) (Middle) 711 HIGH STREET				PR	2. Issuer Name and Ticker or Trading Symbol PRINCIPAL FINANCIAL GROUP INC [PFG] 3. Date of Earliest Transaction (Month/Day/Year) 12/05/2008							eck all applic Directo V Officer	elationship of Reporting Per- ck all applicable) Director Officer (give title below) Sr. VP & Chief M			ner pecify	
												,					
(Street) DES MOINES IA 50392 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Transa Date				ransaction	Execution Date,			3. Transactio Code (Inst	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, tr. 5)			or 5. Amount of Securities Beneficially Owned Follow Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
		Ta	able II - Der (e.g					uired, Dis , options,		, or Bene	eficially	(Instr. 3					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year) 3. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year) 4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) 7. Title at Exercisable and Expiration Date (Month/Day/Year) Code (Instr. 8) 7. Title at Exercisable and Expiration Date (Month/Day/Year) Code (Instr. 8) 7. Title at Exercisable and Expiration Date (Month/Day/Year) Code (Instr. 8) 7. Title at Exercisable and Expiration Date (Month/Day/Year) Code (Instr. 8)			f g Security	8. Price of Derivative Security (Instr. 5)		re es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)								
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Performance Units	(1)	12/05/2008		A		217		(2)	(2)	Common Stock	217	(2)	9,462		D		
Phantom Stock Units	(1)	12/05/2008		A		41.9		(3)	(3)	Common Stock	41.9	\$19.2	1,915.	7	D		

Explanation of Responses:

- 1. Security converts to common stock on a one-for-one basis.
- 2. The reported performance units were acquired pursuant to the Principal Financial Group Long-Term Performance Plan. Units under the Plan will be settled in cash or stock within a five-year period from the date of vesting.
- 3. The reported phantom stock units were acquired pursuant to the Principal Select Savings Excess Plan 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 or other termination of service.

Remarks:

<u>Joyce N. Hoffman, by Power of Attorney</u> <u>12</u>

12/09/2008

d. .

** 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.