SEC Form 4

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

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

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

| 1. Name and Addres | ss of Reporting Person $\overline{\mathrm{VID}\ \mathrm{Y}}$ | n* | 2. Issuer Name and Ticker or Trading Symbol PRINCIPAL FINANCIAL GROUP INC FFG | | tionship of Reporting Perso all applicable) Director | on(s) to Issuer 10% Owner | | |
|-------------------------|--|----------|---|------------------------|---|------------------------------|--|--|
| (Last) 711 HIGH STRI | (First) EET | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 02/24/2004 | | Officer (give title below) | Other (specify below) | | |
| (Street) DES MOINES | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | X Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| (City) | (State) | (Zip) | | | Person | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 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 | Transaction(s) (Instr. 3 and 4) | | (1150. 4) |
| Common Stock | 02/24/2004 | | A | | 2,677 | A | \$0 ⁽¹⁾ | 30,011 | D | |
| Common Stock | 02/24/2004 | | F | | 1,369 | D | \$36.3 | 28,642 | D | |
| Common Stock | | | | | | | | 16,110 | I | By 401(k) Plan |
| Common Stock | | | | | | | | 383 | Ι | By Spouse |

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. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of | | 6. Date Exercisable and 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. 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 | | | | |
| Performance Units | (2) | 02/24/2004 | | A | | 24,094 | | (3) | (3) | Common Stock | 24,094 | (3) | 73,642 | D | |

Explanation of Responses:

1. Settlement of vested performance units.

2. Security converts to common stock on a one-for-one basis.

3. 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

Remarks:

Karen E. Shaff, by Power of Attorney

** Signature of Reporting Person

02/26/2004

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast 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.