FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number:

Estimated average burden 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).

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

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|--|--|----|------------|---------|--------------------------------|---|--|------------------|-----------------------|--|--|--------|--|-------|--|--------------------------------|---|---|--|--|
| 1. Name and Address of Reporting Person* <u>LAWLER JULIA M</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol PRINCIPAL FINANCIAL GROUP INC PFG] | | | | | | | | | Check | all app Dired | o of Reporting Person(s) to Iss licable) tor 10% Ov er (give title Other (s | | wner | |
| (Last) (First) (Middle) 711 HIGH STREET | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/01/2019 | | | | | | | | | X Officer (give title Officer (specific specific | | | | | |
| (Street) DES MOINES IA 50392 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Та | ble I - No | n-Deriv | ative | Se | curitie | s Ac | quired, | Dis | posed o | f, or | Ben | efici | ally C |)wne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | 4 and Secur Benef | | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | | v | Amount | 0 | A) or D) | Price | Trai | | ansaction(s) nstr. 3 and 4) | | | (Instr. 4) |
| Common Stock 05/01/ | | | | | | 2019 | | S ⁽¹⁾ | | 1,000 | | A | \$57 | '.25 | 58,920 | | D | | | |
| Common Stock | | | | | | | | | | | | | | | | | 1,290 | | I | By 401(k) Plan |
| | | | Table II - | | | | | | | | sed of, onvertib | | | | | ned | | | | |
| 1. Title of Derivative Security (Instr. 3) | | | | n Date, | 4. Transaction Code (Instr. 8) | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiratio (Month/D | 6. Date Exercisable a Expiration Date (Month/Day/Year) Date Expira Exercisable Date | | | Amount of Securities Underlying Derivative Security (Instr. and 4) | | | ce of ative rity . 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ov Fo Dii or (I) | wnership orm: rect (D) Indirect (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. Pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 2, 2018 and modified on November 7, 2018.

Remarks:

Patrick A. Kirchner, by Power of Attorney

05/01/2019

** 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.