$\Box$ 

(Last)

(Street) **DES MOINES** 

(City)

**711 HIGH STREET** 

## 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).

1. Name and Address of Reporting Person\* **GERSIE MICHAEL H** 

(First)

IA

(State)

(Middle)

50392

(Zip)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed

4. If Amendment, Date of Original Filed (Month/Day/Year)

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940		hours per respo	onse:	0.5
2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>PRINCIPAL FINANCIAL GROUP INC</u> [ PFG ]	tionship of Re all applicable Director Officer (giv below)	,	n(s) to Issuer 10% Owner Other (specify below)	4
3. Date of Earliest Transaction (Month/Day/Year) 09/19/2005	,	e Vice Presid	,	

6. Individual or Joint/Group Filing (Check Applicable Line) Х Form filed by One Reporting Person Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, D	Disposed of, or Beneficial	y Owned
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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)		4. Securities Disposed Of 5)	Acquired (D) (Instr	(A) or . 3, 4 and	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	09/19/2005		М		10,000	A	\$27.48	43,308(1)	D	
Common Stock	09/19/2005		S		10,000	D	\$46.42	33,308(1)	D	
Common Stock	09/19/2005		м		3,675	A	\$27.48	7,079(1)	I	By Spouse
Common Stock	09/19/2005		s		3,675	D	\$46.42	3,404(1)	I	By Spouse
Common Stock	09/19/2005		м		3,480	A	\$27.57	<b>6,88</b> 4 <sup>(1)</sup>	I	By Spouse
Common Stock	09/19/2005		s		3,480	D	\$46.42	3,404 <sup>(1)</sup>	I	By Spouse
Common Stock								451	I	By 401(k) Plan
Common Stock								226	I	By Spouse's 401(k) Plan

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(3-, p,,,															
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)		n 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				
Employee Stock Option (Right to Buy)	\$27.48	09/19/2005		М			10,000	(2)	04/29/2012	Common Stock	10,000	\$0	31,095	D	
Employee Stock Option (right to buy)	\$27.48	09/19/2005		М			3,675	(2)	04/29/2012	Common Stock	3,675	\$0	0	I	By Spouse
Employee Stock Option (right to buy)	\$27.57	09/19/2005		М			3,480	(2)	02/25/2013	Common Stock	3,480	\$0	0	I	By Spouse

Explanation of Responses:

1. Includes 1,680 shares acquired pursuant to the Principal Financial Group, Inc. Employee Stock Purchase Plan.

2. The option vested in equal annual installments.

Joyce N. Hoffman, by Power of 09/21/2005

<u>Attorney</u>

\*\* Signature of Reporting Person 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.