FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|-------------------|----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | | |
| Fatimated average | hurdon | | | | | | | | | |

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

hours per response: 0.5

| | ` , | | | | or | Sectio | n 30(h) |) of the | Investment | Compar | ny Act | of 1940 | | | | | | |
|--|---|--|---|--------|--------------------------------|--|---------|----------|--|----------------|---------|---|--|---|---|---|---------------------------------------|--|
| 1. Name and Address of Reporting Person* JOHNSON CHARLES S | | | | | | 2. Issuer Name and Ticker or Trading Symbol PRINCIPAL FINANCIAL GROUP INC | | | | | | | | heck all app | • | | | |
| | | | | | PF | PFG] | | | | | | | | X Direct | | 10% C | | |
| (Last) (First) (Middle) | | | | | | | | | | | | | | Officer (give title Other (spe below) below) | | | | |
| 711 HIGH STREET | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/08/2004 | | | | | | | | | , | , | | |
| (Street) | | | | | 4. 11 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| DES MO | OINES IA | L : | 50392 | | | | | | | | | | | X Form | filed by One | Reporting Pers | on | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | Form Perso | | than One Rep | orting | |
| | | Tab | le I - Non | -Deriv | ative | Sec | uriti | es A | cquired, D | ispos | sed o | of, or Be | eneficia | Ily Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Da | | | Code (Instr. 5) | | | | Benefic | ies I ially (Following (| 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | / Ar | mount | (A) (D) | Price | Transa (Instr. 3 | ction(s) | | (111501. 4) | | |
| 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/Yea | Date, | 4. Transactio Code (Inst | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | and | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Expira Date | ation | Title | Amount or Number of Shares | | | | | |
| Phantom Stock | (1) | 12/08/2004 | | | A | | 740 | | (2) | (2) | 2) | Common Stock | 740 | \$38.92 | 3,860.2 | D | | |

Explanation of Responses:

- 1. Security converts to common stock on a one-for-one basis.
- 2. The reported phantom stock units were acquired pursuant to the Principal Deferred Compensation Plan for Non-Employee Directors and will be settled on the reporting person's retirement.

Remarks:

Units

Joyce N. Hoffman, by Power

12/10/2004

of Attorney

** 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.