Edgar Filing: PRINCIPAL FINANCIAL GROUP INC - Form 4

PRINCIPAL FINANCIAL GROUP INC

Form 4

Common

Common

Stock

Stock

December 29, 2016

December 29	9, 2016											
FORM 4 UNITED STATES SECURITIES AND EVCHANCE COMMISSION							_	OMB APPROVAL				
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB Number:	3235-	0287		
Check thi	is box	Washington, D.C. 20549									y 31,	
if no long	(C.I.V.I.I	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires:	2005		
subject to Section 1 Form 4 or	6.								Estimated burden ho	Estimated average burden hours per response 0.5		
Form 5	Filed p	oursuant to	Section 1	6(a) of the	e Securit	ies E	xchan	ge Act of 1934,	•			
obligation may conti				•	_	_		of 1935 or Section	on			
See Instru 1(b).		30(h)	of the In	vestment	Compan	у Ас	t of 19	940				
(Print or Type F	Responses)											
1. Name and Address of Reporting Person * 2. Issuer SHAFF KAREN E Symbol PRINCI INC [PF				Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
				DAL EIN	ANCIAI	CD	OLID	155001				
					ANCIAI	_ GK	OUP	(Check all applicable)				
(Last)	(First)	(First) (Middle) 3. Date of			ansaction			DirectorX10% Owner				
			(Month/D	•				_X_ Officer (give title Other (specify below)				
711 HIGH STREET			12/27/20	016				EVP, Gen'l Counsel, Secretary				
(Street) 4.			4. If Ame	ndment, Da	te Original			6. Individual or Joint/Group Filing(Check				
Filed(Mo				th/Day/Year)			Applicable Line) _X Form filed by One Reporting Person				
DES MOIN	ES, IA 50392							Form filed by Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative :	Secur	ities Ac	equired, Disposed	of, or Benefici	ally Owned	l	
1.Title of	2. Transaction D	ate 2A. Dee	med	3.	4. Securi	ies		5. Amount of	6. Ownership	7. Nature o	of	
Security	(Month/Day/Yea		on Date, if TransactionAcquired (A) or					Securities Fo	Form: Direct	Indirect		
(Instr. 3)		any (Month/	Code Disposed of (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				Beneficially Owned	(D) or Indirect (I)	<i>'</i>			
	2ay/ 1 cat / (111str. 6) (111str. 3, 4 and 3)					Following	(Instr. 4)	(Instr. 4)	,			
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price \$ 0					
Stock	12/27/2016			A	91	A	(1)	80,928 (2)	D			

2,801

500

I

I

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

By Spouse

Immediate

Member's IRA

Family

By

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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 control number.

SEC 1474 (9-02)

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. Transaction Code (Instr. 8)	5. onNumber of Derivativ Securities Acquired	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title at Amount of Underlyin Securities (Instr. 3 a	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo
	·				(A) or Disposed of (D) (Instr. 3, 4, and 5)						Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

SHAFF KAREN E 711 HIGH STREET DES MOINES, IA 50392

X EVP, Gen'l Counsel, Secretary

Signatures

Patrick A. Kirchner, by Power of 12/29/2016 Attorney

> **Signature of Reporting Person Date

Explanation of Responses:

- 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).
- (1) Grant of restricted stock units.
- (2) Includes 7,330 shares acquired pursuant to the Principal Financial Group, Inc. Employee Stock Purchase Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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