

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Principal Life Insurance Company Political Action Committee

ADDRESS (number and street)

711 High Street

Check if different
than previously
reported. (ACC)

Government Relations

Des Moines

IA

50392-0220

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00128918

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☒ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
05 01 2026

through

M M M / D D D / Y Y Y Y Y Y
05 31 2026

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Payne, Chris, , Mr.,

Signature of Treasurer

Payne, Chris, , Mr.,

Date

M M M / D D D / Y Y Y Y Y Y
06 11 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Principal Life Insurance Company Political Action CommitteeReport Covering the Period: From:

M M	/	D D	/	Y Y Y Y Y
05		01		2026

 To:

M M	/	D D	/	Y Y Y Y Y
05		31		2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2026</td></tr></table>	Y	Y	Y	Y	Y	2026						<table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><t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☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Principal Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
05 01 2026

To:

M M / D D / Y Y Y Y Y
05 31 2026**I. Receipts****COLUMN A**
Total This Period**COLUMN B**
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

13946.78

77247.81

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

13946.78

77247.81

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

13946.78

77247.81

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

13946.78

77247.81

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

13946.78

77247.81

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28500.00	135500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	28500.00	135500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28500.00	135500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	13946.78	77247.81
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13946.78	77247.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Adamson, Michael, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr. Analyst-Investment Anlyts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-150**

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Adamson, Michael, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr. Analyst-Investment Anlyts

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-148**

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Agrawal, Vivek, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
EVP & Chief Growth Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-328**

Amount of Each Receipt this Period

192.30

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

194.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Agrawal, Vivek, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
EVP & Chief Growth Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-327**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Arcuri, Leslie, A, ,

Mailing Address 5045 Blenheim Rd

City
CharlottesvilleState
VAZip Code
22902-7778FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
LM Sr Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

88.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-233**

Amount of Each Receipt this Period

8.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Arcuri, Leslie, A, ,

Mailing Address 5045 Blenheim Rd

City
CharlottesvilleState
VAZip Code
22902-7778FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
LM Sr Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

88.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-231**

Amount of Each Receipt this Period

8.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

208.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Babcock, Julie, M, ,

Mailing Address 46822 Snow Hill Way

City
SterlingState
VAZip Code
20165-3509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
LM Sr Relationship Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-166

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Babcock, Julie, M, ,

Mailing Address 46822 Snow Hill Way

City
SterlingState
VAZip Code
20165-3509FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
LM Sr Relationship Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-164

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Baergen, John, Darrel, ,

Mailing Address 36 Crown Pl

City
RichardsonState
TXZip Code
75080-1603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Dir- Nonqualified Plans

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-218

Amount of Each Receipt this Period

2.88

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.88

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Baergen, John, Darrel, ,

Mailing Address 36 Crown Pl

City
RichardsonState
TXZip Code
75080-1603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Dir- Nonqualified Plans

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-216

Amount of Each Receipt this Period

2.88

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Baloga, Jeffrey, Ronald, ,Mailing Address 5080 Spectrum Dr
Ste 1210ECity
AddisonState
TXZip Code
75001-4603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Regional VP - Group Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-144

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Baloga, Jeffrey, Ronald, ,Mailing Address 5080 Spectrum Dr
Ste 1210ECity
AddisonState
TXZip Code
75001-4603FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Regional VP - Group Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-142

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.88

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 109
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bastian, John, R, ,

Mailing Address 13722 W Nogales Dr

City
Sun City WestState
AZZip Code
85375-6890FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Branch Examiner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-199

Amount of Each Receipt this Period

2.76

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bastian, John, R, ,

Mailing Address 13722 W Nogales Dr

City
Sun City WestState
AZZip Code
85375-6890FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Branch Examiner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-197

Amount of Each Receipt this Period

2.76

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bavender, Gregory, Clyde, ,

Mailing Address 293 Pigeon River Rd

City
KyleState
TXZip Code
78640-3332FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Consultant-Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-127

Amount of Each Receipt this Period

7.69

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13.21

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 109
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bavender, Gregory, Clyde, ,

Mailing Address 293 Pigeon River Rd

City
KyleState
TXZip Code
78640-3332FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Consultant-Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-125**

Amount of Each Receipt this Period

7.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Beals, Michael, Gladson, ,

Mailing Address 711 High St

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
AVP - Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-296**

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Beals, Michael, Gladson, ,

Mailing Address 711 High St

City

Des Moines

State

IA

Zip Code

50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
AVP - Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-295**

Amount of Each Receipt this Period

28.85

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65.39

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Beiter, Damian, J, ,Mailing Address 4830 W Kennedy Blvd
Ste 560City
TampaState
FLZip Code
33609-2512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sales Executive - Group Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-250**

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Beiter, Damian, J, ,Mailing Address 4830 W Kennedy Blvd
Ste 560City
TampaState
FLZip Code
33609-2512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sales Executive - Group Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-249**

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bell, Patricia, J, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
AVP-Advanced Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

82.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-7**

Amount of Each Receipt this Period

7.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bell, Patricia, J, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
AVP-Advanced Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

82.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-7**

Amount of Each Receipt this Period

7.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bender, Brian, C, ,

Mailing Address 10207 Woodview Way

City
BrecksvilleState
OHZip Code
44141-3801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP of Large Market Segment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-334**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bender, Brian, C, ,

Mailing Address 10207 Woodview Way

City
BrecksvilleState
OHZip Code
44141-3801FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP of Large Market Segment

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-333**

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

207.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Benson, Janis, Jean, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-297

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Benson, Janis, Jean, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP & Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-296

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bhatia, Kamal, , ,

Mailing Address 888 7th Ave

FI 25

City
New York

State
NY

Zip Code
10106-2599

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
President & CEO, Principal Asset Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-310

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

254.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bhatia, Kamal, , ,Mailing Address 888 7th Ave
Fl 25City
New YorkState
NYZip Code
10106-2599FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
President & CEO, Principal Asset Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-309**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bidler Hurley, Candence, Sue, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP-Principal Financial Network

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-72**

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bidler Hurley, Candence, Sue, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP-Principal Financial Network

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

847.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-71**

Amount of Each Receipt this Period

77.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

254.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bowie, Jason, R, ,

Mailing Address 4141 Parklake Ave
Ste 400City
RaleighState
NCZip Code
27612-2333FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Life Insurance CompanyOccupation (for Individual)
Director-NQ Conslt & Invst Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

69.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2026

Transaction ID : 202605066363-181

Amount of Each Receipt this Period

6.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bowie, Jason, R, ,

Mailing Address 4141 Parklake Ave
Ste 400City
RaleighState
NCZip Code
27612-2333FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Life Insurance CompanyOccupation (for Individual)
Director-NQ Conslt & Invst Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

69.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2026

Transaction ID : 202605206392-179

Amount of Each Receipt this Period

6.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Buckley, Therese, A, ,

Mailing Address 201 Jones Rd
2nd Flr, Princpal Financial Grp.City
WalthamState
MAZip Code
02451-1607FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director - Account Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

33.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2026

Transaction ID : 202605066363-214

Amount of Each Receipt this Period

3.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

15.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Buckley, Therese, A, ,

Mailing Address 201 Jones Rd

2nd Flr, Prinicipal Financial Grp,

City

Waltham

State

MA

Zip Code

02451-1607

FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

Director - Account Management

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

33.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-212**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burnor, Thomas, L, ,

Mailing Address Center View West

1920 Main St, Suite 710

City

Irvine

State

CA

Zip Code

92614-7226

FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

VP, Distribution-Ret Solution

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-216**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Burnor, Thomas, L, ,

Mailing Address Center View West

1920 Main St, Suite 710

City

Irvine

State

CA

Zip Code

92614-7226

FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

VP, Distribution-Ret Solution

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-214**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cimini, Jeffrey, K., ,

Mailing Address 27 Washington Ave

City
NeedhamState
MAZip Code
02492-3445FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

VP- Planning, Performance and Transf

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-331

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cimini, Jeffrey, K., ,

Mailing Address 27 Washington Ave

City
NeedhamState
MAZip Code
02492-3445FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

VP- Planning, Performance and Transf

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-330

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Claire, Chad, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

88.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-143

Amount of Each Receipt this Period

8.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

392.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Claire, Chad, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

88.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-141**

Amount of Each Receipt this Period

8.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Clark-Winslow, Andrea, M, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Strategy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-111**

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clark-Winslow, Andrea, M, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Strategy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-109**

Amount of Each Receipt this Period

1.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 109
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Close, Cindy, Mae, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Operations AVP - Stock Plan Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-62**

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Close, Cindy, Mae, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Operations AVP - Stock Plan Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-61**

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coleman, Daniel, R, ,Mailing Address 601 Union St
Ste 2200City
SeattleState
WAZip Code
98101-1377FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
CIO - Edge Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-237**

Amount of Each Receipt this Period

38.46

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coleman, Daniel, R, ,Mailing Address 601 Union St
Ste 2200City
SeattleState
WAZip Code
98101-1377FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
CIO - Edge Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-236**

Amount of Each Receipt this Period

38.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Coppola, Nicholas, James, ,

Mailing Address 1279 Old Farm Rd

City
MountainsideState
NJZip Code
07092-1915FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Director-Strategic Client Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-270**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Coppola, Nicholas, James, ,

Mailing Address 1279 Old Farm Rd

City
MountainsideState
NJZip Code
07092-1915FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Director-Strategic Client Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-269**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coulson, Lisa, Marie, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Senior Vice President, Chief Human Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-229**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Coulson, Lisa, Marie, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Senior Vice President, Chief Human Re

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-227**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cowie, Jim, P, ,Mailing Address 300 Tice Blvd, Ste 285
Principal Financial GroupCity
Woodcliff LakeState
NJZip Code
07677-8406FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Regional Sales Manager - Group Benefi

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-225**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cowie, Jim, P, ,

Mailing Address 300 Tice Blvd, Ste 285
Principal Financial Group

City
Woodcliff Lake

State
NJ

Zip Code
07677-8406

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Regional Sales Manager - Group Benef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-223

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dalal, Nandita, , ,

Mailing Address 19521 Dewey Ave

City
Elkhorn

State
NE

Zip Code
68022-2759

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP- Customer Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-329

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dalal, Nandita, , ,

Mailing Address 19521 Dewey Ave

City
Elkhorn

State
NE

Zip Code
68022-2759

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP- Customer Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-328

Amount of Each Receipt this Period

76.92

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

203.84

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Delaney, Kari, A, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director - Strategic Client Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2026

Transaction ID : 202605066363-107

Amount of Each Receipt this Period

7.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Delaney, Kari, A, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director - Strategic Client Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2026

Transaction ID : 202605206392-105

Amount of Each Receipt this Period

7.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dessouki, Ramona, , ,

Mailing Address 888 7th Ave
FI 25City
New YorkState
NYZip Code
10106-2599FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Executive Managing Director - Chief Ma

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2026

Transaction ID : 202605066363-332

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

65.38

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dessouki, Ramona, , ,Mailing Address 888 7th Ave
FI 25City
New YorkState
NYZip Code
10106-2599FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Executive Managing Director - Chief Ma

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-331**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dickman, Daniel, James, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Mng Dir-Portfolio Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-66**

Amount of Each Receipt this Period

4.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dickman, Daniel, James, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Mng Dir-Portfolio Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-65**

Amount of Each Receipt this Period

4.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

58.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dinville, Matthew, D, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
SMB Regional VP - Customer Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

127.60

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-115

Amount of Each Receipt this Period

11.60

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dinville, Matthew, D, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
SMB Regional VP - Customer Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

127.60

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-113

Amount of Each Receipt this Period

11.60

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dispigna, Francis, , ,

Mailing Address 48 S Service Rd
Ste 402

City
Melville

State
NY

Zip Code
11747-2335

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

52.91

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-249

Amount of Each Receipt this Period

4.81

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dispigna, Francis, , ,

Mailing Address 48 S Service Rd
Ste 402

City
Melville

State
NY

Zip Code
11747-2335

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

MM / DD / YYYY
05 / 22 / 2026

Transaction ID : 202605206392-248

Amount of Each Receipt this Period

4.81

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Djurasovic, George, , ,

Mailing Address 10605 N Wood Crest Ct

City
Mequon

State
WI

Zip Code
53092-6413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Interim General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

MM / DD / YYYY
05 / 08 / 2026

Transaction ID : 202605066363-325

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Djurasovic, George, , ,

Mailing Address 10605 N Wood Crest Ct

City
Mequon

State
WI

Zip Code
53092-6413

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Interim General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

MM / DD / YYYY
05 / 22 / 2026

Transaction ID : 202605206392-324

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

389.41

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dowil, Robert, Douglas, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-121**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dowil, Robert, Douglas, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-119**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Downing, Ryan, D, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP-SCBU CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-213**

Amount of Each Receipt this Period

76.92

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.92

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 109
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Downing, Ryan, D, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP-SCBU CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-211**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Drexler, Catherine, Mary, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

105.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-273**

Amount of Each Receipt this Period

9.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Drexler, Catherine, Mary, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

105.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-272**

Amount of Each Receipt this Period

9.61

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.14

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dubai, Brett, A, ,Mailing Address 1 Beach Lagoon Rd
Apt 21City
Hilton Head IslandState
SCZip Code
29928-5702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Market Director - Investment Only

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-235

Amount of Each Receipt this Period

110.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dufek, David, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP & Chief Internal Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-317

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dufek, David, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP & Chief Internal Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-316

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

494.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dummer, Marcus, William, ,Mailing Address 2331 W Entrada Trl
Unit 84City
Saint GeorgeState
UTZip Code
84770-7165FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
MD - Client Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-204

Amount of Each Receipt this Period

2.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dummer, Marcus, William, ,Mailing Address 2331 W Entrada Trl
Unit 84City
Saint GeorgeState
UTZip Code
84770-7165FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
MD - Client Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-202

Amount of Each Receipt this Period

2.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Eckman, Emily, S, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-81

Amount of Each Receipt this Period

76.92

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Eckman, Emily, S.,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-80

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Egan, John, Michael, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Executive Managing Director - CFO, Pr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-260

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Egan, John, Michael, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Executive Managing Director - CFO, Pri

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

847.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-259

Amount of Each Receipt this Period

77.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

230.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Epps, Wendell, , ,

Mailing Address 610 Loving Ct

City
SouthlakeState
TXZip Code
76092-6000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP, Distribution-Ret Solution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-132

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Epps, Wendell, , ,

Mailing Address 610 Loving Ct

City
SouthlakeState
TXZip Code
76092-6000FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP, Distribution-Ret Solution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-130

Amount of Each Receipt this Period

19.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Everett, Todd, Eugene, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Executive Managing Director - Global H

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-3

Amount of Each Receipt this Period

120.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

158.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Everett, Todd, Eugene, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Executive Managing Director - Global H

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-3**

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Farley, Kevin, Patrick, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP-Enterprise Worksite Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-167**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Farley, Kevin, Patrick, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP-Enterprise Worksite Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-165**

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

320.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fee, David, Wayne, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director - Client Portfolio Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-79

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fee, David, Wayne, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director - Client Portfolio Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-78

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fennessey, James, William, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-163

Amount of Each Receipt this Period

1.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

21.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fennessey, James, William, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-161

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fierro, Noreen, M., ,

Mailing Address 39 Two Bridges Rd

City
Towaco

State
NJ

Zip Code
07082-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
SVP & Enterprise Chief Ethics and Con

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-323

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Fierro, Noreen, M., ,

Mailing Address 39 Two Bridges Rd

City
Towaco

State
NJ

Zip Code
07082-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
SVP & Enterprise Chief Ethics and Com

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-322

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

385.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Flori, Louis, E, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Chief Financial Officer- RIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-255

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Flori, Louis, E, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Chief Financial Officer- RIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-254

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Folsom, Jason, M, ,

Mailing Address 5207 Competition Dr

City
Bettendorf

State
IA

Zip Code
52722-8837

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
MD - Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-262

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

158.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Folsom, Jason, M, ,

Mailing Address 5207 Competition Dr

City
BettendorfState
IAZip Code
52722-8837FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
MD - Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-261**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Francis, Melanie, Lynn, ,Mailing Address 4600 S Syracuse St
Ste 1010City
DenverState
COZip Code
80237-3081FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SMB Regional VP - Customer Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-212**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Francis, Melanie, Lynn, ,Mailing Address 4600 S Syracuse St
Ste 1010City
DenverState
COZip Code
80237-3081FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SMB Regional VP - Customer Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-210**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Frantzen, Matthew, D, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-170

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Frantzen, Matthew, D, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-168

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Friedrich, Amy, Christine, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
President, Benefits and Protection

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-176

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Friedrich, Amy, Christine, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
President, Benefits and Protection

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-174**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Froehlich, William, R, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director of PSI Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-197**

Amount of Each Receipt this Period

4.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Froehlich, William, R, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director of PSI Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-195**

Amount of Each Receipt this Period

4.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

200.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 41 OF 109
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Furutani, Robert, , ,Mailing Address 601 Union St
Ste 2200City
SeattleState
WAZip Code
98101-1377FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Senior Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-238**

Amount of Each Receipt this Period

2.88

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Furutani, Robert, , ,Mailing Address 601 Union St
Ste 2200City
SeattleState
WAZip Code
98101-1377FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Senior Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-237**

Amount of Each Receipt this Period

2.88

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gaul, Michael, Andrew, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP- Head of Principal Custody Solution

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-30**

Amount of Each Receipt this Period

76.92

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.68

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gaul, Michael, Andrew, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP- Head of Principal Custody Solution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-30**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Geadelmann, Steven, W, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director, Client Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

28.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-17**

Amount of Each Receipt this Period

2.55

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Geadelmann, Steven, W, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director, Client Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

28.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-17**

Amount of Each Receipt this Period

2.55

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

82.02

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 109
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goaley, Benjamin, Gregory, ,

Mailing Address 16510 Stonefeld Pl

City
ParkerState
COZip Code
80134-6037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sales Executive - Group Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-279**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goaley, Benjamin, Gregory, ,

Mailing Address 16510 Stonefeld Pl

City
ParkerState
COZip Code
80134-6037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sales Executive - Group Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-278**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goergen, Jonathan, P, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Customer Experience Manager 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

33.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-103**

Amount of Each Receipt this Period

3.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

23.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goergen, Jonathan, P, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Customer Experience Manager 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-101**

Amount of Each Receipt this Period

3.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gong-Browne, Jem, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Managing Director - Multi-Asset

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-277**

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gong-Browne, Jem, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Managing Director - Multi-Asset

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-276**

Amount of Each Receipt this Period

28.85

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gowdy, Brian, E, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director - Investment Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

MM / DD / YYYY
05 / 08 / 2026

Transaction ID : 202605066363-182

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gowdy, Brian, E, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director - Investment Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

MM / DD / YYYY
05 / 22 / 2026

Transaction ID : 202605206392-180

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Grossman, Kelly, Ann, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Managing Director - Manager Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

31.68

Date of Receipt

MM / DD / YYYY
05 / 08 / 2026

Transaction ID : 202605066363-36

Amount of Each Receipt this Period

2.88

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.88

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Grossman, Kelly, Ann, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Managing Director - Manager Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-36**

Amount of Each Receipt this Period

2.88

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Halvorson, Nicholas, J, ,Mailing Address 11100 Wayzata Blvd
Ste 410City
MinnetonkaState
MNZip Code
55305-5533FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Regional Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-192**

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Halvorson, Nicholas, J, ,Mailing Address 11100 Wayzata Blvd
Ste 410City
MinnetonkaState
MNZip Code
55305-5533FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Regional Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-190**

Amount of Each Receipt this Period

11.54

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

25.96

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hammond, Steven, , ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Lead Strategist, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-272

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hammond, Steven, , ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Lead Strategist, Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-271

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hanrahan, Melinda, Lea, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Managing Director - Public Markets

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-25

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 48 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hanrahan, Melinda, Lea, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Managing Director - Public Markets

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-25**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hanson, Scott, Louis, ,

Mailing Address 7173 Queensland Ln N

City
Maple GroveState
MNZip Code
55311-3025FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP, Distribution-Ret Solution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-18**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hanson, Scott, Louis, ,

Mailing Address 7173 Queensland Ln N

City
Maple GroveState
MNZip Code
55311-3025FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP, Distribution-Ret Solution

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-18**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Harrison, Cynthia, Ann, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Strategic Relationship Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-1

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Harrison, Cynthia, Ann, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Strategic Relationship Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-1

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hartman, Thomas, Freeman, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Infrastructure Engineer I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

31.68

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-47

Amount of Each Receipt this Period

2.88

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.88

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hartman, Thomas, Freeman, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Infrastructure Engineer I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-47**

Amount of Each Receipt this Period

2.88

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hassara, Teresa, A., ,

Mailing Address 224 Inlet Way

City
Palm Beach ShoresState
FLZip Code
33404-6274FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SVP, Workplace Savings & Retirement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-326**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hassara, Teresa, A., ,

Mailing Address 224 Inlet Way

City
Palm Beach ShoresState
FLZip Code
33404-6274FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SVP, Workplace Savings & Retirement

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-325**

Amount of Each Receipt this Period

192.30

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

387.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heidbreder, William, Edward, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Advanced Solutions Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-63

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Heidbreder, William, Edward, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Advanced Solutions Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-62

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Heine, David, W, ,

Mailing Address 4141 Parklake Ave
Ste 400

City
Raleigh

State
NC

Zip Code
27612-2333

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Asst Dir-Advanced Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-200

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

29.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heine, David, W, ,

Mailing Address 4141 Parklake Ave
Ste 400

City
Raleigh

State
NC

Zip Code
27612-2333

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Asst Dir-Advanced Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-198

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hendershott, Aimee, L, ,

Mailing Address 1400 Pinnacle Ct
Apt 313

City

Point Richmond

State
CA

Zip Code
94801-4177

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
SMB Relationship Manager III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-112

Amount of Each Receipt this Period

7.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hendershott, Aimee, L, ,

Mailing Address 1400 Pinnacle Ct
Apt 313

City

Point Richmond

State
CA

Zip Code
94801-4177

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
SMB Relationship Manager III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-110

Amount of Each Receipt this Period

7.69

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

20.38

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hinderaker, Clint, David, ,

Mailing Address 1059 Longfellow Dr
Ste A

City
Hiawatha

State
IA

Zip Code
52233-2079

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Regional Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-287

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hinderaker, Clint, David, ,

Mailing Address 1059 Longfellow Dr
Ste A

City
Hiawatha

State
IA

Zip Code
52233-2079

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Regional Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-286

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hittner, Jill, Marie, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Executive Managing Director - CFO, Pri

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-29

Amount of Each Receipt this Period

76.92

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.92

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 54 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hittner, Jill, Marie, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Executive Managing Director - CFO, Pri

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-29**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Janiszewski, Daniel, P, ,Mailing Address 3333 Finley Rd
Ste 550City
Downers GroveState
ILZip Code
60515-2471FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Market Director - Investment Only

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-209**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Janiszewski, Daniel, P, ,Mailing Address 3333 Finley Rd
Ste 550City
Downers GroveState
ILZip Code
60515-2471FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Market Director - Investment Only

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-207**

Amount of Each Receipt this Period

10.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

96.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Kyle, Trombley, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Associate Director, Quantitative Resea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-280

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Kyle, Trombley, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Associate Director, Quantitative Resea

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-279

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Johnson, Shawn, Eles, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP & CIO-Retire & Income Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-321

Amount of Each Receipt this Period

76.92

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Shawn, Eles, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP & CIO-Retire & Income Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-320

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Jordan, Ryan, Craig, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-284

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Jordan, Ryan, Craig, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-283

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

86.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Joyner, Scott, L, ,

Mailing Address 1581 Pachino Dr

City
Myrtle Beach

State
SC

Zip Code
29579-5942

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Reg Mngng Dir - Retirement Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

165.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-312

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Joyner, Scott, L, ,

Mailing Address 1581 Pachino Dr

City
Myrtle Beach

State
SC

Zip Code
29579-5942

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Reg Mngng Dir - Retirement Sol

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

165.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-311

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kay, Kathleen, Bivol, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Executive Vice President - Chief Infor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-316

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

222.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 58 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kay, Kathleen, Bivol, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Executive Vice President - Chief Infor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-315**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Keiser, Amy, Lynn, ,

Mailing Address 33570 287th St

City
GregoryState
SDZip Code
57533-4016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP, Retirement Product & Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-161**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Keiser, Amy, Lynn, ,

Mailing Address 33570 287th St

City
GregoryState
SDZip Code
57533-4016FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP, Retirement Product & Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-159**

Amount of Each Receipt this Period

76.92

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

346.14

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kelley, Michael, C, ,

Mailing Address 3217 Pine Bluffs Dr

City
Ellicott CityState
MDZip Code
21042-2274FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Regional Sales Manager - Group Benef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-184

Amount of Each Receipt this Period

7.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Kelley, Michael, C, ,

Mailing Address 3217 Pine Bluffs Dr

City
Ellicott CityState
MDZip Code
21042-2274FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Regional Sales Manager - Group Bene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-182

Amount of Each Receipt this Period

7.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kohler Hoogensen, Kara, Marie, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SVP, Benefits and Protection-Head of V

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-113

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

207.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kohler Hoogensen, Kara, Marie, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SVP, Benefits and Protection-Head of V

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-111

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Konrad, Mark, J, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP - Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-39

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Konrad, Mark, J, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP - Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-39

Amount of Each Receipt this Period

76.92

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

346.14

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Krueger, Scott, W, ,

Mailing Address 6701 Westown Pkwy
Ste 200

City
West Des Moines

State
IA

Zip Code
50266-7706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Regional Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-259

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Krueger, Scott, W, ,

Mailing Address 6701 Westown Pkwy
Ste 200

City
West Des Moines

State
IA

Zip Code
50266-7706

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Regional Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-258

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lange, Justin, Thomas, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP - Chief Compliance Officer - Princi

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-231

Amount of Each Receipt this Period

76.92

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 62 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lange, Justin, Thomas, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP - Chief Compliance Officer - Princi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-229**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Laverick, Blaine, W, ,

Mailing Address 7412 Seacroft Cv

City
BradentonState
FLZip Code
34202-5289FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Reg VP - Nonqualified Plans

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

169.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-4**

Amount of Each Receipt this Period

15.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Laverick, Blaine, W, ,

Mailing Address 7412 Seacroft Cv

City
BradentonState
FLZip Code
34202-5289FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Reg VP - Nonqualified Plans

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

169.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-4**

Amount of Each Receipt this Period

15.38

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

107.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lawler, Cody, A, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Chief Supervision Officer and Head of

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-258

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lawler, Cody, A, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Chief Supervision Officer and Head of

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-257

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lee, Humphrey, H., ,

Mailing Address 711 High St
Unit 307

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP-Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-324

Amount of Each Receipt this Period

76.92

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

134.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lee, Humphrey, H., ,

Mailing Address 711 High St
Unit 307

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP-Investor Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-323

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lefler, William, N., ,

Mailing Address 401 McCullough Dr, St 200 & 300

City
Charlotte

State
NC

Zip Code
28262-3667

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Assoc Director - Wealth Advisory

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-117

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lefler, William, N., ,

Mailing Address 401 McCullough Dr, St 200 & 300

City
Charlotte

State
NC

Zip Code
28262-3667

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Assoc Director - Wealth Advisory

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-115

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.92

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Littlefield, Christopher, James, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
President - RIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-315

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Littlefield, Christopher, James, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
President - RIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-314

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Loe, Kimberly, Ann, ,

Mailing Address 25 La Mirage Cir

City
Aliso ViejoState
CAZip Code
92656-5250FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Relationship Manager, Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

52.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-322

Amount of Each Receipt this Period

4.81

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

389.41

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 66 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Loe, Kimberly, Ann, ,

Mailing Address 25 La Mirage Cir

City
Aliso ViejoState
CAZip Code
92656-5250FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Relationship Manager, Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-321**

Amount of Each Receipt this Period

4.81

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Long, Siri, Jo Madvig, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Senior Director - Archit & Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-222**

Amount of Each Receipt this Period

2.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Long, Siri, Jo Madvig, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Senior Director - Archit & Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-220**

Amount of Each Receipt this Period

2.31

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.43

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lusk, Dennis, E., ,

Mailing Address 525 Route 73 N
Ste 301City
MarltonState
NJZip Code
08053-3422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2026

Transaction ID : 202605066363-327

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lusk, Dennis, E., ,

Mailing Address 525 Route 73 N
Ste 301City
MarltonState
NJZip Code
08053-3422FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2026

Transaction ID : 202605206392-326

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. May, Nicholas, John, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP - NQ & Business Solutions Distribut

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	08	/	2026

Transaction ID : 202605066363-236

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. May, Nicholas, John, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP - NQ & Business Solutions Distribut

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-234

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McCullum, Ken, , ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
EVP - Chief Risk Officer and General A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-288

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McCullum, Ken, , ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
EVP - Chief Risk Officer and General A

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-287

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

434.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McNally, Amy, Morlock, ,Mailing Address 888 7th Ave
FI 25City
New YorkState
NYZip Code
10106-2599FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Global Head Risk Mgmt-PGI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-265**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. McNally, Amy, Morlock, ,Mailing Address 888 7th Ave
FI 25City
New YorkState
NYZip Code
10106-2599FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Global Head Risk Mgmt-PGI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-264**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mendoza, Honore, N, ,Mailing Address 1478 Stone Point Dr
Ste 390City
RosevilleState
CAZip Code
95661-2869FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Wealth Sales Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-248**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

158.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mendoza, Honore, N, ,

Mailing Address 1478 Stone Point Dr
Ste 390City
RosevilleState
CAZip Code
95661-2869FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Wealth Sales Associate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-247

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Menz, Jeffrey, Richard, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Managing Director - Portfolio Managem

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

165.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-91

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Menz, Jeffrey, Richard, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Managing Director - Portfolio Managem

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

165.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-90

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

35.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miles, Everett, Sterling, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP - Corporate Strategy and Developm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-311

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Miles, Everett, Sterling, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP - Corporate Strategy and Developm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-310

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Andrew, C, ,

Mailing Address 2501 E Parkside Dr

City
BoiseState
IDZip Code
83712-7554FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
MD, Strategic Client Group-Wealth

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-242

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

394.60

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 72 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Miller, Andrew, C, ,

Mailing Address 2501 E Parkside Dr

City
BoiseState
IDZip Code
83712-7554FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
MD, Strategic Client Group-Wealth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-241**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mueller, John, Michael, ,

Mailing Address 6 Saint Andrews Cir

City
FalmouthState
MEZip Code
04105-1139FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Investment Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-338**

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mueller, John, Michael, ,

Mailing Address 6 Saint Andrews Cir

City
FalmouthState
MEZip Code
04105-1139FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Investment Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-337**

Amount of Each Receipt this Period

11.54

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

33.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Murray, Michael, Francis, ,

Mailing Address 6 Morgan Dr

City
Bow

State
NH

Zip Code
03304-4013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
President Principal Securities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-305

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Murray, Michael, Francis, ,

Mailing Address 6 Morgan Dr

City
Bow

State
NH

Zip Code
03304-4013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
President Principal Securities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-304

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ness, Brian, S, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP - Strategic Execution Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-50

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ness, Brian, S, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP - Strategic Execution Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-49**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Nicholson, Edward, Eldon, ,

Mailing Address 2014 Woodland Ave

City
West Des MoinesState
IAZip Code
50265-2235FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Regional VP - Business Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-140**

Amount of Each Receipt this Period

2.88

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Nicholson, Edward, Eldon, ,

Mailing Address 2014 Woodland Ave

City
West Des MoinesState
IAZip Code
50265-2235FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Regional VP - Business Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-138**

Amount of Each Receipt this Period

2.88

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Noga, David, P, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-102

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Noga, David, P, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-100

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Nordhus, Philip, K, ,

Mailing Address 521 N Hampton Dr

City
Davenport

State
FL

Zip Code
33897-5301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-40

Amount of Each Receipt this Period

192.30

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

346.14

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 76 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nordhus, Philip, K, ,

Mailing Address 521 N Hampton Dr

City
DavenportState
FLZip Code
33897-5301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-40**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Oswald, Monica, Juliana, ,

Mailing Address 4725 Sarca Ct

City
Lakewood RanchState
FLZip Code
34211-5542FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP - Retirement Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-330**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Oswald, Monica, Juliana, ,

Mailing Address 4725 Sarca Ct

City
Lakewood RanchState
FLZip Code
34211-5542FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP - Retirement Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-329**

Amount of Each Receipt this Period

76.92

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

346.14

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 77 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Payne, Christopher, David, ,

Mailing Address 801 Pennsylvania Ave NW, Ste 420

City
WashingtonState
DCZip Code
20004-2615FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SVP, Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-271**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Payne, Christopher, David, ,

Mailing Address 801 Pennsylvania Ave NW, Ste 420

City
WashingtonState
DCZip Code
20004-2615FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SVP, Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-270**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pitz, Joel, M, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
EVP & Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-88**

Amount of Each Receipt this Period

192.30

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

576.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pitz, Joel, M, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
EVP & Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-87

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Prey, R, Kelly, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
National Sales Director - Income Solut

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

165.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-58

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Prey, R, Kelly, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
National Sales Director - Income Solut

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

165.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-57

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

222.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 79 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Radecki, Sarah, Elizabeth, ,Mailing Address 601 Union St
Ste 2200City
SeattleState
WAZip Code
98101-1377FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-240**

Amount of Each Receipt this Period

2.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Radecki, Sarah, Elizabeth, ,Mailing Address 601 Union St
Ste 2200City
SeattleState
WAZip Code
98101-1377FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Portfolio Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-239**

Amount of Each Receipt this Period

2.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rayhons, Jerome, Scott, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Project Manager IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

66.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-60**

Amount of Each Receipt this Period

6.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 80 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rayhons, Jerome, Scott, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Project Manager IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-59**

Amount of Each Receipt this Period

6.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Raynor, Matthew, T, ,

Mailing Address 2685 Arborcrest Ct

City
Mount PleasantState
SCZip Code
29466-6037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
MD, Head of Distribution-US Wealth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-301**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Raynor, Matthew, T, ,

Mailing Address 2685 Arborcrest Ct

City
Mount PleasantState
SCZip Code
29466-6037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
MD, Head of Distribution-US Wealth

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-300**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reddy, SRinivas, Dharam, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SVP - Retirement & Income Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-306**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reddy, SRinivas, Dharam, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SVP - Retirement & Income Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-305**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reece, Sara, Lyn, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Managing Director - Global Head of Fun

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-148**

Amount of Each Receipt this Period

7.69

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

392.29

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 82 OF 109
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Reece, Sara, Lyn, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Managing Director - Global Head of Fur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-146**

Amount of Each Receipt this Period

7.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Reynolds, Deborah, R, ,

Mailing Address 7777 Sunset Ct SE

City
CaledoniaState
MIZip Code
49316-9577FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
LM Regional VP - Customer Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-169**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reynolds, Deborah, R, ,

Mailing Address 7777 Sunset Ct SE

City
CaledoniaState
MIZip Code
49316-9577FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
LM Regional VP - Customer Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-167**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Rigler, David, Andrew, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
CFO - Bank & Trust/Income Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-243

Amount of Each Receipt this Period

2.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rigler, David, Andrew, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
CFO - Bank & Trust/Income Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-242

Amount of Each Receipt this Period

2.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Roorda, Skyler, Leigh, ,

Mailing Address 2250 Davis Dr

City
Leighton

State
IA

Zip Code
50143-8041

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Manager - Internal Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

44.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-293

Amount of Each Receipt this Period

4.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Roorda, Skyler, Leigh, ,

Mailing Address 2250 Davis Dr

City
LeightonState
IAZip Code
50143-8041FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Manager - Internal Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-292**

Amount of Each Receipt this Period

4.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Roquet, Ricky, W, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Software Engineer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

71.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-55**

Amount of Each Receipt this Period

6.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Roquet, Ricky, W, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Software Engineer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

71.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-54**

Amount of Each Receipt this Period

6.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sailer, Scott, M, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP - Treasurer and Corporate CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-116

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sailer, Scott, M, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP - Treasurer and Corporate CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-114

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schafer, Andrew, James, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP, Benefits and Protection-Head of Wc

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-122

Amount of Each Receipt this Period

76.92

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.92

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schafer, Andrew, James, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP, Benefits and Protection-Head of W

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-120**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schelhaas, Nathan, Paul, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SVP, Benefits and Protection - Head of

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-120**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schelhaas, Nathan, Paul, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
SVP, Benefits and Protection - Head of

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-118**

Amount of Each Receipt this Period

76.92

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

230.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 87 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scholten, Brenda, K, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Assistant VP and CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-42**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Scholten, Brenda, K, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Assistant VP and CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-42**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Scholten, Michael, Joseph, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
AVP & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

24.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-154**

Amount of Each Receipt this Period

2.22

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scholten, Michael, Joseph, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AVP & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

24.42

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-152

Amount of Each Receipt this Period

2.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schutty, Ryan, J, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
MD, Head of Distribution-US Retiremer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-157

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schutty, Ryan, J, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
MD, Head of Distribution-US Retirement

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-155

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Shimp, Eric, Allan, ,

Mailing Address 801 Pennsylvania Ave NW, Ste 420

City
Washington

State
DC

Zip Code
20004-2615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP-International Gov't Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-300

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shimp, Eric, Allan, ,

Mailing Address 801 Pennsylvania Ave NW, Ste 420

City
Washington

State
DC

Zip Code
20004-2615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP-International Gov't Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-299

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sisson, Christina, G, ,

Mailing Address 21216 Winterset Dr

City
Santa Clarita

State
CA

Zip Code
91350-1858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
LM Sr Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-196

Amount of Each Receipt this Period

1.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

154.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 90 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sisson, Christina, G, ,

Mailing Address 21216 Winterset Dr

City
Santa ClaritaState
CAZip Code
91350-1858FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
LM Sr Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-194**

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Slade, Melissa, Kathleen Barnes, ,

Mailing Address 5676 Sapphire Dr

City
CarmelState
INZip Code
46033-2311FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Relationship Manager, Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-244**

Amount of Each Receipt this Period

2.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Slade, Melissa, Kathleen Barnes, ,

Mailing Address 5676 Sapphire Dr

City
CarmelState
INZip Code
46033-2311FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Relationship Manager, Field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-243**

Amount of Each Receipt this Period

2.30

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Smith, Audra, Carmel, ,

Mailing Address 2355 E Camelback Rd
Principal Financial Group, Ste 503

City Phoenix State AZ Zip Code 85016-9039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Regional Sales Manager - Group Benef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-267

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Smith, Audra, Carmel, ,

Mailing Address 2355 E Camelback Rd
Principal Financial Group, Ste 503

City Phoenix State AZ Zip Code 85016-9039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Regional Sales Manager - Group Bene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-266

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Snoots, Jeffrey, , ,

Mailing Address 401 McCullough Dr, St 200 & 300

City Charlotte State NC Zip Code 28262-3667

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
National Sales Director - Mid-Market &

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-313

Amount of Each Receipt this Period

76.92

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

96.92

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 92 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Snoots, Jeffrey, , ,

Mailing Address 401 McCullough Dr, St 200 & 300

City
CharlotteState
NCZip Code
28262-3667FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
National Sales Director - Mid-Market &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-312**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Souhrada, Kathleen, M, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP, Benefits and Protection - Head of

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-59**

Amount of Each Receipt this Period

76.92

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Souhrada, Kathleen, M, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP, Benefits and Protection - Head of

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-58**

Amount of Each Receipt this Period

76.92

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

230.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Spadafora, Craig, Alan, ,

Mailing Address 75 Elm St

City
Malden

State
MA

Zip Code
02148-3804

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Head of PSI Products & Platform

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-308

Amount of Each Receipt this Period

140.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Spadafora, Craig, Alan, ,

Mailing Address 75 Elm St

City
Malden

State
MA

Zip Code
02148-3804

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Head of PSI Products & Platform

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-307

Amount of Each Receipt this Period

140.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Stirling, Julie, Rose, ,

Mailing Address 1478 Stone Point Dr
Ste 390

City
Roseville

State
CA

Zip Code
95661-2869

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director - Strategic Client Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

31.68

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-239

Amount of Each Receipt this Period

2.88

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

282.88

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Stirling, Julie, Rose, ,Mailing Address 1478 Stone Point Dr
Ste 390City
RosevilleState
CAZip Code
95661-2869FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director - Strategic Client Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-238**

Amount of Each Receipt this Period

2.88

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Strable-Soethout, Deanna, Dawnette, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Chair, President and Chief Executive O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-12**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Strable-Soethout, Deanna, Dawnette, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Chair, President and Chief Executive O

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-12**

Amount of Each Receipt this Period

192.30

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

387.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Strucel, Tammy, Lynn, ,

Mailing Address 6938 Beaver Dam Rd

City
Allenton

State
WI

Zip Code
53002-9762

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

Assistant Director Learning & Developm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-152

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Strucel, Tammy, Lynn, ,

Mailing Address 6938 Beaver Dam Rd

City
Allenton

State
WI

Zip Code
53002-9762

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

Assistant Director Learning & Developm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-150

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sundara, Anourack, , ,

Mailing Address 11100 Wayzata Blvd
Ste 410

City
Minnetonka

State
MN

Zip Code
55305-5533

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

Sr Sales Rep-Grp Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-294

Amount of Each Receipt this Period

4.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

27.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Sundara, Anourack, , ,

Mailing Address 11100 Wayzata Blvd
Ste 410

City
Minnetonka

State
MN

Zip Code
55305-5533

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Sales Rep-Grp Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-293

Amount of Each Receipt this Period

4.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tebo, Kirk, L, ,

Mailing Address 2000 Rayner Rd

City
Kirkwood

State
MO

Zip Code
63122-3543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP, Distribution-Ret Solution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-153

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Tebo, Kirk, L, ,

Mailing Address 2000 Rayner Rd

City
Kirkwood

State
MO

Zip Code
63122-3543

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP, Distribution-Ret Solution

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-151

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

24.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Tetmeyer, Kristine, A, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AVP - Customer Care Field Srvc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-70

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Tetmeyer, Kristine, A, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AVP - Customer Care Field Srvc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-69

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Van Baale, Jeffrey, Alan, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-46

Amount of Each Receipt this Period

28.85

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Van Baale, Jeffrey, Alan, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-46**

Amount of Each Receipt this Period

28.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wanek, James, Gerard, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
National VP - Business Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

198.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-295**

Amount of Each Receipt this Period

18.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wanek, James, Gerard, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
National VP - Business Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

198.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-294**

Amount of Each Receipt this Period

18.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

64.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 99 OF 109
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wanninger, Louis, Joseph, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Managing Dir-Asset Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-90**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wanninger, Louis, Joseph, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Managing Dir-Asset Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-89**

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weitzel, Donald, Eugene, ,Mailing Address 3625 Cumberland Blvd SE
Ste 1075City
AtlantaState
GAZip Code
30339-6425FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Regional VP - Group Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

101.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-145**

Amount of Each Receipt this Period

9.23

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

19.23

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 100 OF 109
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weitzel, Donald, Eugene, ,Mailing Address 3625 Cumberland Blvd SE
Ste 1075City
AtlantaState
GAZip Code
30339-6425FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Regional VP - Group Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

101.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-143**

Amount of Each Receipt this Period

9.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wenig, Barbara, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Executive Managing Director - Chief Bu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-320**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wenig, Barbara, , ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Executive Managing Director - Chief Bu

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2115.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-319**

Amount of Each Receipt this Period

192.30

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

393.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wiechman, Melissa, Kay, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Mng Dir - Debt Production

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-160

Amount of Each Receipt this Period

6.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wiechman, Melissa, Kay, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Mng Dir - Debt Production

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-158

Amount of Each Receipt this Period

6.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wilhelm, Kevin, L, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP - Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

100.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-49

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

22.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wood, Bethany, Ann, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
EVP & Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-309

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wood, Bethany, Ann, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
EVP & Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-308

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wrightsman, Andrew, Michael, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Associate Director, Client Portfolio M

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

23.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-286

Amount of Each Receipt this Period

2.15

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

202.15

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 OF 109

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wrightsman, Andrew, Michael, ,

Mailing Address 711 High St

City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Associate Director, Client Portfolio M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-285**

Amount of Each Receipt this Period

2.15

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Young, Annette, Taylor, ,

Mailing Address 15640 Lake Shore Dr

City
Spirit LakeState
IAZip Code
51360-7696FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Asst Consult Dir-Adv Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-24**

Amount of Each Receipt this Period

2.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Young, Annette, Taylor, ,

Mailing Address 15640 Lake Shore Dr

City
Spirit LakeState
IAZip Code
51360-7696FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Asst Consult Dir-Adv Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-24**

Amount of Each Receipt this Period

2.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 OF 109

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zorich, Michael, Stephen, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Managing Director - Private Credit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.41

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-193

Amount of Each Receipt this Period

2.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Zorich, Michael, Stephen, ,

Mailing Address 711 High St

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Managing Director - Private Credit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.41

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-191

Amount of Each Receipt this Period

2.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4.62

13946.78

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens For WatersMailing Address 12501 Imperial Hwy
Ste 200City
NorwalkState
CAZip Code
90650-8352

Purpose of Disbursement

2026 Primary

011

Candidate Name

Waters, Maxine, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 43

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	2	6	

FEC Identification Number

C C00167585

Transaction ID : EDF93294AC

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Himes For CongressMailing Address 857 Post Rd
312City
FairfieldState
CTZip Code
06824-6041

Purpose of Disbursement

2026 Primary

011

Candidate Name

Himes, Jim, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: CT

District: 04

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	2	6	

FEC Identification Number

C C00434191

Transaction ID : 40E084196D1

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Huizenga For Congress

Mailing Address PO Box 254

City
ZeelandState
MIZip Code
49464-0254

Purpose of Disbursement

2026 Primary

011

Candidate Name

Huizenga, Bill, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: MI

District: 04

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	2	6	

FEC Identification Number

C C00459297

Transaction ID : 7813E9D12E

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

4500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. LaHood for Congress

Mailing Address PO Box 10735

City
PeoriaState
ILZip Code
61612-0735

Purpose of Disbursement

2026 General

011

Candidate Name

LaHood, Darin, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 16

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	3		2	0	2	6		

FEC Identification Number

C C00575050

Transaction ID : D2690F17451

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Larson For Congress

Mailing Address PO Box 261172

City
HartfordState
CTZip Code
06126-1172

Purpose of Disbursement

2026 Primary

011

Candidate Name

Larson, John, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CT District: 01

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8		2	0	2	6		

FEC Identification Number

C C00330142

Transaction ID : BDAACC84DI

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Lawler For Congress, Inc.

Mailing Address PO Box 137

City
ChappaquaState
NYZip Code
10514-0137

Purpose of Disbursement

2026 Primary

011

Candidate Name

Lawler, Mike, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 17

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8		2	0	2	6		

FEC Identification Number

C C00815415

Transaction ID : 93CA795C0C

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Maggie For Nh

Mailing Address PO Box 298

City
ConcordState
NHZip Code
03302-0298

Purpose of Disbursement

2028 Primary

011

Candidate Name

Hassan, Maggie, . .

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2028

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2026

FEC Identification Number

C C00588772

Transaction ID : 9A826B0AFF

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Thompson For Congress

Mailing Address 5445 Madison Ave

City
SacramentoState
CAZip Code
95841-3111

Purpose of Disbursement

2026 General

011

Candidate Name

Thompson, Mike, . .

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State: CA

District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2026

FEC Identification Number

C C00326363

Transaction ID : 470366ECC34

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Moore For Congress

Mailing Address PO Box 16646

City
MilwaukeeState
WIZip Code
53216-0646

Purpose of Disbursement

2026 Primary

011

Candidate Name

Moore, Gwen, . .

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: WI

District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2026

FEC Identification Number

C C00397505

Transaction ID : 9E47798B93I

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pete Aguilar For Congress

Mailing Address PO Box 10954

City
San BernardinoState
CAZip Code
92423-0954

Purpose of Disbursement

2026 Primary

011

Candidate Name

Aguilar, Pete, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 33

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8		2	0	2	6		

FEC Identification Number

C C00510461

Transaction ID : AB2EAA2E4E

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Richard E Neal For Congress Committee

Mailing Address 76 Magnolia Ter

City
SpringfieldState
MAZip Code
01108-2533

Purpose of Disbursement

2026 General

011

Candidate Name

Neal, Richard, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify)

State: MA

District: 01

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8		2	0	2	6		

FEC Identification Number

C C00226522

Transaction ID : 1909FC82BD4E

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Rounds For Senate

Mailing Address PO Box 250

City
PierreState
SDZip Code
57501-0250

Purpose of Disbursement

2026 General

011

Candidate Name

Rounds, Mike, , ,

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: SD

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8		2	0	2	6		

FEC Identification Number

C C00532465

Transaction ID : 0C6C0D5DAE

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

6000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rounds For Senate

Mailing Address PO Box 250

City
PierreState
SDZip Code
57501-0250

Purpose of Disbursement

2026 Primary

011

Candidate Name

Rounds, Mike, , ,

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: SD

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2026

FEC Identification Number

C C00532465

Transaction ID : 133BDA2C17

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Schneider For Congress

Mailing Address PO Box 1318

City
DeerfieldState
ILZip Code
60015-6005

Purpose of Disbursement

2026 General

011

Candidate Name

Schneider, Brad, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State: IL

District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2026

FEC Identification Number

C C00495952

Transaction ID : C38975BE5C!

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Terri Sewell For Congress

Mailing Address PO Box 1964

City
BirminghamState
ALZip Code
35201-1964

Purpose of Disbursement

2026 Primary

011

Candidate Name

Sewell, Terri, , ,

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: AL

District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		08		2026

FEC Identification Number

C C00458976

Transaction ID : B528E88116,

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

6500.00

TOTAL This Period (last page this line number only).....▶

28500.00