### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Typ	pe Response	s)													
1. Name and Address of Reporting Person * Olinger Thomas S					2. Issuer Name and Ticker or Trading Symbol Prologis, Inc. [PLD]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O PROLOGIS, INC., PIER 1, BAY 1				3. Date of Earlies 02/01/2012	3. Date of Earliest Transaction (Month/Day/Year) 02/01/2012						X Officer (give title below) Other (specify below)  Chief Integration Officer				
(Street) SAN FRANCISCO, CA 94111				4. If Amendment 02/03/2012	4. If Amendment, Date Original Filed(Month/Day/Year) 02/03/2012						6. Individual or Joint/Group Filing(Check Applicable Line)  _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City) (State) (Zip)				Т	Table I - Non-Derivative Securities Acqu					Acqui	lired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea		Code (Instr. 8)		ction	(A) or Disposed of (D (Instr. 3, 4 and 5)			Beneficially Owned Following Reported Transaction(s)			Ownership Form:	Beneficial	
			(Month/Day/Year	Co	ode	v	Amoun	(A) or t (D)	Price	(Instr. 3 a	nd 4)		Direct (D) O or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock (1)	(2)	02/01/2012	02/01/2012	F	F		2,624	$D = \begin{cases} \$ \\ 3 \end{cases}$	2.54	98,615	(3)	]	)	
Common Stock (1)		03/01/2012	03/01/2012	F	F		934	D \$3	3.8	97,681	(4)	]	)		
	responsible and	opurate into it		- Derivative Securi	ties Ac	quire	Pers cont the t	sons whatained in form dis	no respon n this for splays a c	m are currer	not requ itly valid		ormation spond unles rol number	s	1474 (9-02)
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Yea	Year) Execution 1		5.					7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Form of Derivative Security: Direct (D) or Indirect	(Instr. 4)
				Code V	(A)	(D)	Date	-	Expiration Date	Title	or Number of Shares				
Repor	ting O	wners													

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Olinger Thomas S C/O PROLOGIS, INC. PIER 1, BAY 1 SAN FRANCISCO, CA 94111			Chief Integration Officer					

# **Signatures**

Kristi Oberson attorney in fact for Thomas Olinger	03/05/2012
-*Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Shares withheld upon release of restricted stock to cover taxes owing.
- (2) Filing due to correction to the balance previously reported in column 5 and the associated footnote.
- Of the 98,615 securities beneficially owned, 85,712 are directly owned (D) and 12,903 securities are held indirectly (I) through a rabbi trust pursuant to our amended and restated nonqualified deferred compensation plan.
- (4) Of the 97,681 securities beneficially owned, 84,778 are directly owned (D) and 12,903 securities are held indirectly (I) through a rabbi trust pursuant to our amended and restated nonqualified deferred compensation plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.