FORM 4

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

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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

	Responses)														
1. Name and Address of Reporting Person* SKELTON JEFFREY L (Last) (First) (Middle) C/O PROLOGIS, INC., PIER 1, BAY 1 (Street) SAN FRANCISCO, CA 94111			2. Issuer Name and Ticker or Trading Symbol Prologis, Inc. [PLD]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner						
			Date of Earliest Transaction (Month/Day/Year) 09/27/2013 If Amendment, Date Original Filed(Month/Day/Year)							Officer (gi	ve title below)	Oti	ner (specify belo	ow)	
									X	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person nired, Disposed of, or Beneficially Owned				ine)	
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu						es Acquired						
1.Title of Secu (Instr. 3)	urity	I	2. Transaction Date Month/Day/Year)	2A. Deeme Execution in any (Month/Da	Date,	if Coo (Ins	Transact de str. 8)	(A)	ecurities Accor Disposed tr. 3, 4 and 5 (A) or ount (D)	of (D) Own Train (Ins		•	ed	Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Derivative (e.g., puts, c			f Acquire	contained form disp d, Dispose	d in this fo clays a cur	rently valioneficially Ov	required I OMB co	to respon	nd unless th		1474 (9-02)
Derivative	2. Conversion or Exercise	ion Date Execution Date (Month/Day/Year) Execution Date any (Month/Day	3A. Deemed Execution Date any	Code	of	er an	and Expiration Date of (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)			11. Natu	
Security (Instr. 3)	Price of Derivative Security		(Month/Day/Y	ear) (Instr. 8	8)	Deriva Securi Acqui (A) or Dispos of (D) (Instr. 4, and	ities red sed 3,			(Instr. 3 and	14)	-	Beneficially Owned Following Reported Transaction	Form of Derivati Security Direct (I or Indire	Beneficial Ownersh (Instr. 4)
	Derivative			Code	v	Securi Acqui (A) or Dispos of (D) (Instr. 4, and	ities red sed 3, 5)	ate xercisable	Expiration Date	Title	Amount or Number of Shares	-	Beneficially Owned Following Reported Transaction	Form of Derivati Security Direct (I or Indirects) (I)	Benefici Ownersh (Instr. 4)

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
SKELTON JEFFREY L C/O PROLOGIS, INC. PIER 1, BAY 1 SAN FRANCISCO, CA 94111	X				

Signatures

/s/ Tammy Colvocoresses attorney in fact for Jeffrey L. Skelton	10/01/2013
-**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).

Represents Dividend Equivalent Units (DEUs) earned on Deferred Stock Units (DSUs) associated with current service on our board that are deferred under the Prologis, Inc. Nonqualified Deferred Compensation Plan (the NQDC Plan). DEUs accrue on outstanding DSUs at the Prologis common stock dividend rate at the time dividends are paid on

(1) Prologis common stock. DEUs and the underlying DSUs vest 100% on the earlier of the first anniversary of the grant date or the first annual meeting of the stockholders of Prologis after the grant date (generally in May each year). The receipt of such DEUs is deferred along with the underlying DSUs. DSUs and DEUs are paid in the form of Prologis common stock at the rate of one common share per DSU or DEU. Balance in column 9 includes DSUs and DEUs.

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.