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

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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 Type)	Responses)														
1. Name and Address of Reporting Person * KENNARD LYDIA H (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						
		` _ ′	3. Date of Earliest Transaction (Month/Day/Year) 03/31/2014						_	Officer (gi	ve title below)	Oth	er (specify belo	w)	
		4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person uired, Disposed of, or Beneficially Owned				ne)		
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu										ies Acquired		
1.Title of Secu (Instr. 3)	2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date,) any (Month/Day/Yea		(Instr. 8)		(A) (In	Securities Ac or Disposed str. 3, 4 and 5 (A) or (D)	of (D) Ow 5) Tra (Ins	5. Amount of Securities Benef Owned Following Reported Transaction(s) (Instr. 3 and 4)		ed (Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership Instr. 4)	
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								red, Dispos	plays a cur ed of, or Be vertible secu	rently valid	I OMB co				
Derivative Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Yea	3A. Deemed Execution Date	(e.g., puts, 4. Transa Code	calls,	5. Num of	ber vative rities nired or osed o) r. 3,	form dis	plays a cur sed of, or Ber vertible secu ercisable tion Date	rently valid	vned Amount	ontrol num	9. Number o	f 10. Ownersh Form of Derivativ Security: Direct (Dor Indirect)	Beneficia Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date any	(e.g., puts, 4. Transa Code	ealls, action 8)	5. Num of Deriv Secur Acqu (A) of Dispo of (D (Instr	ber vative rities nired or osed o) r. 3,	form dis	plays a cur sed of, or Ben vertible secu- ercisable tion Date y/Year)	rently valid neficially Overities) 7. Title and of Underlyi Securities (Instr. 3 and	vned Amount	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction(f 10. Ownersh Form of Derivativ Security: Direct (E or Indirects)	of Indirect Beneficia Ownersh (Instr. 4)

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

Signatures

/s/ Tammy Colvocoresses attorney in fact for Lydia H. Kennard	04/02/2014
≕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 (NQDC Plan). DEUs accrue on outstanding DSUs at the Prologis common stock dividend rate at the time dividends are paid on Prologis

(1) 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. DSU 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.