# 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

(Print or Type	responses														
1. Name and Address of Reporting Person* SKELTON JEFFREY L			2. Issuer Name and Ticker or Trading Symbol Prologis, Inc. [PLD]     3. Date of Earliest Transaction (Month/Day/Year)     09/30/2014     4. If Amendment, Date Original Filed(Month/Day/Year)						5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_Director					
(Last) (First) (Middle) C/O PROLOGIS, INC., PIER 1, BAY 1									-						
(Street) SAN FRANCISCO, CA 94111															
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu						ies Acquir						
1.Title of Sect (Instr. 3)	urity		2. Transaction Date (Month/Day/Year)	2A. Dee Execution any (Month/	on Date	e, if	Code Code	(A) (In	Securities A ) or Dispose str. 3, 4 and  (A) nount (D)	d of (D)   C		/	ed I	Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
												of inform			474 (9-02)
				(e.g., put		, warr		form dis	plays a cu sed of, or B evertible sec	rrently va	lid OMB c	ontrol num			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Ye:	3A. Deemed Execution Date	e, if Code	s, calls	5. Num of Deri Secu Acq (A) Disp of (I (Inst	nber ivative urities uired or posed	form dis	sed of, or B evertible sec ercisable tion Date	rrently va	Owned  nd Amount lying	ontrol num	9. Number o	f 10. Ownersh Form of Derivativ Security: Direct (E or Indirec	Beneficia Ownersh (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date any	e, if Code	as, calls asaction de tr. 8)	5. Num of Deri Secu Acq (A) Disp of (I (Inst 4, ar	nber ivative urities uired or posed D) tr. 3, and 5)	form dis red, Dispos ptions, con 6. Date Ex and Expira	sed of, or Bevertible see ercisable tion Date by/Year)	rently va eneficially urities)  7. Title a of Under Securitie: (Instr. 3 a	Owned  nd Amount lying	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	f 10. Ownersh Form of Derivativ Security: Direct (E or Indirects)	of Indire Beneficia Ownersh (Instr. 4)

## **Reporting Owners**

	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	10/02/2014
**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 (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.