#### FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
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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

	1 1													
1. Name and Address of Reporting Person * KENNARD LYDIA H			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					
,	(Last) (First) (Middle) C/O PROLOGIS, INC., PIER 1, BAY 1			3. Date of Earliest Transaction (Month/Day/Year) 04/29/2015					_	Officer (g	ive title below)	Ot	her (specify belo	w)
(Street) SAN FRANCISCO, CA 94111			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _ Form filed by More than One Reporting Person					
(City	y)	(State)	(Zip)		T	able I -	Non-Deriva	tive Securit	ies Acquir	ed, Dispose	d of, or Bei	neficially Ow	ned	
(Instr. 3) Date		Date (Month/Day/Year)	2A. Deemed Execution Date any (Month/Day/Y			4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		of (D) Owned Follo				Ownership Form:	7. Nature of Indirect Beneficial Ownership	
					,	Code	e V An	nount (A) o	or		u. 3 and 4)		or Indirect (I (I) (Instr. 4)	
			Table II - I	Derivative	Soguriti	os A agu	containe form dis	plays a cu	orm are n	ot required	d to respo	nd unless t		474 (9-02)
			(6							Owned				
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year	3A. Deemed Execution Date, it	4. Transact	5. Notion of Deri Secu Acq (A) Disp of (I	rrants, umber vative urities uired or osed o) r. 3, 4,	options, con 6. Date Exe and Expirat (Month/Day	vertible sec reisable ion Date	urities)	nd Amount ying		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form of Derivativ Security: Direct (D or Indirect	(Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, it	4. Transact	tion of Deri Secu Acq (A) Disp of (I (Inst	vative urities uired or oosed o), r. 3, 4, 5)	6. Date Exe	vertible sec recisable ion Date y/Year)	7. Title ar of Underl Securities (Instr. 3 a	nd Amount ying	Derivative Security	Derivative Securities Beneficially Owned Following Reported Transaction	Ownersh Form of Derivativ Security: Direct (D or Indirect (s) (I)	p of Indire Benefici Ownersh (Instr. 4)

### **Reporting Owners**

	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	05/01/2015
**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).
- Deferred Stock Units (DSUs) granted April 29, 2015 which vest 100% on the earlier of the first anniversary of the grant date, or the first annual meeting of the stockholders of Prologis that occurs after the grant date, and are deferred under the Prologis, Inc. Nonqualified Deferred Compensation Plan until April 29, 2018. DSUs earn dividend equivalent units (DEUs) when distributions are declared on Prologis common stock and have no exercisable or expiration date. DSUs and accrued DEUs are convertible into Prologis common stock on a 1-for-1 basis. 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.