FORM 4

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

OMB APPR	OVAL
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

(pe Response	~)													
1. Name and Address of Reporting Person Curless Michael S (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] 3. Date of Earliest Transaction (Month/Day/Year) 03/09/2016 4. If Amendment, Date Original Filed(Month/Day/Year)					5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Chief Investment Officer 6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting Person					
			` .											7)	
									Form filed by More than One Reporting Person						
(Cit	y)	(State)	(Zip)			Table	I - N	on-Derivat	ive Securiti	es Acquire	ed, Disposed	l of, or Ben	eficially Own	ed	
(Instr. 3) Date			2. Transaction Date (Month/Day/Year)	Execution any			(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securition Owned Following Rep Transaction(s)		ed (Ownership of B	Beneficial
			(Month/D	Day/Yea		ode	V Amo	ount (A) or	ì	nstr. 3 and 4	tr. 3 and 4)		· /	ownership instr. 4)	
Reminder:								Persons of contained					ation d unless the		174 (9-02)
1. Title of	2. Conversion	3. Transaction Date		(e.g., puts,	, calls, v	v arran Numbe	equirents, op	contained form disp ed, Dispose otions, conv	d in this foolays a cur ed of, or Ber vertible securcisable	orm are no rently vali	ot required id OMB co Owned	to respon	d unless the ber.	f 10.	11. Natur
1. Title of		Date	3A. Deemed Execution Date, if	4. Transact	5. I second of I second of I of	Number Derivate curities quired Dispose (D) str. 3, 4	cquire its, op er tive a (A) ed	contained form disp ed, Dispose otions, conv	d in this foolays a cured of, or Beretible securitisable ion Date	rently vali neficially O urities) 7. Title and	ot required id OMB co Owned od Amount ying	to respondentrol num	9. Number of Derivative Securities Beneficially Owned Following Reported	f 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indired Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if	4. Transact	section of Section of Control of	Number Derivate curities quired Dispose (D) str. 3, 4	cquire tts, op er 6 tive a ((A) ed 4,	contained form disp ed, Dispose otions, conv 6. Date Exe and Expirati	d in this fo olays a cur ed of, or Ber vertible securcisable ion Date v/Year)	rm are no rently vali meficially O arities) 7. Title an of Underly Securities (Instr. 3 ar	ot required id OMB co Owned od Amount ying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following	f 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indired Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative Security	Date	3A. Deemed Execution Date, if	(e.g., puts, 4. Transact Code (Instr. 8)	y calls, v 5. Ition of I Sec Or I of (Inance) V (Number Derivate curities quired Dispose (D) str. 3, 4	cquire tts, op er ttive a ((A) ed 4,	contained form disp ed, Dispose tions, conv 5. Date Exer and Expirati Month/Day	d in this fo olays a cur ed of, or Ber vertible securcisable ion Date v/Year)	rm are no rently vali neficially Ourities) 7. Title an of Underly Securities (Instr. 3 ar	ot required id OMB cool of Owned Id Amount ying Id Amount or Number of Shares	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	f 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indired Beneficia Ownersh (Instr. 4)

Reporting Owners

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

Signatures

/s/ Tammy Colvocoresses, attorney in fact for Michael S. Curless	03/10/2016
**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 LTIP Units of Prologis, L.P. (the "LTIP Units") which vest 34% on 3/9/2017 and 33% on each of 3/9/2018 and 3/9/2019, subject to continued employment. The LTIP Units (1) were issued to the reporting person pursuant to the Prologis, Inc. 2012 Long-Term Incentive Plan (the "2012 LTIP").
 - Conditioned upon minimum allocations to the capital accounts of the LTIP Units for federal income tax purposes, each vested LTIP Unit may be converted, at the election of the holder, into a common unit of limited partnership interest in Prologis, L.P. (a "Common Unit"). Each Common Unit acquired upon conversion of a vested LTIP Unit may be presented
- (2) for redemption, at the election of the holder, for cash equal to the then fair market value of a share of Common Stock of the Company (the "Common Stock"), except that the Company may, at its election, acquire each Common Unit so presented for one share of Common Stock. The rights to convert vested LTIP Units into Common Units and redeem Common Units have no expiration dates.
- (3) Represents LTIP Units which vest 40% on each of 3/9/2017 and 3/9/2018 and 20% on 3/9/2019, subject to continued employment. The LTIP Units were issued to the reporting person pursuant to the 2012 LTIP.

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.