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

OMB APPROVAL					
OMB Number:	3235-0287				
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nours per response	e 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

1. Name and Address of Reporting Person* Anderson Gary E  (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)Director10% Owner						
				3. Date of Earliest Transaction (Month/Day/Year) 08/12/2016					X Officer (give title below) Other (specify below) CEO, Europe and Asia						
			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  uired, Disposed of, or Beneficially Owned							
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu												
(Instr. 3)		2. Transaction Date (Month/Day/Year)		tion Date, if		action	4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		d of (D)	Beneficia Reported	t of Securities ly Owned Following Transaction(s)		6. Ownership Form:	Beneficial	
				(Month/Day/Year)		Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	or I (I)		or Indirect	Ownership (Instr. 4)
Commor	Stock		08/12/2016	08/12/201	6	S		33,043	D	\$ 54.28 (1)	0			D	
Common Stock									1,662.9221 (2)		I	By 401(k) Plan			
Common	Stock										1,662.9	221 127			` /
		separate line fo	or each class of secu	rities benefici	ally o	wned dire	ctly or	r indirectly	y		1,662.9	221			` /
		separate line fo	or each class of secu	rities benefici	ally o	wned dire	Per	sons wh	o resp	form ar	the collect	ction of inf	formation spond unle	SEC ss	` /
		separate line fo	Table II -	Derivative S	ecurit	ies Acqu	Per cor the	sons whatained in form dis	o resp n this f splays	form ar a curre eneficia	the collecte not requently valid	ction of inf	spond unle	SEC ss	Plan
Reminder:	Report on a s	3. Transaction Date	Table II - on 3A. Deemed Execution Day (Year) any	Derivative S (e.g., puts, ca	ecuritalls, water action 8)	ies Acqu	Per cor the fired, I and (M	sons whatained in form dis	o responding this for Bottible second Date	seneficia curities 7. 1 Am Und Sec	the collecte not requently valid	etion of infinired to res OMB conf	spond unle	SEC ss r.  of 10. Ownersl Form of Derivati Security Direct (1 or Indire	11. Nature of Indire Benefici Owners! (Instr. 4)

## Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Anderson Gary E C/O PROLOGIS, INC., PIER 1, BAY 1 SAN FRANCISCO, CA 94111			CEO, Europe and Asia		

# **Signatures**

/s/ Tammy Colvocoresses, attorney in fact for Gary E. Anderson	08/15/2016
**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).
- The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$54.2510 to \$54.2882. The reporting (1) person undertakes to provide to Prologis, Inc., any security holder of Prologis, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each price.
- (2) Represents shares held in the company's 401(k) Plan as of August 15, 2016.

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.