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(Print or Type Perpense)

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

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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 F KENNARD LYDIA	2. Issuer Name and Prologis, Inc. [PI		radin	g Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
C/O PROLOGIS, IN	^(First) C., PIER 1, BAY	(Middle)	3. Date of Earliest Tr 09/30/2016	ansaction (N	Aonth	n/Day/Yea	r)		Officer (give title below)Oth	er (specify belo	w)
SAN FRANCISCO,	(Street) CA 94111		4. If Amendment, Da	te Original I	Filed(Month/Day/	(ear)		6. Individual or Joint/Group Filing(Check _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		e)
(City)	(State)	(Zip)		Table I - No	on-D	erivative	Securitie	s Acqu	ired, Disposed of, or Beneficially Own	ed	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if	(Instr. 8)	ion V	4. Securi (A) or Di (Instr. 3, Amount	sposed of 4 and 5) (A) or		Owned Following Reported Transaction(s) (Instr. 3 and 4)		Beneficial Ownership

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code)	5. Number of 6. I Derivative and Securities (Mo		and Expirati (Month/Day	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect (I)	Beneficial
				Code	v	(A)	(D)	Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Dividend Equivalent Units - NQDC	\$ 0 <u>(1)</u>	09/30/2016	09/30/2016	A		88.5577		Ш	Ш	Common Stock	88.5577	\$ 0 <u>(1)</u>	11,377.5487	D	

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	Х						

Signatures

 /s/ Tammy Colvocoresses attorney in fact for Lydia H. Kennard
 10/04/2016

 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 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 common stock. DEUs (1) and the underlying DSUs yets 100% on the earlier of the first anniversary of the erant date or the first annual meeting of the stockholders of Prologis after the grant date (generally in May

(1) 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.