FORM 4

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See*

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

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OMB APPROVAL

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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

(Print or Type	Responses)																			
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) 06/30/2017										Officer (give title below)Other (specify below)					
(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)	· · · · · · · · · · · · · · · · · · ·				Table I - Non-Derivative Securities Acqui									cquire	lired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		I	2. Transaction Date (Month/Day/Year		2A. Deemed Execution Da any (Month/Day/		(Instr. 8)			(A) (4. Securities Acquired (A) or Disposed of (E) (Instr. 3, 4 and 5)						Ownership of Borm:	Nature Indirect eneficial wnership		
									V	Amo	unt (A)					(or Indirect (Instr. 4) (Instr. 4)			
Reminder: Re	eport on a sep	arate line fo	r each cla	ass of securities b	- Deri	vativ	e Sec	urities A	cqui	Person in thing a cur	ons was form	n are no / valid O l of, or Bo	t requ MB co	ired to ontrol ally Ow	respond number.		ion containe form display		74 (9-02)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)		3A. Deemed Execution Date, i any (Month/Day/Yea	4. Transaction Code		tion I	5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. T of U Secu			8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownershi Form of Derivative Security: Direct (D or Indirec	Beneficia Ownershi (Instr. 4)		
					Co	ode	V	(A)	(D)	Date Exerci	isable	Expiration Date	on Title	÷	Amount or Number of Shares		(Instr. 4)	(Instr. 4)		
Dividend Equivalent Units - NQDC	\$ 0 (1)			06/30/2017	1	A	8	30.2981		Ĺ	1)	(1)		mmon tock	80.2981	\$ 0 (1)	10,781.841	9 D		
Report	ing Ow	ners																		
Reporting Owner Name / Address Director				Relationshi	ips Office	er C	Other													
KENNARI C/O PROL PIER 1, BA SAN FRAN	OGIS, INC AY 1	C.	X	Owner	Jine		ALIICI													

Signatures

/s/ Tammy Colvocoresses attorney in fact for Lydia H. Kennard	07/05/2017
Signature of Reporting Person	Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

or DEU. Balance in column 9 includes DSUs and DEUs.

** 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 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

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.