Instruction 1(b)

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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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 – OCONNOR DAVID P					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) 09/29/2017									Officer (give title below) Other (specify below)						
(Street)					4. If Amendment, Date Original Filed(Month/Day/Year)								_X_	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
SAN FRAM	NCISCO,	(State)		(Zip)															
		(State)								1				•		ficially Owner			
(Instr. 3) Date			2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, any (Month/Day/Yea		e, if Co	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)			of (D) Ow Tra		Securities Beneficially ing Reported		5. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
								Code	V	Amount (A) or (D)			Price	or Indirect (I) (Instr. 4)					
Pamindar: Do	port on a cor	varata line fo	r each al	ass of securities b	anaficial	lly owns	d directly	v or i	ndiractly	,									
				Table II					in thi a cur red, Dis	s for rently	m are no y valid C	ot re DME	equired to B control r eficially Ow	respond number.		ion containe form displa		1474 (9-02)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security			3A. Deemed Execution Date, any (Month/Day/Yea	4. 5. Transaction D Code Str. (Instr. 8) A or (I		. Number Derivative ecurities Acquired To Disposed D)	Number of erivative curities equired (A) Disposed of (A) str. 3, 4,		6. Date Exer and Expirati (Month/Day			7. Title and of Underlyi Securities (Instr. 3 and	ng	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownersh Form of Derivativ Security Direct (I or Indire (I)	Beneficia Ownershi (Instr. 4)	
					Code	e V	(A)	(D)	Date Exerci	sable	Expiration Date	on ,	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)		
Dividend Equivalent Units- NQDC	\$0(1)	09/29/2017		09/29/2017	A	7	4.7559)	(<u>1)</u>	(1)		Common Stock	74.7559	\$ 0 (1)	10,856.597	8 D		
Report	ing Ow	vners																	
Reporting Owner Name / Address 100/			ips																
Reporting (Owner Nam	e / Address	Direct	or 10% Owner	Officer	Other													
OCONNOL C/O PROL PIER 1, BA	OGIS, IN		X																

Signatures

SAN FRANCISCO, CA 94111

/s/ Tammy Colvocoresses attorney in fact for David P. O'Connor	10/03/2019		
**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 DEUs earned on DSUs associated with current service on the board that are deferred under the Prologis, Inc. Nonqualified Deferred Compensation Plan (the 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 and the underlying DSUs vest 100% on the earlier (1) 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. DSUs 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.