FORM 4

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

OMB APPROVAL
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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

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person* NEKRITZ EDWARD S					2. Issuer Name and Ticker or Trading Symbol Prologis, Inc. [PLD]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner					
(Last) (First) (Middle) C/O PROLOGIS, INC., PIER 1, BAY 1					3. Date of Earliest Transaction (Month/Day/Year) 04/24/2019								X Officer (give title below) Other (specify below) Chief Legal Off./Gen. Counsel					
(Street) SAN FRANCISCO, CA 94111				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City		(State)		(Zip)			T	able I -	Non	-Derivative	Securi	ties A	Acquir	ed, Dispo	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transact Date (Month/Da			any	on Date, if	3. Transaction Code (Instr. 8)		on	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			(A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D)	Beneficial Ownership
								Code	V	Amoun		(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock													1,718.	017 (1)		I	By 401K Plan
Common	Stock		04/24/2	2019	04/24/	/2019		S		30,671.0	912 I)	\$ 75.01 (2)	21,12	1		D	
Reminder:	Report on a s	separate line	e for each							y or indirectl Persons wh contained i the form di	no res in this splays	forn a c	n are i urrent	not requ lly valid	ired to res	spond unle	ss	1474 (9-02)
				Table I						d, Disposed ions, conver				Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security		(Month/Day/Year) any		Date, if	e, if Transaction N Code of (Instr. 8) D Sc A (A D D of (I		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		and Expiration Date (Month/Day/Year) S (I			7. Titl Amou Under Securi (Instr. 4)	ent of clying ities 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownersh Form of Derivativ Security: Direct (D or Indirect)) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
										Date Exercisable	Expira Date	ation		Amount or Number				

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
NEKRITZ EDWARD S C/O PROLOGIS, INC. PIER 1, BAY 1 SAN FRANCISCO, CA 94111			Chief Legal Off./Gen. Counsel						

Signatures

/s/ Tammy Colvocoresses, attorney in fact for Edward S. Nekritz

04/25/2019

-**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).
- (1) Represents shares held in the company's 401(k) Plan as of March 31, 2019.
 - The price reported in column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$74.90 to \$75.105 The reporting person
- (2) 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.

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.