FORM 4

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

OMB APPROV	/AL
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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 Type	responses)														
1. Name and Address of Reporting Person * Piani Olivier				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) 06/28/2019					-	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 FRAN	NCISCO, (CA 94111									roini inca by N	Tore than One P	ceporting reison		
(City)		(State)	(Zip)		,	Table I -	Non-De	rivative S	Securitie	es Acquired	, Disposed	of, or Benef	icially Owned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Date, if	3. Trans Code (Instr. 8		4. Securities Acq (A) or Disposed of (Instr. 3, 4 and 5)		of (D) Own Trai	5. Amount of Securities Beneficially Owned Following Reported Fransaction(s)		0	Ownership	'. Nature of Indirect Beneficial	
				(Month/Day/Year)		Code	V	Amount	(A) or (D)	(Ins	tr. 3 and 4)		or (I)	Indirect (I	wnership nstr. 4)
Reminder: Re	port on a sep	arate line for each c	class of securities be	eneficially of	owned di	rectly or	Perso in this	ns who i	re not r		respond u		on contained form display		174 (9-02)
Reminder: Re	port on a sep	arate line for each c				•	Person in this a curre	ns who form ar ently va	re not re lid OME	equired to	respond (number.				774 (9-02)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction	Table II - 3A. Deemed Execution Date, i	Derivative (e.g., puts, 4. Transact Code	se Securiti , calls, wa 5. Nu Deriv Secu Acqu or Di (D)	ies Acqui	Persoin this a curred, Dispoptions, c 6. Date and Ex (Month	ns who is form are ently values	or Bene lid secur	equired to B control n	ned Amount	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirec	11. Nature of Indire Benefici Owners! (Instr. 4)
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Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Piani Olivier C/O PROLOGIS, INC. PIER 1, BAY 1 SAN FRANCISCO, CA 94111	X				

Signatures

/s/ Tammy Colvocoresses attorney-in-fact for Olivier Piani	07/02/2019
**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 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.