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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response.. 0.5

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	• •																	
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)				
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								XDirector10% OwnerOfficer (give title below)Other (specify below)				
C/O PROLOGIS, INC., PIER 1, BAY 1 (Street)					06/30/2020													
					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 iired, Disposed of, or Beneficially Owned					
SAN FRANCISCO, CA 94111																		
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqu														
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year			2A. Deemed Execution Date, i any (Month/Day/Yea		ate, if Coo	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securiti Owned Following Rep Transaction(s)		d	Ownership Form:	Beneficial			
								A	(A) or	r	or Indire			or Indirect (I)				
								Joue	V	Amo	unt (D)	Price				(Instr. 4)		
Reminder: Re	eport on a sep	parate line for	r each cla	ss of securities b	eneficiall	y owr	ned directly	y or 11	Perso in this	ns w s forn	n are not	required			ion containe form displa		174 (9-02)	
							lls, warra	nts, o	ptions, c	conve	of, or Ben rtible secu	rities)						
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Date or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year		y/Year)	3A. Deemed Execution Date, i any (Month/Day/Year	Code		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title a of Under Securitie (Instr. 3	s	8. Price of Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownershi Form of Derivative Security: Direct (D or Indirect) (I)	11. Natur of Indirect Beneficia Ownersh (Instr. 4)		
					Code	V	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)		
Dividend Equivalent Units- NQDC	\$ 0 (1)	06/30/2020		06/30/2020	A		93.8384	1	(1	J	(1)	Commo	193 8384	\$ 0 (1)	15,193.729	01 D		
Report	ing Ow	vners																
				Relationshi	ps													
Reporting Owner Name / Address Director 10% Owner			r	Officer	Othe	r												
OCONNO C/O PROL			37															

Signatures

and DEUs.

PIER 1, BAY 1

SAN FRANCISCO, CA 94111

/s/ Tammy Colvocoresses attorney in fact for David P. O'Connor	07/02/2020
**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

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.