Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

#### 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

(Find of Type Responses)								1		
1. Name and Address of Reporting Person <sup>*</sup> SKELTON JEFFREY L	2. Issuer Name and Prologis, Inc. [PI		radin	ıg Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director10% Owner				
(Last) (First) C/O PROLOGIS, INC., PIER 1, BA'	7.4	3. Date of Earliest Tr 03/31/2021	ansaction (N	Month	n/Day/Yea	r)		Officer (give title below)Oth	her (specify belo	ow)
(Street) SAN FRANCISCO, CA 94111		4. If Amendment, Da	te Original	Filed	(Month/Day/	Year)		6. Individual or Joint/Group Filing(Check _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		le)
(City) (State)	(Zip)		Table I - No	on-De	erivative	Securitie	s Acqu	ired, Disposed of, or Beneficially Own	ed	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transact Code (Instr. 8)		4. Securi (A) or Di (Instr. 3,	-	f (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	7. Nature of Indirect Beneficial
		(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	ervivative ecurity nstr. 3)														
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative	Date (Month/Day/Year)	Execution Date, if any	Code	ansaction Derivative de Securities astr. 8) Acquired (A) or Disposed of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D) or Indirect	of Indirect Beneficial Ownership	
				Code	v	(A)		Date Exercisable	Expiration Date		Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Dividend Equivalent Units - NQDC	\$ 0 <u>(1)</u>	03/31/2021	03/31/2021	А		46.7133		(1)	<u>(1)</u>	Common Stock	46.7133	\$ 0 <u>(1)</u>	7,906.3803	D	

## **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
SKELTON JEFFREY L C/O PROLOGIS, INC. PIER 1, BAY 1 SAN FRANCISCO, CA 94111	Х							

## Signatures

 /s/ Tammy Colvocoresses attorney in fact for Jeffrey L. Skelton
 04/02/2021

 \*\*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 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 (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.

(1) 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.