## FORM 4

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

OMB APPROVAL				
OMB Number:	3235-0287			
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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 Type	responses														
1. Name and Address of Reporting Person * KENNARD LYDIA H			2. Issuer Name and Ticker or Trading Symbol Prologis, Inc. [PLD]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner						
C/O PROL	OGIS, INC	(First) C., PIER 1, BAY		3. Date of I 09/30/202		ransacti	action (Month/Day/Year)				Officer (give title below) Other (specify be				ow)
(Street)			•	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				
SAN FRAN	NCISCO, (	CA 94111									Tomi med by i	rore man one r	reporting reason		
(City)		(State)	(Zip)			Table l	- Non-	Derivati	ve Securiti	es Acquire	uired, Disposed of, or Beneficially Owned				
1.Title of Sect (Instr. 3)	urity		2. Transaction Date (Month/Day/Year)			e, if 3. Transa Code (Instr. 8)		(A) or Dis		of (D) Ow Tra	5. Amount of Securities Ber Owned Following Reported Transaction(s)		l C	Ownership of	eneficial
				(Month/D	Oay/Year)	Cod	e V	7 Amoi	(A) or	ì	(Instr. 3 and 4)		0	Direct (D) Owners or Indirect (I) (Instr. 4)	wnership nstr. 4)
Reminder: Re	port on a sep	arate line for each c	lass of securities b	enencially	owned di	icetty 0	Per in t	sons w his forn	n are not r		respond ι		on containe form display		74 (9-02)
Reminder: Re	port on a sep	arate line for each c				•	Per in t a c	sons w his forn urrently	n are not r valid OM	equired to B control	respond ( number.				74 (9-02)
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#### **Reporting Owners**

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

#### **Signatures**

/s/ Tammy Colvocoresses attorney in fact for Lydia H. Kennard	10/04/2021
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 (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. DSU 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.