FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Palazzolo Lori A				2. Issuer Name and Ticker or Trading Symbol Prologis, Inc. [PLD]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) C/O PROLOG		(N	1iddle)		12/1	3. Date of Earliest Transaction (Month/Day/Year) 12/16/2022								X	Officer (give title Other (specify below) below) Chief Accounting Officer/MD				specify
(Street) SAN FRANCISCO	SAN CA 94111				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv	dividual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Z	lip)																
		T	able I - Noi	n-Deri	vativ	e Se	curitie	s Acq	uired, [Disp	osed o	f, or E	Benefic	ially Ow	ned				
Date			Date	Transaction te onth/Day/Year)		ZA. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr.					5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v			(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock													216.504(1)				By 401(k) Plan		
Common Stock													41	414		D			
			Table II - I						red, Dis options						ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Co	ansact		Derivative		6. Date Exercisa Expiration Date (Month/Day/Yea			and 7. Title and Amour Securities Underly Derivative Security 3 and 4)		erlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Cod	ode	v	(A)	(D)	Date Exercisab		xpiration ate	Title		Amount or Number of Shares		Transacti (Instr. 4)	ion(s)		
LTIP Units ⁽²⁾	\$0.00 ⁽³⁾	12/16/2022	12/16/2022	2	A		5,517		(3)		(3)		nmon tock	5,517	\$0.01	86,68	6	D	

Explanation of Responses:

- $1. \ Represents \ shares \ held \ in \ the \ company's \ 401(k) \ Plan \ as \ of \ September \ 30, \ 2022.$
- 2. Represents LTIP Units of Prologis, L.P. (the "LTIP Units") which vest 25% on each of 12/16/2023, 12/16/2024, 12/16/2025, 12/16/2026 subject to continued employment. The LTIP Units were issued to the reporting person pursuant to the Prologis, Inc. 2020 Long-Term Incentive Plan (the "2020 LTIP").
- 3. Conditioned upon minimum allocations to the capital accounts of the LTIP Units for federal income tax purposes, each vested LTIP Unit may be converted, at the election of the holder, into a common unit of limited partnership interest in Prologis, L.P. (a "Common Unit"). Each Common Unit acquired upon conversion of a vested LTIP Unit may be presented for redemption, at the election of the holder, for cash equal to the then fair market value of a share of Common Stock of the Company (the "Common Stock"), except that the Company may, at its election, acquire each Common Unit so presented for one share of Common Stock. The rights to convert vested LTIP Units into Common Units and redeem Common Units have no expiration dates.

Remarks:

/s/ Tammy Colvocoresses, attorney in fact for Lori A. Palazzolo

12/19/2022

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.