## Edgar Filing: OCONNOR DAVID P - Form 4

OCONNO	R DAVID P										
Form 4											
April 02, 2	019										
FOR	$\mathbf{M}$ <b>4 UNITED</b>	CT A TEC	SECU			CHANCI	E COMMISSIO	A.T.	PPROVAL		
	UNITED	SIAIES		shington				N OMB Number:	3235-0287		
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1(b).	uueuon					•					
	<b>D</b>										
(Print or Type	e Responses)										
1. Name and	Address of Reporting	Person <sup>*</sup>	2. Issue	er Name <b>an</b> o	d Ticker or	Trading	5. Relationship	of Reporting Per	rson(s) to		
OCONNO	R DAVID P		Symbol Prologis, Inc. [PLD]				Issuer				
							(Ch	eck all applicabl	( all applicable)		
(Last) (First) (Middle)		(Middle)	3. Date of Earliest Transaction								
	D 1	(Month/Day/Year)			X_ Director 10% Owner Officer (give title Other (specify						
C/O PROLOGIS, INC., PIER 1, BAY 1			03/29/2019				below) below)				
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Month/Day/Year)				Applicable Line)				
SAN FRANCISCO, CA 94111							_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date			3. 4. Securities			5. Amount of	6. Ownership	7. Nature of		
Security (Instr. 3)	(Month/Day/Year)	Execution any	Date, if	Transactio Code	nAcquired Disposed		Securities Beneficially	Form: Direct (D) or Indirect	Indirect Beneficial		
(Insu: 5)		(Month/Day/Year)		-		4 and 5)	Owned	(I) of multeet	Ownership		
							Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported Transaction(s)				
				Code V	Amount	or (D) Price	(Instr. 3 and 4)				
			0								
Reminder: R	eport on a separate line	e for each cla	ass of sec	urities bene	-	-	or indirectly. spond to the colle	oction of a	SEC 1474		
							tained in this forn		SEC 1474 (9-02)		
					rogui	ad to soon	and unload the fe	-			

required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	(Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)						
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount Number Shares	
Dividend Equivalent Units-NQDC	\$ 0 <u>(1)</u>	03/29/2019	03/29/2019	Α	74.6776		<u>(1)</u>	<u>(1)</u>	Common Stock	74.677	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
OCONNOR DAVID P C/O PROLOGIS, INC. PIER 1, BAY 1 SAN FRANCISCO, CA 94111	Х						
Signatures							

/s/ Tammy Colvocoresses attorney in fact for David P. O'Connor

\*\*Signature of Reporting Person

Date

04/02/2019

## **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

(1) 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.