**PROLOGIS** Form 5

February 17, 2009

FORM 5

#### **OMB APPROVAL**

3235-0362

2005

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

Number: January 31, Expires:

**OMB** 

no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

Check this box if

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 1.0

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940

Form 4

Transactions Reported

1. Name and Address of Reporting Person * JACOBS DR DONALD P			2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) Issuer		
			PROLOGIS [PLD]	(Check all applicable)		
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended	()		
			(Month/Day/Year) 12/31/2008	_X_ Director 10% Owner Officer (give title Other (speci		
4545 AIRPOR	T WAY			below) below)		
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Reporting		
			•	(check applicable line)		

### DENVER, COÂ 80239

(City)

\_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting

(City)	(State)	(Zip) Tal	ole I - Non-De	rivative Se	curit	ies Acq	uired, Disposed	of, or Beneficia	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securiti Acquired Disposed (Instr. 3, 4	(A) o of (D	)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)

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

(State)

(Zip)

Persons who respond to the collection of information **SEC 2270** contained in this form are not required to respond unless (9-02)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 Derivative Security (Instr. 3)	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	Execution Date, if any	4. Transaction Code	5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount Underlying Securitie (Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A) or		
	Derivative				Disposed of (D)		

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	Security				(Instr. 3, 4, 5)	and					
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amou Numb Share	
Dividend Equivalents	\$ 0	03/31/2008	03/31/2008	A4	25.483	Â	(1)	(1)	Common Shares of Beneficial Interest	25.4	
Dividend Equivalent Units	\$ 0	12/31/2008	12/31/2008	A4	327.001	Â	(2)	(2)	Common Shares of Beneficial Interest	327.	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1 8	Director	10% Owner	Officer	Other				
JACOBS DR DONALD P 4545 AIRPORT WAY DENVER, CO 80239	ÂX	Â	Â	Â				

## **Signatures**

/s/ Kristi Oberson, attorney-in-fact for Donald P.
Jacobs

02/17/2009

\*\*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).
- (1) Dividend Equivalents paid in Phantom Stock earned on trustee fees previously deferred into Phantom Stock. They are paid out in common stock on a one-for-one basis upon the trustee's departure.
- (2) Dividend equivalent units earned annually on Deferred Stock Units (DSUs) granted to trustees. They are payable in common stock on a one-to-one basis at the end of the trustee's term.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

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