## Edgar Filing: TEIXEIRA J ANDRE - Form 4

TEIXEIRA J	ANDRE									
Form 4										
July 19, 2010	)									
FORM	14							OMB AP	PROVAL	
	<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549							OMB Number:	3235-0287	
Check thi								Expires:	January 31,	
if no long subject to	STATEN/	IENT OF CHAN	CHANGES IN BENEFICIAL OWNE				ERSHIP OF		2005	
Section 16. SECURITIES							Estimated average burden hours per			
Form 4 or	r							response	0.5	
Form 5	Filed pur	suant to Section	16(a) of th	e Securiti	es Ex	change A	Act of 1934,			
obligation may cont		a) of the Public U	•	•	· ·		935 or Section			
See Instru		30(h) of the I	nvestment	Company	/ Act	of 1940				
1(b).										
(Print or Type F	Responses)									
		. *				_	<b>D</b> 1 11			
I. Name and A TEIXEIRA	ddress of Reporting I					>	5. Relationship of Reporting Person(s) to Issuer			
IEIAEIKA		Symbol				155001				
	PROLO	PROLOGIS [PLD]				(Check all applicable)				
(Last)	(First) (M	Aiddle) 3. Date of	3. Date of Earliest Transaction							
		(Month/Day/Year)			_	X_ Director 10% Owner				
4545 AIRPO	07/15/2	07/15/2010				Officer (give titleOther (specify below) below)				
	4. If Am	4. If Amendment, Date Original			6	6. Individual or Joint/Group Filing(Check				
		Filed(Mo	· · · · · · · · · · · · · · · · · · ·				Applicable Line) _X_ Form filed by One Reporting Person			
						-	X_ Form filed by Or Form filed by Mo			
DENVER, O	20 80239					P	erson		Jorung	
(City)	(State)	(Zip) Tab	le I - Non-I	Derivative S	ecurit	ies Acqui	red, Disposed of,	or Beneficiall	y Owned	
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securitie			5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution Date, if	Code (Instr. 3, 4 and 5)				Securities	Ownership	Indirect	
(Instr. 3)		any (Month/Day/Year)				)	Beneficially Owned	Form: Direct (D)	Beneficial Ownership	
		(Wondin Day) (Car)	(111301.0)				Following	or Indirect	(Instr. 4)	
					(A)		Reported	(I)	(,	
					(A) or		Transaction(s)	(Instr. 4)		
			Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common										
Shares of										
Beneficial	07/15/2010	07/15/2010	А	2,197.5	Δ	\$	26,477 <u>(1)</u>	D		
Interest,	0111012010	0111312010	11	2,171.5	11	10.435	20,177 <u>··</u>	D		
par value										
\$.01										

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 in this form are not required to respond unless the form displays a currently valid OMB control number.

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 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 Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
TEIXEIRA J ANDRE 4545 AIRPORT WAY DENVER, CO 80239	Х							
Signatures								
/s/ Kristi Oberson attorney-in-f Teixeira		07/19/201						
<u>**</u> 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) Purchased by ProLogis through the ProLogis Dividend Reinvestment and Share Purchase Plan (the Plan) on behalf of Mr. Teixeira for payment of his Trustee fees. Includes 232.657 shares acquired on May 28, 2010 through the dividend reinvestment feature of the Plan.

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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.