Edgar Filing: LYONS IRVING F III - Form 4

LYONS IRVING	FIII									
Form 4 January 03, 2006										
FORM 4	UNITED	STATES	SECU	RITIES /	AND EX	CHANGE	COMMISSION		PPROVAL	
Check this box		5111115		shington	Number:	3235-0287 January 31,				
if no longer subject to Section 16. Form 4 or	IENT OI	F CHAN	NGES IN SECUI	Estimated burden hou	Expires: 2005 Estimated average burden hours per response 0.5					
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type Respon	nses)									
1. Name and Address of Reporting Person <u>*</u> LYONS IRVING F III			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
			PROLO	OGIS [PL	.D]		(Check all applicable)			
(Last) (First) (Middle) 47775 FREMONT BLVD.			3. Date of Earliest Transaction (Month/Day/Year) 12/31/2005			X_ Director 10% Owner Officer (give title Other (specify below) below)				
(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 				
FREMONT, CA	94538						Person	More than One K	eporting	
(City) (State)	(Zip)	Tab	le I - Non-	Derivativ	e Securities A	Acquired, Disposed of	of, or Beneficia	lly Owned	
	unsaction Date th/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8)	4. Secur onAcquired Disposed (Instr. 3,	d (A) or d of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V		(D) Price	(Instr. 3 and 4)			
Reminder: Report on	a separate line	for each cla	ass of sec	urities bene	-	-	-	otion of	SEC 1474	
					infor requ	mation con ired to resp ays a curre	spond to the colle tained in this form ond unless the for ntly valid OMB co	are not rm	(9-02)	

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	TransactionDerivative		Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A) or		

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	Derivative Security				Disposed o (Instr. 3, 4, 5)					
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock	<u>(1)</u>	12/31/2005	A		264.901		<u>(1)</u>	<u>(1)</u>	Common Shares of Beneficial Interest	264.901
Dividend Equivalent Units	(2)	12/31/2005	А		42,154		(2)	(2)	Common Shares of Beneficial Interest	42,154

Reporting Owners

Reporting Owner Name / Address		Relationsh						
, of the second s	Director	10% Owner	Officer	Other				
LYONS IRVING F III 47775 FREMONT BLVD. FREMONT, CA 94538	Х							
Signatures								
Kate M. Meade, Attorney-in-Fact on behalf of Irving F. Lyons, III								

**Signature of Reporting Person

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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).
- The shares of phantom stock are for payment of Trustees fees. The phantom stock becomes payable in stock at the election of the (1)reporting person. The phantom stock is convertible on a 1 for 1 basis into common shares of ProLogis.

Dividend Equivalent Units are earned and accrued on restricted share units, deferred share units and option grants pursuant to the

(2) Long-Term Incentive Plan and Outside Trustee Option Plans. The rate of vest and the expiration date is the same as the underlying grant. DEUs are converted into common shares on a 1 for 1 basis.

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.