Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHAN
obligations may continue. See	

NGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Schwimmer Howard						2. Issuer Name and Ticker or Trading Symbol Rexford Industrial Realty, Inc. NYSE: REXR]									k all applic Directo	able)	ig Pers		o Issuer % Owner er (specify	
(Last) 11620 W	(Last) (First) (Middle) 11620 WILSHIRE BOULEVARD, SUITE 1000							3. Date of Earliest Transaction (Month/Day/Year) 11/01/2013								below) Co-CEO, Co-l		below)		
(Street) LOS ANGELES CA 90025 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(=-9)		•	le I - Non	-Deriv	ative	e Se	curit	ies Ac	quired, D	isp	osed o	f, or Be	nefici	ally	Owned					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,			Transaction Disposed (Code (Instr. 5)			ties Acquire I Of (D) (Ins				s Illy ollowing	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	,	Amount	(A) or (D)		9	Transacti (Instr. 3 a	tion(s)			(
		1	Fable II - E						uired, Dis , options						Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution E if any (Month/Day	Date, T		ansaction ode (Instr.		umber vative urities uired or oosed O) (Instr. and 5)	Expiration [6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)			3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ully	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amou or Numb of Share	er						
Operating Partnership Units ⁽¹⁾	(2)	11/01/2013			D ⁽³⁾			46,059	09/24/2014		(4)	Common Stock, par value	46,05	59 	(5)	413,93	38	D		

Explanation of Responses:

- 1. Represents common units of limited partnership interests ("OP Units") in Rexford Industrial Realty, L.P. (the "Operating Partnership"). Rexford Industrial Realty, Inc. (the "Issuer") is the general partner of the Operating Partnership. OP Units are redeemable beginning September 24, 2014 for cash equal to the then-current market value of one share of common stock of the Issuer, or at the election of the Issuer, for shares of the Issuer's common stock on a one-for-one basis.
- 2. The OP Units are exchangeable for common stock of the Issuer on a one-for-one basis.
- 3. Represents OP Units returned to the Issuer pursuant to the accommodation between the Issuer and certain pre-initial public offering investors, as more fully described in the 8-K filed by the Issuer on October 30, 2013 (the "Accommodation").
- 4. N/A
- 5. For purposes of the Accommodation, OP Units were valued at \$14.00, which was the initial public offering price per share of the Issuer's common stock.

/s/ Marie Ly, as attorney-in-fact 11/05/2013

** Signature of Reporting Person

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.