Instruction 1(b).

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| Washington, | D.C. 20549 |  |
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

|   |   |  |         |                                 | or Sec   | ction 3                                       | 30(h) of the In   | ivestme  | nt Con   | npany Act o     | f 1940  |       |   |   |  |   |   |   |
|---|---|--|---------|---------------------------------|--|---|---|--|----------|-----------------|---|-------|---|---|--|---|---|---|
| 1. Name and Address of Reporting Person*  ANTIN ROBERT L      |   |  |         |                                 | 2. Issuer Name and Ticker or Trading Symbol Rexford Industrial Realty, Inc. [ REXR ] |   |   |  |          |                 |   |       | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |   |  |   |   |   |
|   |   |  |         |                                 |  |   |   |  |          |                 |   |       | X   | Direc   | tor  |   | 10% O   | wner  |
| (Last)  | (Fir  | rst) (N                                    | Middle) |                                 | 3. Dat   | Date of Earliest Transaction (Month/Day/Year) |   |  |          |                 |   |       |   | Office<br>below   | er (give title<br>v)   |   | Other (s  | specify   |
| 11620 WILSHIRE BOULEVARD                                      |   |  |         |                                 | 06/17/2021   |   |   |  |          |                 |   |       |   |   |  |   |   |   |
| SUITE 1   | 000   |  |         |                                 |  |   |   |  |          |                 |   |       |   |   |  |   |   |   |
|   |   |  |         |                                 | 4. If Amendment, Date of Original Filed (Month/Day/Year)                             |   |   |  |          |                 |   |       | 6. Individual or Joint/Group Filing (Check Applicable                   |   |  |   |   |   |
| (Street)  |   |  |         |                                 |  |   |   |  |          |                 |   | اا    | Line)<br>X  | Form  | filed by One   | n Bono  | ortina Bore   | on  |
| LOS   | CA  | Λ 9  | 0025    |                                 |  |   |   |  |          |                 |   |       | Λ   |   | filed by Mo  | -   | -   |   |
| ANGEL   | ES  |  |         |                                 |  |   |   |  |          |                 |   |       |   | Perso   |  | ic triari   | one rep   | orting  |
| (City)  | (St   | ate) (2                                    | Zip)    |                                 |  |   |   |  |          |                 |   |       |   |   |  |   |   |   |
|   |   | Table                                      | I - No  | n-Deriva                        | tive S   | ecu   | rities Acq  | uired,   | Disp     | osed of         | , or Be   | nefic | cially  | Own   | ed   |   |   |   |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |   |  |         | Execution Date,                 |  |   |   | 4. Securitie<br>Disposed C<br>5)                               |          |                 | 4 and Secu<br>Bene<br>Own   |       | ially<br>Following  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |   |
|   |   |  |         |                                 |  |   | Code  | v  | Amount   | (A) or<br>(D) P |   | e     | Reported<br>Transaction(s)<br>(Instr. 3 and 4)                          |   |  |   | (111501. 4)   |   |
| Common Stock, par value \$0.01 06/1                           |   |  | 06/17/2 | 2021                            |  |   | A   |  | 1,873(1) | A               | \$0   | 0.00  | 38,523  |   | D  |   |   |   |
|   |   | Tal  |         |                                 |  |   | ties Acqui<br>warrants,   |  |          |                 |   |       |   | Owne  | t  |   |   |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | if any  | emed<br>ion Date,<br>/Day/Year) | 4.<br>Transac<br>Code (li<br>8)  |   | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4 | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |          |                 | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Inst<br>3 and 4) |       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                     |   | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) |   | .0.<br>Dwnership<br>Form:<br>Direct (D)<br>or Indirect<br>I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownershi<br>(Instr. 4) |

## **Explanation of Responses:**

1. Represents shares of restricted common stock issued to the Reporting Person pursuant to the Rexford Industrial Realty, Inc. Non-Employee Director Compensation Program, which will vest in full on the earlier of (i) the date of the annual meeting next following the grant date and (ii) the first anniversary of the grant date (June 17, 2022), subject to the Reporting Person's continued service.

(D)

Date

Exercisable

Expiration Date

## Remarks:

/s/ Cher Riban, as attorney-in**fact** 

\*\* Signature of Reporting Person

Amount Number

06/22/2021

Date

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.