Instruction 1(b)

FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF	CHANGES	IN BE	NEFICIAL	OWNER	RSHIP

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Melone Anthony J.			2. Issuer Name and Ticker or Trading Symbol CROWN CASTLE INC. [ CCI ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
IVICIOIIC	Anuiony	<u>J.</u>								-	-			X Director	r		10% Ow	ner
(Last) 8020 KA	(Fi TY FREEV	,	(Middle)			Date of /16/20		Trans	action (Mon	th/Da	ay/Year)			below)	(give title	dent a	Other (specification)  and CEO	pecify
0020 IATT TIELE WITT					4 1	If Amendment, Date of Original Filed (Month/Day/Year)						6 15	6. Individual or Joint/Group Filing (Check Applicable					
(Street)					-   4.1	Amei	idillent, t	Jale	o Onginai Fi	ieu (	(MOHUI/Da	iy/ fear)	Line		ioini/Group	rillig	(Crieck App	ilicable
HOUST	ON T	7	77024											X Form fi	led by One	Repoi	rting Person	
	JIV 12		77024		.									Form fi Person		e than	One Report	ing
(City)	(St	ate)	(Zip)															
					Ri	ule 1	10b5-	1(c)	Transa	ctio	on Ind	ication						
					1,	Choo	k thia hay	to indi	aata that a tra	naaa	ation was m	ada nuraua	at to a cont	act, instructio	n or writton n	alan the	at in intended	.
					∣⊔	satisf	y the affirm	native	defense cond	litions	s of Rule 1	0b5-1(c). Se	e Instructio	n 10.	ii oi wiilleii p	Jiaii liid	at is interided	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transa				saction				3.					5. Amou		6. Ownership		'. Nature	
Date (Monti				/Day/Year) if		Execution Date, if any (Month/Day/Year		Code (Instr.   5)		l Of (D) (Instr. 3, 4 a			ally (D) of Following (I) (II		or Indirect Enstr. 4)	of Indirect Beneficial Ownership		
			Code					,	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)		
		-	Table II	Doriva	tivo	Soci	ritios	۸۰۵	uired, Dis	- no	end of	or Bon	oficially	Owned				
		'							, options					Owned				
1. Title of Derivative Security (Instr. 3)  2. Conversion Date Oberivative Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year)			Fransaction of Code (Instr. Derivative		Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
													Amount or					
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Number of Shares					
Time					Joue	<u> </u>		(5)		150		Common		l 		$\dashv$		
RSUs	(1)	01/16/2024			Α		39,068		(2)		(2)	Stock	39,068	\$0	39,068	B	D	

## **Explanation of Responses:**

- 1. Each Restricted Stock Unit ("RSU") is issued pursuant to the Crown Castle Inc. ("Company") 2022 Long-Term Incentive Plan and represents a contingent right to receive one share of common stock.
- 2. 100% of these Time RSUs vests on January 16, 2025; provided, such Time RSUs will vest immediately if, prior to such date, the Company terminates the reporting person's employment without cause.

## Remarks:

/s/ Anthony J. Melone

01/17/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.