FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:	3235-028										
Estimated average bu	ırden										

0.5

hours per response:

5. Relationship of Reporting Person(s) to Issuer

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

2. Issuer Name and Ticker or Trading Symbol

1. Name and Address of Reporting Person*  HOGAN LEE W						2. Issuer Name and Ticker or Trading Symbol  CROWN CASTLE INTERNATIONAL  CORP [ CCI ]							cable) or	g Person(s) to Iss	wner
(Last) 510 BER	(F	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year)							(give title	Other ( below)	specify
SUITE 5	00					. = "	1.04 .1.75								
(Street)			_   4. If Ai	mendment, Date o	f Origina	l Filed	I (Month/Day	Line	′						
HOUSTO	ON T	X	77057		_	X Form filed by One Reporting P Form filed by More than One P Person									
(City)	(S	State)	(Zip)									1 01301	•		
		Ta	able I - No	n-Deri	vative S	Securities Acc	quired	, Dis	posed of	, or Ben	eficially	/ Owned			
Date				2. Trans Date (Month/l	action Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securitie Disposed C		Beneficia Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3	ion(s)		(Instr. 4)
Common	Stock \$0.0	1 Par Value		11/15	5/2005		M		25,000	A	\$16.62	5 49,	,445	D	
Common	Stock \$0.0	1 Par Value		11/15	5/2005		M		10,500	A	\$6.21	59,	,945	D	
Common	Stock \$0.0	1 Par Value		11/15	5/2005		S		5,900	D	\$27.01	54,	,045	D	
Common Stock \$0.01 Par Value 11/15/2					5/2005		S		1,900	D	\$27.07	52,	,145	D	
Common Stock \$0.01 Par Value 11/15/2					5/2005		S		200	D	\$27.08	51,	,945	D	
Common Stock \$0.01 Par Value 11/15/2					5/2005		G <sup>(1)</sup>		7,675(1)	D	\$0.00(1	44,	,270	D	
			Table II -			curities Acqu Ills, warrants,						Owned			
1. Title of Derivative					4. Transactio	5. Number 6. Date Exercision of Expiration Date						8. Price of Derivative	9. Number derivative		11. Nature of Indirect

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. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/\)	ate	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)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (right to purchase Common Stock)	\$16.625	11/15/2005		M			25,000	03/20/2001	03/20/2011	Common Stock	25,000	\$0	0	D	
Stock Option (right to purchase Common Stock)	\$6.21	11/15/2005		М			10,500	02/28/2002	02/28/2012	Common Stock	10,500	\$0	0	D	

## **Explanation of Responses:**

1. Represents a gift of such shares to a charity pursuant to Rule 16b-5.

/s/ Lee W. Hogan

11/16/2005

\*\* Signature of Reporting Person

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.