## FORM 5

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
-------------	------	-------

wasimigtor	٠, ٥
 	_

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL									
OMB Number:	3235-0362								
Estimated average burden									
hours per response:	1.0								

Form 3 Holdings Reported.

Instruction 1(b)

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

Form 4 Transactions Reported.	or Section 30(h) of the Investment Company Act of 1940														
Name and Address of Reporting Person*     Slowey Patrick	2. Issuer Name and Ticker or Trading Symbol CROWN CASTLE INTERNATIONAL CORP [ CCI ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Vother (specify								
(Last) (First) (N 1220 AUGUSTA DR SUITE 600	Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2016						Year)	Former SVP and CCO						
	7057 Zip)	4. If Amendment, Date of 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 Person								erson					
Table	e I - Non-Deriva	ative Secu	uritie	s Ac	quire	d, Di	sposed	of, or	Benefici	ally (	Owne	ed			
Date   I (Month/Day/Year)				Transaction Of (D) (Instr. 3, 4 and 5)		or Disposed	5. Amount o Securities Beneficially Owned at en		es ally	Owne Form		7. Nature of Indirect Beneficial Ownership			
		(A) or				Price	Y	Issuer's Fiscal Year (Instr. 3 and 4)			ect (I) r. 4)	(Instr. 4)			
Tal	ble II - Derivati (e.g., pu	ve Securi ıts, calls,									wned				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  2. (Month/Day/Year)	Execution Date, if any	4. Transaction Code (Instr. 8)	5. Numof of Operive Security Acquired (A) or Disposof (D) (Instruand 5)	Expiration Date (Month/Day/Year)  ities irred assed and asset Date (Month/Day/Year)  Date Expiration		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares		unt oer		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)		

**Explanation of Responses:** 

## Remarks:

The reporting person retired from the position of Crown Castle International Corp.'s Senior Vice President and Chief Commercial Officer effective December 31, 2016. As a result, the reporting person is no longer subject to Section 16 in connection with his transactions in the equity securities of Crown Castle International Corp. and therefore will no longer report any such transactions on Form 4 or Form 5.

/s/ Patrick Slowey

02/13/2017

\*\* 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.