FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
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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* <u>Piche Catherine</u>			2. Date of E Requiring S (Month/Day 10/28/202	tatement /Year)	3. Issuer Name and Ticker or Trading Symbol CROWN CASTLE INC. [CCI]						
(Last) 8020 KATY	(First)	(Middle)	10/20/2021		Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street)		77024			Officer (give title below) EVP & COO-	10% Owner Other (specify below) -Towers		6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One			
(City)	(State)	(Zip)	,						Reporting Person		
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)			1	2. Amount of Securities Beneficially Owned (Instr. 4)	Form: I (D) or I			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock, \$0.01 Par Value					10,000	I	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
, (, (2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Secul Underlying Derivative Secur (Instr. 4)		curity Convers		cise Form:	6. Nature of Indirect Beneficial Ownership (Instr.		
		Date Exercisab	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)		

Explanation of Responses:

Remarks:

/s/ Catherine Piche

10/29/2024

** Signature of Reporting

Date

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

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).