FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington D.C. 20549

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| Name and Address of Reporting Person* Jones Tammy | | | | | | 2. Issuer Name and Ticker or Trading Symbol CROWN CASTLE INC. [CCI] | | | | | | | k all app | , | ng Per | rson(s) to Is | | |
|--|--|--|--|------------------------------|------|---|---|---|--------|------------------------|----------------------------|------------|----------------------------|--|--|--|--|---------|
| (Last) (First) (Middle) 8020 KATY FREEWAY | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/22/2023 | | | | | | | | Office below | er (give title /) | | Other (below) | specify |
| (Street) HOUSTON TX 77024 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Indi Line) X | ′ | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | | Execution Date, | | 3. Transaction Disposed Of (D) (Instr. 3 5) | | | , 4 and Securit Benefic | | ies cially Following | Form (D) o | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | Code V Amount (A) or (D) | | rice | Transa | saction(s) 3 and 4) | | | (11150.4) | | | | | |
| Common Stock, \$0.01 Par Value 02/22/2 | | | | | 2023 | 2023 A 1,713 ⁽¹⁾ A | | \$ <mark>0</mark> | 4,759 | | | D | | | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Conversion Date Execution Date, or Exercise (Month/Day/Year) if any (Month/Day/Year) | | 4. Transa Code (8) | | of Deriv Secu Acqu (A) o Dispo of (D (Instr and £ | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) (D) Date Expiration I (Month/Day Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | te Amount of | | ınt eer | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. The stock is issued pursuant to the Company's 2022 Long-Term Incentive Plan as a component of non-employee director compensation.

Remarks:

/s/ Tammy K. Jones

02/23/2023

** 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.