## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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)

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*     MORELAND W BENJAMIN						2. Issuer Name and Ticker or Trading Symbol  CROWN CASTLE INTERNATIONAL  CORP [ CCI ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				
(Last)	(F	First)	st) (Middle)			COM [ COI ]							X	Officer (g	give title		ther (sp elow)	pecify
1220 AUGUSTA SUITE 500						3. Date of Earliest Transaction (Month/Day/Year) 12/18/2009									Presider	nt & CEO		
(Street) HOUSTON TX 77057					4	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Inc Line)	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting Person				
(City) (State)			(Zip)											- Sim mod by more than one respecting research				ig i cison
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		ar)   E	2A. Deemed Execution Date, if any (Month/Day/Year)				4. Securities Acquired (A) or D Of (D) (Instr. 3, 4 and 5)			Securities Beneficia Owned Fe	s Illy ollowing	6. Owners Form: Dire (D) or Indii (I) (Instr. 4)	ect E	7. Nature of Indirect Beneficial Ownership
							Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	on(s)			nstr. 4)		
Common Stock \$0.01 Par Value 12/18/200					8/2009	09		M		200,000(1)	A	\$8.7	939	322 D				
Common Stock \$0.01 Par Value 12/18/20					8/2009	09		S		200,000(1)	D	\$38.0002	739	,322	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	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transaction Code (Instr. 8)				6. Date Exercisable and 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 derivative Securitie Beneficia Owned Following Reported Transact	e Own s Forn ally Dire or Ir g (I) (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
						v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Stock Option (right to purchase Common	\$8.7	12/18/2009			M			200,000 <sup>(1)</sup>	09/25/	/2005 <sup>(3)</sup>	09/25/2011	Common Stock	200,000	\$0	200,0	00	D	

## **Explanation of Responses:**

- 1. The option exercises and sales reported pursuant to this Form 4 were effected pursuant to a Rule 10b5-1 trading plan previously adopted by the reporting person.
- 2. Represents the weighted average price of sales transacted on December 18, 2009; such sales were conducted through 8 individual transactions on December 18, 2009, at sales prices ranging from \$38.00 to \$38.02
- 3. Vested on September 25, 2005 (following the Company's common stock achieving a pre-established target price).

/s/ W. Benjamin Moreland

\*\* Signature of Reporting Person

12/22/2009

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.