

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>GREENHILL CAPITAL PARTNERS, LLC</u> <hr/> (Last) (First) (Middle) <u>300 PARK AVENUE, 23RD FLOOR</u> <hr/> (Street) <u>NEW YORK NY 10022</u> <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>01/12/2007</u>	3. Issuer Name and Ticker or Trading Symbol <u>CROWN CASTLE INTERNATIONAL CORP [CCI]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director _____ 10% Owner _____ Officer (give title below) <input checked="" type="checkbox"/> Other (specify below) <u>S/H w/ Board Representation</u>	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person _____ <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	14,500,077 ⁽¹⁾⁽²⁾⁽³⁾	D	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person*
GREENHILL CAPITAL PARTNERS, LLC

 (Last) (First) (Middle)
300 PARK AVENUE, 23RD FLOOR

 (Street)
NEW YORK NY 10022

 (City) (State) (Zip)

1. Name and Address of Reporting Person*
GCP SPV I, LLC

 (Last) (First) (Middle)
C/O GREENHILL CAPITAL PARTNERS
300 PARK AVENUE

 (Street)
NEW YORK NY 10022

 (City) (State) (Zip)

1. Name and Address of Reporting Person*
GCP SPV 2, LLC

 (Last) (First) (Middle)
C/O GREENHILL CAPITAL PARTNERS
300 PARK AVENUE

 (Street)
NEW YORK NY 10022

 (City) (State) (Zip)

(City)

(State)

(Zip)

Explanation of Responses:

1. This form is being filed by the following Reporting Persons: Greenhill Capital Partners LLC, GCP SPV 1, LLC and GCP SPV 2, LLC.
2. Greenhill Capital Partners LLC is the general partner of each of GCP Managing Partner, L.P., which acts as the manager for GCP SPV 1, LLC and GCP Managing Partner II, L.P, which acts as the manager for GCP SPV 2, LLC.
3. Greenhill Capital Partners LLC is now the record owner of 44,281 shares of common stock, GCP SPV 1, LLC is now the record owner of 13,377,208 shares of common stock and GCP SPV 2, LLC is now the record owner of 1,078,588 shares of common stock.

1.Greenhill Capital Partners, LLC, By: Ulrika Ekman, General Counsel and Secretary, /s/ Ulrika Ekman 01/22/2007

2.GCP SPV 1, LLC, By GCP Managing Partner, L.P., as Manager of GCP SPV 1, LLC 01/22/2007

By: Greenhill Capital Partners, LLC, as General Partner of GCP Managing Partner, L.P., By: Ulrika Ekman, General Counsel and Secretary, /s/ Ulrika Ekman 01/22/2007

3. GCP SPV 2, LLC, By GCP Managing Partner II, L.P., as Manager of GCP SPV 2, LLC 01/22/2007

By: Greenhill Capital Partners, LLC, as General Partner of GCP Managing Partner, II, L.P., By: Ulrika Ekman, General Counsel and Secretary, /s/ Ulrika Ekman 01/22/2007

** 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 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).

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.