FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | .C. 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 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

| 1. Name and Address of Reporting Person* Goldsmith Andrea Jo | | | | | CR | 2. Issuer Name and Ticker or Trading Symbol CROWN CASTLE INTERNATIONAL CORP [CCI] | | | | | | | | (Che | elationship eck all app C Direc | , | | rson(s) to Is | |
|--|--|--|----------|---|-----------------|--|---|--|------------------------------------|------|--|------------|------------|---|---|---|---|--|------------|
| (Last) (First) (Middle) 8020 KATY FREEWAY | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/17/2022 | | | | | | | | _ | | Officer (give title below) | | Other (below) | specify |
| (Street) HOUST(| | | 7024 | | 4. If A | Amend | ment, | Date o | of Original Filed (Month/Day/Year) | | | | | |) 【 Form Form | ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (5.5) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (I | | | | | | Benefic | ies cially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or F | Price | | ction(s) | | | (Instr. 4) |
| Common Stock, \$0.01 Par Value 02 | | | 02/17/ | 2022 | | | A | | 1,407(1) | A | 1 | \$0 | 6 | 6,558 | | 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 | Exercise (Month/Day/Year) if any (Month/Day/Year) rivative | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | str. | . Price of Perivative Security Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4) | Ownersl Form: Direct (E or Indire (I) (Instr. | Ownership | Beneficial Ownership ct (Instr. 4) | |
| | | | | | Code V | | (A) | (D) | Date Exercis | able | Expiration Date | Title | of Shar | | | | | | |

Explanation of Responses:

1. The stock is issued pursuant to the Company's 2013 stock incentive plan as a component of non-employee director compensation.

Remarks:

/s/ Andrea Jo Goldsmith 02/18/2022

** Signature of Reporting Person

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.