## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average burd	en
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*  Brown Jay A.					<u>CF</u>	2. Issuer Name and Ticker or Trading Symbol CROWN CASTLE INTERNATIONAL CORP [ CCI ]										all app Dired Offic	olicable) ctor er (give title	10% Owner give title Other (specif		wner (specify
(Last) 1220 AU SUITE 50	(Fii GUSTA DF 00	, ,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/19/2013										Sr. VP, CFO & Treasurer				
(Street) HOUST(			77057 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indi Line) X	ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date			2. Transa Date (Month/I		Execution Date,		Code	Transaction Disposed Of (Code (Instr. 5)			Acquired (A) or f (D) (Instr. 3, 4 an			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										v	Amount		(A) or (D)	Pr	Trans		action(s) 3 and 4)			(Instr. 4)
Common	Stock, \$0.0	1 Par Value		02/19	/2013				F		25,315	(1)	D	\$	\$67.9 199,582 D					
Common Stock, \$0.01 Par Value																7	,965 <sup>(2)</sup>		I	by 401(K) Plan
Common Stock, \$0.01 Par Value															2,000		I	by Spouse		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Security  Instr. 3)  Date (Month/Day/Year)  Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)  C (Month/Day/Year)  S (Month/Day/Year)		4. Transa Code ( 8)		tion of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable an Expiration Date (Month/Day/Year)  Date Exercisable Expiratic Exercisable			Amount of Securities Underlying Derivative Security (Instr. and 4)			rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F C O (I	LO. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

## **Explanation of Responses:**

- 1. Represents shares withheld by the issurer to satisfy the Reporting Person's tax withholding obligation in connection with the vesting of certain shares of restricted stock previously granted to the Reporting Person. Such withholding is exempt from Section 16 (b) pursuant to Rule 16b-3(e).
- 2. Represents shares previously acquired in transactions exempt under Rule 16b-3(c).

/s/ Jay A. Brown 02/21/2013

Date

\*\* 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.