FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-028							
Estimated average	burden							

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

hours per response: 0.5

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1. Name and Address of Reporting Person*  Melone Anthony J.						2. Issuer Name and Ticker or Trading Symbol CROWN CASTLE INTERNATIONAL CORP [ CCI ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					CC											Direc			6 Owner	
(Last) (First) (Middle) 1220 AUGUSTA DRIVE SUITE 600						3. Date of Earliest Transaction (Month/Day/Year) 08/28/2018										Office belov	er (give title w)		Other (specify below)	
(Street)	ON ΤΣ	<u> </u>	77057		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(City)			Zip)												Form filed by More than One Reporting Person					
		Tabl	le I - Nor	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, o	r Ben	eficia	ally O	wne	ed			
1. Title of Security (Instr. 3)  2. Trans Date (Month/I				//Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispos Code (Instr. 5)		Disposed	rities Acquired (A ed Of (D) (Instr. 3,			nd S	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect		
									Code	v	Amount		(A) or (D) Price		Transa		action(s) 3 and 4)		(111501.4)	
Common Stock \$0.01 Par Value 0				08/28/2018					G	V	250		D	D \$0		0 10,024		D		
		Та	able II - D								sed of, onvertib				y Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, Transaction Code (Inst					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Pric Deriva Securi (Instr.	vative irity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code V						Expiration	Amour or Numbe of		nber						

**Explanation of Responses:** 

Remarks:

Anthony J. Melone

08/29/2018

\*\* 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.