FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL									
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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* Levendos Christopher (Last) (First) (Middle) 8020 KATY FREEWAY						Issuer Name and Ticker or Trading Symbol CROWN CASTLE INC. [CCI] Date of Earliest Transaction (Month/Day/Year) 12/10/2023								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) EVP & COO				
(Street)	ON T	X	77024		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 Form filed by More than One Reporting Person				
(City)	(Si		(Zip)	n Dori		Checl	k this by the a	oox to ind	icate that a	a trans	ons of Rule	made pursua 10b5-1(c). S	ant to a cor see Instruct			n plan tl	hat is intende	d to
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)				action	ction 2A. Deemed Execution Date,		3. Transaction Code (Instr. 8) 3. Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr. 1)		ed (A) or	5. Amou Securiti Benefic	int of 6. C es For ially (D) Following (I) (n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A) or (D)	Price \$0	Transac (Instr. 3	saction(s) r. 3 and 4)			(IIISU: 4)	
, , , , , , , , , , , , , , , , , , , ,					0/2023	-					1,952 769 ⁽¹⁾	*		6,711			D	
Common Stock, \$0.01 Par Value 12/10/2 Common Stock \$0.01 Par Value					1/2023	\dagger			F		769(*)	D	\$116.		72 ⁽²⁾		I	By 401(K) Plan
		Т	able II -								osed of converti			y Owned			,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transactic Code (Ins		on of		6. Date Exercisa Expiration Date (Month/Day/Yea		Amount of		of s g e Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code			Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Time	(3)	12/10/2023			M			1,952	(4)		(4)	Common	1,952	(4)	0		D	

Explanation of Responses:

- 1. Represents shares withheld by the issuer to satisfy the Reporting Person's tax withholding obligation in connection with the vesting of certain Restricted Stock Units ("RSUs") 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).
- 3. Each RSU was issued pursuant to the Company's 2013 Long-Term Incentive Plan and represents a contingent right to receive one share of common stock, and vesting (i.e., forfeiture restriction termination) generally is subject to the reporting person remaining an employee or director of the Company or its affiliates.
- 4. These Time RSUs were granted on December 1, 2020. 33 1/3% of the original grant amount of these Time RSUs vested on December 10 of each of 2021, 2022 and 2023.

Remarks:

/s/ Christopher Levendos 12/11/2023

** 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.