FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D.O. 20049 | |
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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | ОМІ |

| .• | OMB APPROVAL | | | | | |
|--------------------|-------------------|-----------|--|--|--|--|
| IEFICIAL OWNERSHIP | OMB Number: | 3235-0287 | | | | |
| | Estimated average | hurden | | | | |

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* HORMATS ROBERT D | | | | | 2. Issuer Name and Ticker or Trading Symbol AMERICAN TOWER CORP /MA/ [AMT] | | | | | | | | | | k all app Direc | licable) tor | ng Per | 10% Ov | vner |
|---|--|---------|--------------------------|----------------|--|---|---------------------------------|------|--|--|--------------------------------|-----------------|---|--|--|--|--|-------------|---------|
| (Last) | (Fir | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/11/2024 | | | | | | | | | Office | er (give title v) | | Other (s | specify |
| (Street) | | | | | 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 | | | | | | |
| BOSTO | N M | A 0 | 2116 | | | | | | | | | | | X | | filed by Mo | | in One Repo | |
| (City) | (Sta | ate) (Z | Zip) | | Rul | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | |
| Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | | | | nded to | | | | | | | | | | |
| | | Table | I - Noı | n-Deriva | tive S | ecui | rities | Acq | uired, | Dis | posed of | , or B | enef | iciall | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execution Date | | Date, | Code (Instr. | | 4. Securities Acquired (ADisposed Of (D) (Instr. 35) | | , 4 and Secur Benef Owne | | cially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | Code | v | Amount | (A) (D) | or P | rice | | action(s) 3 and 4) | | | (Instr. 4) | |
| Common Stock | | | 03/11/ | /2024 | | | | A | | 1,089(1) | A | A \$0 | | 8,032 | | | 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) | Derivative Security Instr. 3) Date (Month/Day/Year) Instr. 3) Date (Month/Day/Year) If any (Month/Day/Year) If any (Month/Day/Year) If any (Month/Day/Year) Security | | Transaction Code (Instr. | | of | ired r osed) : 3, 4 | Expiration D e (Month/Day/'s | | te | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | De Se (In | Price of crivative curity estr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | ve es ally ig d tion(s) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | Code | v | (A) | (D) | Date Expiration of | | Numb | er | | | | | | | | | |

Explanation of Responses:

1. These restricted stock units ("RSUs") were granted pursuant to the 2007 Equity Incentive Plan, as amended, and vest on March 11, 2025. Each RSU represents a contingent right to receive one share of Common Stock

Remarks:

/s/ Marina A. Breed, as attorney-in-fact

03/12/2024

** 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.