FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* de Cardenas Alberto						2. Issuer Name and Ticker or Trading Symbol MASTEC INC [MTZ]									all app Dire	olicable)	Person(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) 800 DOUGLAS ROAD, 12TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 03/01/2018									below) below) EVP, General Counsel			
(Street) CORAL GABLES (City) (State) (Zip)					4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(=:9)				Non-Deriv	ative	Sec	uritie	s Ac	auire	ed. D	isposed o	of. or E	Benefic	ially	Own			
1. Title of Security (Instr. 3) 2. Transact Date			2. Transactio	on 2A. Exe /Year) if ar		A. Deemed Execution Date, f any Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and				5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common		03/01/20	/2018				S		4,100	D	\$48.9	378 ⁽²⁾	1	10,502	D			
Common Stock ⁽¹⁾ 03/01					18			S		10,800	D	\$49.7	676 ⁽³⁾	9	99,702	D		
Common Stock ⁽¹⁾ 03				03/01/20	018				S		100	D	\$50	.55	99,602		D	
Common Stock															1,434	I	By 401(k) plan	
		Та	ble II								posed of, convertib				vned			
1. Title of Derivative Security 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) if any (Month/Day			tion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exe Expiration I (Month/Day			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deriv Secu (Inst			Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					de / (A) (D)		(D)	Date		Expiration	Tialo	Number of						

Explanation of Responses:

- 1. Pursuant to a 10b5-1 Plan.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in 17 separate transactions with prices ranging from \$48.35 to \$49.30 for an average weighted sales price of \$48.9378. The reporting person undertakes to provide the Issuer, any security holder of the Issuer or the staff of the Securities and Exchange Commission upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in 19 separate transactions with prices ranging from \$49.35 to \$50.25 for an average weighted sales price of \$49.76759. The reporting person undertakes to provide the Issuer, any security holder of the Issuer or the staff of the Securities and Exchange Commission upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Remarks:

Albert de Cardenas

03/02/2018

** 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.