FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response	: 0.5							

	Check this box if no longer subject
\Box	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

1. Name and Address of Reporting Person* JOHNSON JULIA L					2. Issuer Name and Ticker or Trading Symbol MASTEC INC [MTZ]										p of Reporti olicable) ctor	Ü	n(s) to I:		
(Last)	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 05/15/2023									Office	er (give title v)		Other (s below)	specify	
PO BOX 14737					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) TALLAHASSEE FL 32317												X	X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip) Rule								Rule 10b5-1(c) Transaction Indication											
Check this box to indicate that a transaction was made pursua satisfy the affirmative defense conditions of Rule 10b5-1(c). S																			
		Table	- No	n-Deriva	tive S	ecui	rities	Acq	uired,	Dis	posed of	, or I	Benef	ficiall	y Owr	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day)				y/Year) Execu		Deemed cution Date, y hth/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (/ I Of (D) (Instr. 3			5. Amo Securi Benefi Owned Follow	ties cially I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	or P			ted action(s) 3 and 4)				
Common Stock 05/15/2					2023				A		411	I	4 \$	\$0.00	00 69,305		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)	ative Conversion Date Execution Date, if any			tion Date,	4. Transaction Code (Instr. 8)		5. Numl of Deriv Secu Acqu (A) o Dispo of (D) (Instr	rative rities ired r osed)	es I d		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		Der Sec (Ins	Price of ivative curity etr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	m: ect (D) ndirect	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

Remarks:

\s\ Alberto de Cardenas For:
Julia Johnson

05/17/2023

** 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.