## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnington, D.C. 20	J
	washington, D.C. 20

STATEMENT	OF CHANGES I	N RENEFICIAL	OWNERSHIE
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OMB APPROVAL OMB Number: Estimated average burden 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*  JOHNSON JULIA L						2. Issuer Name <b>and</b> Ticker or Trading Symbol MASTEC INC [ MTZ ]								Check all a	onship of Reporting Ill applicable) Director		Person(s) to Issuer		
(Last) PO BOX	•	rst) (	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/14/2014									Officer (give title below)			Other (specify below)	
(Street) TALLAH (City)	IASSEE FI		32317 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							ine) X Fo Fo	rm filed by On	or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son				
		Tabl	e I - Nor	ı-Deriv	/ative	Se	curitie	s Ac	quired,	Disp	osed o	f, or	Bene	eficia	ally Ow	ned			
Da			Date	ate Ex lonth/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		rities Acquired (A ed Of (D) (Instr. 3,			nd Sec Ben Owr	mount of urities eficially led Following orted	Fori	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount		A) or D)	Price	ͺ   Trar	saction(s) r. 3 and 4)			(11341.4)	
Common Stock			11/14	11/14/2014				A		920		A		\$0 49,900			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Execusive Or Exercise (Month/Day/Year) if any		3A. Deeme Execution if any (Month/Da	Date, Transaction Code (Instr.		on of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)		,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Sha	ber					

**Explanation of Responses:** 

By: \s\ Alberto de Cardenas For: Julia Johnson

11/18/2014

\*\* 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.