Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 | |
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| | | | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APF | PROVAL | | | | | | | | | | |
|--------------------------|--------|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | |
| OMB Number: 3235-028 | | | | | | | | | | | |
| Estimated average burden | | | | | | | | | | | |
| hours ner resnonse | . 05 | | | | | | | | | | |

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* <u>Campbell C Robert</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol MASTEC INC [MTZ] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|---|--|---------|---------|-----------------|---|-------|---|-----------------|---|--------------------|---|---|--|---|---|--|--------------------|--------------|----|
| (Last) (First) (Middle) 4145 PINTA COURT | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/13/2021 | | | | | | | | | Office below | er (give title v) | | Other (s below) | specify | |
| (Street) CORAL GABLES | FI | , 3 | 3146 | | 4. If A | Amend | lment, | Date of | f Origina | l Filed | l (Month/Da | y/Year |) | 6. Indi Line) X | Form | r Joint/Grou filed by On filed by Mo | e Repo | orting Perso | on |
| (City) | (St | ate) (Z | Zip) | | | | | | | | | | | | | | | | |
| | | Table | I - Nor | า-Deriva | tive S | Secu | rities | s Acq | uired, | Dis | posed of | , or E | Benef | icially | Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | 4 and Securit | | ties For cially (D) I Following (I) (| | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | Code | v | Amount | (A) (D) | or P | rice | Transa | action(s) 3 and 4) | | ľ | (Instr. 4) | |
| Common | Stock | | | 08/13/ | 2021 | | | | A | | 343 | A | \ \$ | 0.00 | 50 | 0,170 | | 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) | erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any | | | | Transaction of Code (Instr. Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y C | .0. Ownership Form: Direct (D) or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amou or Numb of Share | er | | | | | | |

Explanation of Responses:

Remarks:

\s\ Albert de Cardenas For: Robert Campbell

08/17/2021

** 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.