Edgar Filing: MASTEC INC - Form 4

MASTEC IN	С										
Form 4											
November 16	, 2016										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										PPROVAL	
	UNITEI) STATES		ITIES Al hington, 1			NGE (COMMISSION	OMB Number:	3235-0287	
Check this box if no longer									Expires:	January 31	
subject to	STATE	MENT O	F CHANO	GES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005 average	
	Section 16.				TIES				burden hou	irs per	
Form 4 or Form 5		urguant to	Section 16	$\overline{b}(a)$ of the	Securiti	oc Ex	chanc	ge Act of 1934,	response	0.5	
obligation	⁸ Section 17							of 1935 or Sectio	n		
may conti See Instru	nue.		of the Inv	•	•	• •			11		
1(b).	ction				1.5						
(Print or Type R	esponses)										
						5. Relationship of Issuer	o of Reporting Person(s) to				
JOHNSON JULIA L Symbol MASTE								(Check all applicable)			
				C INC [N	11ZJ						
(Last)				-				X Director 10% Owner Officer (give title Other (specify			
(Month/Da PO BOX 14737 11/15/20 (Street) 4. If Amer											
			11/13/20	10				below) below)			
			endment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Mont				h/Day/Year)				Applicable Line)			
TALLAHASSEE, FL 32317								_X_ Form filed by One Reporting Person Form filed by More than One Reporting			
IALLAHAS	SEE, FL 5251	1						Person			
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. De (Month/Day/Year) Executi any (Month			3. Transactic Code (Instr. 8)	FransactionAcquired (A) orCodeDisposed of (D)			Securities Beneficially Owned Following	5. Ownership Form: Direct D) or ndirect (I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	11/15/2016			A	1,484	(D) A	\$ 0	93,428	D		
2.000											

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	onNumber Expiration of (Month/E			ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
1 0	Director	10% Owner	Officer Othe					
JOHNSON JULIA L								
PO BOX 14737	Х							
TALLAHASSEE, FL 32317								
Signatures								
\s\ Albert de Cardenas For: Juli	ia							
Johnson	11/16/2016							
**Signature of Reporting Person		Da	te					

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.