## Edgar Filing: MASTEC INC - Form 4

MASTEC IN	С										
Form 4											
February 18,	2015										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
Wa				RITIES AND EXCHANGE COMMIS shington, D.C. 20549					OMB Number:	3235-0287	
Section 16.				GES IN BENEFICIAL OWNERSHIP OF SECURITIES					burden hou	Estimated average burden hours per	
Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section								0.5		
(Print or Type R	esponses)										
JOHNSON JULIA L Syn			Symbol	2. Issuer Name <b>and</b> Ticker or Trading ymbol IASTEC INC [MTZ]				5. Relationship of Reporting Person(s) to Issuer			
			f Earliest Transaction				(Check all applicable)				
(M			(Month/Day/Year) 02/13/2015					X_ Director 10% Owner Officer (give title Other (specify below) below)			
				Amendment, Date Original d(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
TALLAHAS	SSEE, FL 3231	7							Aore than One Ro		
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	urity (Month/Day/Year) Execution Date, if		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or			Securities Beneficially Owned Eollowing Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common Stock	02/13/2015			Code V A	Amount 1,114		Price \$ 0	(Instr. 3 and 4) 51,014	D		

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)	tionNumber E of (N				Secur	unt of rlying	Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	,		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director 10% Owner		Officer	Other				
JOHNSON JULIA L								
PO BOX 14737	Х							
TALLAHASSEE, FL 32317								
Signatures								
By: \s\ Alberto de Cardenas Fo Johnson	r: Julia		02/18/2015					
**Signature of Reporting Perso	n		Date					

## **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.