## FORM 4

obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*  MAS JOSE RAMON					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						
,					-										O#: /:					
	(Last) (First) (Middle) 800 S DOUGLAS ROAD 12TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 12/28/2015									X Officer (give title below)				Other (specify below)	
(Street) CORAL GABLES (City)			33134 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					son
		Tab	le I - No	n-Deriv	/ative	Se	curitie	es Ac	quired	, Dis	posed o	f, o	r Ber	nefic	ially	Owne	ed			
1. Title of Security (Instr. 3)		2. Transa	nsaction 2 Eth/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (	ction	4. Securities Acquired (A)			d (A) or	or 5. Amo 1 and Securi Benefi		ount of ties cially I Following	For (D)	Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount (A)		(A) or (D)	Price	•	Transa	action(s) 3 and 4)			(111341.4)	
Common Stock 1			12/28	28/2015				F		31,463	3	D	D \$17.5		2,951,077			D		
Common Stock														1,2	12,414		I	Indirect <sup>(1)</sup>		
Common Stock															42	25,000		I	Indirect <sup>(2)</sup>	
Common Stock															27	76,000		I	Indirect <sup>(3)</sup>	
		Ta									sed of, onvertib					wned				
Derivative Security (Instr. 3)  Conversion or Exercise Price of Derivative Security  Date (Month/Day/Year)  Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)  Date Exp Exercisable Date		e Amount of Securities Underlying Derivative Security (Instr. and 4)  Expiration  Amount of Member of Number of Security Instr.		f g Instr. 3 mount umber	t r		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

## **Explanation of Responses:**

- 1. Shares owned of record by Jose Ramon Mas Holdings I, LLC, a Florida limited liability company ("Jose Ramon Mas Holdings"). The sole member of Jose Ramon Mas Holdings, LLC, a Florida limited liability company, which is wholly owned by Mr. Jose Ramon Mas.
- 2. Shares held by Jose Mas Irrevocable Trust, of which the reporting person's spouse is one of the trustees. The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purpose of Section 16 or for any other purpose.
- 3. Shares owned by Mas Equity Partners III, LLC, a Delaware limited liability company ("MEP III"), in which the reporting person is a member. The reporting person disclaims beneficial ownership of the securities held by MEP III except to the extent of his pecuniary interest therein.

## Remarks:

/s/ Albert de Cardenas For:

12/30/2015

\*\* Signature of Reporting Person

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.