JOHNSON JULIA L

Form 4

November 19, 2012

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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

Form 5 obligations may continue. See Instruction

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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1(b).

(Last)

(City)

Common

Stock

1. Name and Address of Reporting Person * JOHNSON JULIA L

(First)

(Street)

(State)

11/15/2012

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

MASTEC INC [MTZ]

3. Date of Earliest Transaction

(Check all applicable)

5169 LATROBE DRIVE

(Month/Day/Year) 11/15/2012

X_ Director 10% Owner Other (specify Officer (give title below)

(Middle)

(Zip)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

WINDERMERE, FL 34786

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned Following Reported

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A) or

Transaction(s) (Instr. 3 and 4)

Code V Amount (D)

Price

730 \$0 45,325 D A

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 | 2. Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. Transact | 5. ionNumber | 6. Date Exer Expiration D | | 7. Titl Amou | | 8. Price of Derivative | 9. Nu Deriv |
|------------------------|------------------|--------------------------------------|-------------------------------|----------------|-----------------|---------------------------|------------|-----------------|----------|------------------------|----------------|
| Security | or Exercise | | any | Code | of | (Month/Day | /Year) | Under | lying | Security | Secui |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivativ | ve . | | Securi | ities | (Instr. 5) | Bene |
| | Derivative | | | | Securitie | S | | (Instr. | 3 and 4) | | Owne |
| | Security | | | | Acquired | l | | | | | Follo |
| | • | | | | (A) or | | | | | | Repo |
| | | | | | Disposed | l | | | | | Trans |
| | | | | | of (D) | | | | | | (Instr |
| | | | | | (Instr. 3, | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | Code V | (A) (D) | Date | Expiration | Title | Amount | | |
| | | | | Code v | (A) (D) | Exercisable | Date | Title | or | | |
| | | | | | | Exercisable | Date | | Number | | |
| | | | | | | | | | of | | |
| | | | | | | | | | Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| JOHNSON JULIA L 5169 LATROBE DRIVE WINDERMERE, FL 34786 | X | | | | | | |

Signatures

By: s/ Alberto de Cardenas For: Julia Louise Johnson

**Signature of Reporting Person 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.

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