SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL
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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 Add IGATE CO	ing Person*	2. Date of Event Requiring Staten (Month/Day/Year 09/16/2008	nent T	3. Issuer Name and Ticker or Trading Symbol <u>Mastech Holdings, Inc.</u> [MHH]					
(Last) 6528 KAISEI	(First)	(Middle)	~		4. Relationship of Reporting Perso Check all applicable) Director X	n(s) to Issue 10% Owne	(5. If Amendment, Date of Original Filed (Month/Day/Year)	
(Street)			-		Officer (give title below)	Other (spe below)	ecify 6. I Ap	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person	
FREMONT	CA	15275	_						y More than One
(City)	(State)	(Zip)							
			Table I - Non	-Derivativ	ve Securities Beneficiall	y Owned			
1. Title of Security (Instr. 4)					Amount of Securities eneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock					1,000	D			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
E			2. Date Exerc Expiration Da (Month/Day/Y	ate	3. Title and Amount of Securi Underlying Derivative Securit		4. Conversi or Exerci	ise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
Explanation of R			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivativ Security		

/s/ Mukund Srinath

Date

09/26/2008

** 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 5 (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.