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

	0. 0000		the investment company Act of					
1. Name and Address of Reporting Person*  Moran Thomas B.  2. Date of Event Requiring Statement (Month/Day/Year) 07/20/2009		nent -	3. Issuer Name <b>and</b> Ticker or Trading Symbol  Mastech Holdings, Inc. [ MHH ]					
(Last) (First) (Middle) 1000 COMMERCE DRIVE, SUITE 500  (Street) PITTSBURGH PA 15275  (City) (State) (Zip)			4. Relationship of Reporting Per (Check all applicable)  X Director  X Officer (give title below)  CEO, President CEO, Presid	10% Owne Other (spe below)	er (M	onth/Day/Year)  ndividual or Join olicable Line)  X Form filed b	ate of Original Filed  t/Group Filing (Check  y One Reporting Person  y More than One erson	
	Table I - Nor	-Derivati	tive Securities Beneficia	ally Owned				
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownersh Form: Direct or Indirect (Instr. 5)	cṫ (D)   (Ins		Beneficial Ownership	
No securities are beneficially owned.			0	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable Expiration Date (Month/Day/Year)		ate	and 3. Title and Amount of Securities Underlying Derivative Security (Inst		4. Conversion or Exercise	e Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
				Amount	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

/s/ Thomas B. Moran

07/22/2009

\*\* Signature of Reporting Person

Date

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).