McBryan Michael E Form 3 May 27, 2011

### FORM 3

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

OMB APPROVAL

OMB Number:

3235-0104

Expires:

response...

January 31, 2005

0.5

Estimated average burden hours per

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person \* Statement HEALTHCARE SERVICES GROUP INC [HCSG] McBryan Michael E (Month/Day/Year) 05/24/2011 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) 3220 TILLMAN (Check all applicable) DRIVE, Â SUITE 300 (Street) 6. Individual or Joint/Group 10% Owner \_X\_\_ Director \_X\_\_ Officer Other Filing(Check Applicable Line) (give title below) (specify below) \_X\_ Form filed by One Reporting Sr VP of Operations Person BENSALEM, Â PAÂ 19020 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 5) (Instr. 4) Form: Direct (D) or Indirect (I) (Instr. 5) Â Common stock 6,089 D Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) 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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Title	Derivative Security	Security: Direct (D)	

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	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Phantom stock	(1)	(2)	common stock	23,916	\$ 16.62	D	Â
Stock option	01/06/2012	01/06/2021	common stock	3,000	\$ 16.11	D	Â
Stock option	01/06/2013	01/06/2021	common stock	3,000	\$ 16.11	D	Â
Stock option	01/06/2014	01/06/2021	common stock	3,000	\$ 16.11	D	Â
Stock option	01/06/2015	01/06/2021	common stock	3,000	\$ 16.11	D	Â
Stock option	01/06/2016	01/06/2021	common stock	3,000	\$ 16.11	D	Â
Stock option	01/04/2011	01/04/2020	common stock	4,500	\$ 14.3067	D	Â
Stock option	01/04/2012	01/04/2020	common stock	4,500	\$ 14.3067	D	Â
Stock option	01/04/2013	01/04/2020	common stock	4,500	\$ 14.3067	D	Â
Stock option	01/04/2014	01/04/2020	common stock	4,500	\$ 14.3067	D	Â
Stock option	01/04/2015	01/04/2020	common stock	4,500	\$ 14.3067	D	Â
Stock option	01/05/2010	01/05/2019	common stock	4,500	\$ 10.3867	D	Â
Stock option	01/05/2011	01/05/2019	common stock	4,500	\$ 10.3867	D	Â
Stock option	01/05/2012	01/05/2019	common stock	4,500	\$ 10.3867	D	Â
Stock option	01/05/2013	01/05/2019	common stock	4,500	\$ 10.3867	D	Â
Stock option	01/05/2014	01/05/2019	common stock	4,500	\$ 10.3867	D	Â
Stock option	01/03/2009	01/03/2018	common stock	4,500	\$ 13.9267	D	Â
Stock option	01/03/2010	01/03/2018	common stock	4,500	\$ 13.9267	D	Â
Stock option	01/03/2011	01/03/2018	common stock	4,500	\$ 13.9267	D	Â

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Stock option	01/03/2012	01/03/2018	common stock	4,500	\$ 13.9267	D	Â
Stock option	01/03/2013	01/03/2018	common stock	4,500	\$ 13.9267	D	Â
Stock option	06/27/2005	12/27/2014	common stock	47,250	\$ 6.0681	D	Â
Stock option	06/23/2004	12/26/2013	common stock	27,142	\$ 3.6839	D	Â

### **Reporting Owners**

Reporting Owner Name / Address	Relationships				
1 0	Director	10% Owner	Officer	Other	
McBryan Michael E 3220 TILLMAN DRIVE SUITE 300 BENSALEM, PA 19020	ÂX	Â	Sr VP of Operations	Â	

## **Signatures**

/s/ Michael E.
McBryan

\*\*Signature of Reporting Person

Date

# **Explanation of Responses:**

- \* 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).
- (1) ACQUIRED PURSANT TO AN ISSUER CONTRIBUTION UNDER THE HEALTHCARE SERVICES GROUP, INC DEFERRED COMPENSATION PLAN
- (2) SHARES OF PHANTOM STOCK ARE PAYABLE IN KIND FOLLOWING TERMINATION OF THE REPORTING PERSON'S EMPLOYMENT WITH ISSUER

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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