Edgar Filing: MOSS ROBERT J - Form 4

Form 4	BERTJ									
January 07	, 2011									
FOR	M 4 _{UNITED}	STATES					COMMISSION		APPROVAL	
Check	this box		Wa	shington	, D.C. 20)549		Number:	3235-0287	
if no lo subject Section	nger STATEN t to n 16.	STATEMENT OF CHANGES IN BENEFICIAL OV SECURITIES						Estimated	ated average en hours per	
	Filed pur	a) of the F	Public U	Itility Hol	ding Cor		nge Act of 1934, of 1935 or Sectio 940	response.	0.5	
(Print or Typ	e Responses)									
1. Name and Address of Reporting Person <u>*</u> MOSS ROBERT J			2. Issuer Name and Ticker or Trading Symbol			-	5. Relationship of Reporting Person(s) to Issuer			
			HEALTHCARE SERVICES GROUP INC [HCSG]				(Check all applicable)			
(Last) (First) (Middle) 3220 TILLMAN DRIVE, SUITE			3. Date of Earliest Transaction (Month/Day/Year) 01/06/2011				X_ Director10% Owner Officer (give titleOther (specify below) below)			
300	(Street)		4. If Am	endment, Da	ate Origina	ો	6. Individual or J	oint/Group Fil	ing(Check	
			Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
BENSAL	EM, PA 19020						Person	wore than one r	ceporting	
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: R	eport on a separate line	e for each cla	ass of sec	urities benet	ficially ow	ned directly o	or indirectly.			
					Perso inform requir	ons who res nation cont red to respo ays a curren	spond to the collec ained in this form ond unless the for ntly valid OMB col	are not m	SEC 1474 (9-02)	
	Tab					posed of, or convertible s	Beneficially Owned securities)	I		
1. Title of Derivative		action Date /Day/Year)		emed on Date, if	4. Transact	5. Number iotof Derivati	6. Date Exercisa ve Expiration Date	ble and	7. Title and Amount of Underlying	

8.

D

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		Securities (Instr. 3 and 4)	
				Code V	(A) (D	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock option	\$ 16.11	01/06/2011		А	1,001	01/06/2012	01/06/2021	common stock	1,001
Stock option	\$ 16.11	01/06/2011		А	1,000	01/06/2013	01/06/2021	common stock	1,000
Stock option	\$ 16.11	01/06/2011		А	1,000	01/06/2014	01/06/2021	common stock	1,000
Stock option	\$ 16.11	01/06/2011		А	1,000	01/06/2015	01/06/2021	common stock	1,000
Stock option	\$ 16.11	01/06/2011		А	1,000	01/06/2016	01/06/2021	common stock	1,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
MOSS ROBERT J 3220 TILLMAN DRIVE SUITE 300 BENSALEM, PA 19020	Х					
Signatures						

/s/ Robert Moss	01/07/2011
<u>**</u> 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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