Edgar Filing: OMEGA HEALTHCARE INVESTORS INC - Form 5

OMEGA HEALTHCARE INVESTORS INC

Form 5

February 03, 2016

FORM	15							OMB AF	PROVAL		
	UNITED	STATES SECU				GE CO	MMISSION	OMB Number:	3235-0362		
Check the no longer		Wa	Washington, D.C. 20549					Expires:	January 31,		
to Section Form 4 of 5 obligation may cont See Instruction 1(b).	n 16. r Form ons inue. action Filed pur	OWNE suant to Section	ATEMENT OF CHANGES IN BENEFIC OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act Public Utility Holding Company Act of 1935				Act of 1934,	Estimated a burden hour response			
Reported Form 4 Transacti Reported		30(h) of the In	•	_	_		933 of Section	1			
LOWENTHAL EDWARD Sym OM							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (M	Middle) 3. Staten (Month/	3. Statement for Issuer's Fiscal Year EndedX			_X Director Officer (give elow)		Owner r (specify			
	NATIONAL SUITE 3500										
			mendment, Date Original 6 Month/Day/Year)				6. Individual or Joint/Group Reporting (check applicable line)				
HUNT VA	LLEY, MD 21	030				_	X_ Form Filed by C _ Form Filed by M erson				
(City)	(State)	(Zip) Tab	ole I - Non-Der	ivative Sec	uritie	es Acquii	red, Disposed of	, or Beneficial	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)				6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	07/17/2015	Â	A4	Amount 3,000 (1)	(A) or (D)	Price \$ 35.71	(Instr. 3 and 4) 43,802	D D	Â		
	port on a separate line eficially owned directl		Persons who respond to the collection of information contained in this form are not required to respond unless					SEC 2270 (9-02)			

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

the form displays a currently valid OMB control number.

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	nt of	Derivative	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	
	Derivative				Securities			(Instr.	3 and 4)		
	Security				Acquired						
					(A) or						
					Disposed						
					of (D)						
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration		Number		
						Exercisable	Date		of		
					(A) (D)				Shares		
					(4) (1)				SHales		

of D

Is Fi

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Othe			
LOWENTHAL EDWARD 200 INTERNATIONAL CIRCLE SUITE 3500 HUNT VALLEY, MD 21030	ÂX	Â	Â	Â			

Signatures

/s/ Thomas H. Peterson,
Attorney-in-Fact

**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).
- (1) Represents grant of restricted stock subject to time-based vesting.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

Reporting Owners 2