#### Edgar Filing: OMEGA HEALTHCARE INVESTORS INC - Form 4

Form 4	EALTHCARE INV	ESTORS INC									
<b>FORM 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSI						COMMISSION	OMB APPROVAL OMB 3235-028				
Check th if no long subject to Section 1 Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	6. Filed pursu strue. Filed pursu	Washington, D.C. 20549 STATEMENT OF CHANGES IN 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							Number: Expires: January 31, 2005 Estimated average burden hours per response 0.5		
(Print or Type I	Responses)										
FRANKE THOMAS F Symbol			ner Name <b>and</b> Ticker or Trading GA HEALTHCARE				5. Relationship of Reporting Person(s) to Issuer				
			TORS INC [OHI]				(Check all applicable)				
(Month			te of Earliest Transaction hth/Day/Year) 7/2016				X_ Director 10% Owner Officer (give title Other (specify below) below)				
	(Street)		ndment, Da hth/Day/Year	-	1		6. Individual or Jo Applicable Line) _X_ Form filed by 0 Form filed by N	One Reporting P	erson		
	(State) (7	<b>7</b> )					Person				
(City)						-	uired, Disposed o		•		
1.Title of Security (Instr. 3)			3. Transactic Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D) 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	05/17/2016		А	382 <u>(1)</u>	А	\$ 32.76	80,135	D			
Common Stock							53,182	I	Owned By Family Limited Liability Company Of Which The Reporting Person Is A		

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Member.

Reminder: Report on a separate line for each class of securities beneficially 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 Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Other

### **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships				
FB	Director	10% Owner	Officer		
FRANKE THOMAS F 200 INTERNATIONAL CIRCLE SUITE 3500 HUNT VALLEY, MD 21030	Х				
Signatures					
/s/ Thomas H. Peterson, Attorney-in-Fact		05/17/201	05/17/2016		
**Signature of Reporting Person		Date			

#### \*\*Signature of Reporting Person

# 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) Grant of stock for payment of quarterly Director's fees.

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.