FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
Expires:	December 31 2014									

Expires: December 31, 2014
Estimated average burden
hours per response: 0.5

## Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *  LOWENTHAL EDWARD  (Last) (First) (Middle)  (Street)					2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [ OHI] 3. Date of Earliest Transaction (Month/Day/Year) 05/19/2003 4. If Amendment, Date of Original Filed (Month/Day/Year)								[ (Check	Officer (give title Other (specify below)  dividual or Joint/Group Filing (Check Applicable Lin				able Line)	
(City)	(State)	(Zi	p)												Form file	а ву моге	tnan Oi	ne Reportin	g Person
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date				Date	te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				ties Acquired (A) or I Of (D) (Instr. 3, 4 a			5. Amount Securities Beneficially Following I Transactio	y Owned Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price	(Instr. 3 and				(111501.4)
OHI Common Stock 05/1					/19/2003		05/19/	2003	А		687(1)		Α	3.64	14,952			D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Derivative Conversion Date Execution Security (Instr. 3) or Exercise (Month/Day/Year) if any			3A. Deemed Execution Da if any (Month/Day/\)	· 1		ransaction code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year		e Securit			8. Price of Derivative Security (Instr. 5)		e C s F ally C	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
5landing (P.					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	On(3)	3)	

## **Explanation of Responses:**

1. Grant of Stock for payment of Director's fees

Thomas Peterson, Attorney-In-

<u>Fact</u>

\*\* 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> If the form is filed by more than one reporting person, see Instruction 4 (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).