FORM 4

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

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
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 *  CRABILL R LEE  (Last) (First) (Middle)  9690 DEERECO ROAD  SUITE 100  (Street)  TIMONIUM MD 21093							2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [ OHI ]  3. Date of Earliest Transaction (Month/Day/Year) 02/12/2007  4. If Amendment, Date of Original Filed (Month/Day/Year)									tionship of Reporting Person(s) to Issuer . all applicable) Director 10% Owner Officer (give title Other (specify below) Senior Vice President  ridual or Joint/Group Filing (Check Applicable Liferon filed by One Reporting Person Form filed by More than One Reporting Person			able Line)
(City)	(State)	(Zip			<u> </u>										•				
1. Title of Security (Instr. 3) 2. Trai					ransaction		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 a			) or 4 and 5)	r 5. Amoun		Form:	nership Direct (D) irect (I) 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	\ <u>\</u>	Amount		(A) or (D)	Price	ļ`	·		_					
OHI Common Stock 02/					12/2007				S	s 6,10		6,100 D		\$18.7	105,567			D	
OHI Common Stock 02/1				/12/2007				S		2,000		D	\$18.71	103,567			D		
	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		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Da (Month/Day/Yo		e Secur ear) Deriva		itle and A urities Un vative Se tr. 3 and 4	derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V		(A)	(D)	Date Exercisable		Expiration Date	Title		or Number of Shares					
Explanation of Re	sponses:																		

Remarks:

Thomas Peterson, Attorney-in-

**Fact** 

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* 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.

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.