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

Name and Address of Reporting Person KORMAN BERNARD J					2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC									1 (0)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
KORIMAN BERNARD J					OHI]									' X	Director			10% Ov		
(Last)	(First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)									ive title		Other (s below)	pecify	
200 INTERNATIONAL CIRCLE						11/17/2009														
SUITE 3500					4. If Amendment, Date of Original Filed (Month/Day/Year)								_ I	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street)													^		•	than One Reporting Person		g Person		
HUNT VALLE	Y MD	21	030																	
(City)	(State)	(Zi	p)																	
		Та	ble I - Nor	n-Deri	ivativ	e Se	curitie	s Acq	uired, [Disp	osed of,	or I	Benefi	cially Ow	/ned					
Date					t. Transaction Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)					4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		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 4)				(111501.4)	
Common Stock 11/1						/17/2009			A		354(1)		Α	\$17.64	616,830			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)	erivative Conversion Date Execution Date,			~~ c	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		te	nd 7. Title and Amor Securities Under Derivative Secur (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	i de la companya de l	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)			Expiration Date	or Numi		Amount or Number of Shares		(Instr. 4)	011(5)				

Explanation of Responses:

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

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

11/24/2009

** 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.