SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
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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) 200 INTERNATIONAL CIRCLE						2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI] 3. Date of Earliest Transaction (Month/Day/Year) 02/28/2011								[(Check	Officer (give title below)		10% Owner Other (specify below)		wner specify
SUITE 3500 (Street) HUNT VALLEY MD 21030 (City) (State) (Zip)					4. IT A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi	dividual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Transac Date							ction 2A. Deemed Execution Date,			Disp	4. Securitie	s Acqu	uired (A)	or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Own Form: I		7. Nature of Indirect
							if any (Month/Day/Year)		Code (Instr. 8) Code V				A) or D)	Price			or Indirect (I) (Instr. 4)		Beneficial Ownership (Instr. 4)
Common Stock 02/28					8/2011	/2011			S		2,000		D)	\$23.79	31,587			D	
Common Stock 02/24					28/2011				S		1,922		D	\$23.79	0			I	Family foundation of which reporting person is a member
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)	Conversion Date Execution or Exercise (Month/Day/Year) if any		3A. Deemee Execution I if any (Month/Day	Date, Transaction Code (Instr.					6. Date Exerc Expiration Da (Month/Day/Y		ate	Secur Deriva	7. Title and Amou Securities Underl Derivative Securit (Instr. 3 and 4)		ing Derivative Security (Instr. 5)		ber of ve es ially ng ed ction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(A) (D)		sable	Expiration Date	Title		Amount or Number of Shares		(Instr. 4)			

Explanation of Responses:

<u>/s/ Thomas H. Peterson,</u> <u>Attorney-in-Fact</u> ** Signature of Reporting Person

Date

02/28/2011

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.