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*  KORMAN BERNARD J  (Last) (First) (Middle)					2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [ OHI ]									Relationship of Reporting (Check all applicable)     X Director     Officer (give title below)			g Person(s) to Issuer  10% Ov Other (solution)		wner	
(Last) (First) (Middle) 200 INTERNATIONAL CIRCLE					3. Date of Earliest Transaction (Month/Day/Year) 02/16/2012										bolowy			bolowy		
SUITE 3500					4. If Amendment, Date of Original Filed (Month/Day/Year)								6.	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person						
(Street)	Y MD	21	030											^		•	•	ng r erson ne Reporti	ng Person	
(City)	(State)	(Zi	p)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transad Code (II 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			)		ecurities eneficially Owned ollowing Reported		Direct (D) ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount	(A) or (D)	Price		(Instr. 3 and 4)				(IIISU. 4)	
Common Stock 02/16/						5/2012		Α		436(1)	А	\$21.4	49	634,564		D				
Common Stock													5,574		1		Wife Ownership			
	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 Date (Month/Day/Year)  Title of Derivative Security  2. Conversion Date (Month/Day/Year)  Title of Derivative Security  3. Transaction Date (Month/Day/Year)  Title of Date (Month/Day/Year)  Title of Date (Month/Day/Year)				Date, Transaction Code (Instr					6. Date Exer Expiration D (Month/Day/\)		ate Securities Underl		Jnderlyin Security	ing Derivative		9. Numb derivativ Securitic Benefici Owned Followin Reporte Transac	ve es ially ng d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
			,	Code	ode V		(D)	Date Exercisable		Expiration Date	Am or Nui Title of S		.	(Instr.						

## Explanation of Responses:

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

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

02/16/2012

\*\* 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.

 $<sup>^{\</sup>star}$  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).