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* CALLEN CRAIG R | | | | | 2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI] | | | | | | | | | tionship of R all applicabl Director Officer (q | e) | erson(| (s) to Issuer 10% Ow Other (s | |
|--|--|--|---|--------------------------------|---|---|--|----------------------------------|--|--|--|-----|---|--|--|----------------|--|--|
| (Last) (First) (Middle) 200 INTERNATIONAL CIRCLE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/17/2013 | | | | | | | | | below) | vo ano | | below) | poony |
| SUITE 3500 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| (Street) HUNT VALLEY MD 21030 | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | g Person |
| (Oity) | City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date | | | | 2. Transa Date (Month/Da | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispose Code (Instr. | | urities Acquired (A) or ed Of (D) (Instr. 3, 4 an | | | 5. Amount Securities Beneficially Following I | / Owned Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | (A) o (D) | r I | Price | (Inctr 2 on | | | | (instr. 4) |
| | 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Cod | Transaction Code (Instr. | | 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) | | 7. Title and Amount Securities Underlyin Derivative Security 3 and 4) | | ying | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficial Owned Following Reported | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Cod | e V | (A) | (D) | Date Exercisabl | | opiration ate | Title | 0 | mount r lumber f Shares | | Transacti (Instr. 4) | on(s) | | |
| Deferred Stock Units | (1) | 05/17/2013 | | А | | 342 | | (2) | | (3) | Common Stock | | 342 | \$36.54 | 342 | | D | |

Explanation of Responses

- 1. Deferred Stock Plan: These units represent the grant of stock or restricted stock to the reporting person vesting over time or upon other specified events and convert into shares of common stock on a 1 for 1 basis. If the participant so elects, dividends will also be converted into Deferred Stock Units.
- 2. These units will be converted into shares of common stock upon separation from service, death, disability, or certain specified events, all as defined in such plan.
- 3. These units will be converted into shares of common stock upon separation from service, death, disability, or certain specified events, all as defined in such plan.

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

** Signature of Reporting Person Date

05/21/2013

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.