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* BOOTH DANIEL J					2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI]									tionship of R all applicabl Director Officer (gi	e)	erson((s) to Issuer 10% Ow Other (s	
(Last) (First) (Middle) 200 INTERNATIONAL CIRCLE					3. Date of Earliest Transaction (Month/Day/Year) 12/31/2013								_ ×	below) Chief Operating			below) Officer	
SUITE 3500					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
(Street) HUNT VALL	EY MD	2	1030											Form filed	d by More t	than O	ne Reportin	g Person
(City)	(State	(2	Zip)															
		Т	able I - Non	-Derivati	ive S	ecuritie	s Acc	quired, D	isp	osed o	f, or B	enefic	ially Ow	ned				
Date				2. Transacti Date (Month/Day/		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispo		4. Secur Dispose	rities Acquired (A) or ed Of (D) (Instr. 3, 4 a) or 4 and 5)	5. Amount Securities Beneficially Following F Transaction	/ Owned Reported	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				(111311.4)	
	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	rcise (Month/Day/Year) if tive	3A. Deemed Execution Date, if any (Month/Day/Year)	Code (I	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)			and Amo ies Unde ive Secu		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	s Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A) Date Expiration Date Title		Title		Amount or Number of Shares		Transaction(s) (Instr. 4)						
Restricted Stock Units	(1)	12/31/2013		А		49,491		(1)		(1)	Comr Sto		49,491	\$0	49,49	1	D	
Restricted Stock Units	(2)	01/01/2014		А		28,281		(2)		(2)	Comr		28,281	\$0	77,77	2	D	

Explanation of Responses:

- 1. Represents grant of Restricted Stock Units subject to three-year ratable time-based vesting (1/3 per year) on December 31, 2014, 2015 and 2016 subject to continued employment on the vesting date.
- 2. Represents grant of Restricted Stock Units subject to three-year cliff vesting on December 31, 2016 subject to continued employment on the vesting date.

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

** Signature of Reporting Person Date

01/23/2014

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.