FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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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*  KORMAN BERNARD J				<u>ON</u>	2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [ OHI ]								5. Relationship of Reporting (Check all applicable) X Director Officer (give title			Person(s) to Issuer  10% Owner  Other (specify			
(Last) (First) (Middle) 200 INTERNATIONAL CIRCLE					3. Date of Earliest Transaction (Month/Day/Year) 08/18/2014								below)			below)			
SUITE 3500					4. If <i>A</i>	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)														Form file	d by Mor	e than C	ne Reporti	na Person	
HUNT VALLE	Y MD	21	030												,			.5	
(City)	(State)	(Zi	o)																
		Та	ble I - No	n-Dei	rivativ	e S	ecuritie	s Acc	uired,	Dis	osed of,	or Bene	ficially (	Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date,					es Acquired (A) or Of (D) (Instr. 3, 4 and 5)		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				,msu. 4)	
Common Stock 08/18				8/2014	3/2014		Α		332(1)	Α	\$37.7	609,418		D					
Common Stock												11,624		I		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 or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any C			ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exercition Day/		7. Title and Securities L Derivative S (Instr. 3 and	Inderlying Security 4)	8. Price of Derivative Security (Instr. 5)	9. Numb derivati Securiti Benefic Owned Followin Reporte Transac (Instr. 4)	ve es ially ng d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V (A		(A)	(D)	Date Exerci	sable	Expiration Date	Title	or Number of Share	s					

## Explanation of Responses:

1. Grant of stock for payment of Director's quarterly compensation.

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

08/18/2014

\*\* 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).