FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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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* FRANKE THOMAS F					2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI]									. 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) 02/18/2015									below)	ive uue	belo		
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	21	030										Form file	d by More	than One Repo	rting Person		
(City)	(State)	(Zi	p)															
		Та	ble I - Nor	n-Deri	vative \$	Securit	ies Acq	uired, l	Disp	osed of,	or Be	enefi	cially Ow	ned				
Da			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (I or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code V		(A (D	() or ()	Price	(Instr. 3 and 4)			(instr. 4)	
Common Stock 02/				02/18	2/18/2015			Α		308(1)	08 ⁽¹⁾ A		\$40.61	65,243		D		
Common Stock														47,1	82	I	Owned By Family Limited Liability Company Of Which The 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) 2. Conversi or Exerci Price of Derivativ Security		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date,		ransaction Code (Instr	Deriv Secu Acqu or Di (D) (I	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Da (Month/Day/Y		7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4)		derlying curity)	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	Ownersi Form: Direct (Dor Indirect) (I) (Instr.	Beneficial) Ownership ct (Instr. 4)	
					Code V	(A)	(A) (D)		Date Exercisable		Title Amount or Number of Shares		or Number	(Instr. 4)				

Explanation of Responses

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

/s/ Thomas H. Peterson. Attorney-in-Fact 02/19/2015

** 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.

 $^{^{\}star}$ 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).