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 (Last) (First) (Middle) 200 INTERNATIONAL CIRCLE | | | | | | Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI] Date of Earliest Transaction (Month/Day/Year) 03/31/2015 | | | | | | | | eporting Person(s) to Issuer 10% O ve title Other (below) ef Operating Officer | | | |
|--|---|-----------------------|---|--------------|--|---|-------|--|--|--|--|----------------------------------|---|---|---------------------|---|---|
| SUITE 3500 | | | | [| 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Indi | Individual or Joint/Group Filing (Check Applicat X Form filed by One Reporting Person | | | | |
| (Street) HUNT VALL (City) | EY MD | | 21030 Zip) | | | | | | | | | | Form filed | d by More | than O | ne Reportin | g Person |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date (Month/ | | | | | saction ZA. Deemed Execution Date, if any (Month/Day/Year) | | Date, | 3. Transac Code (In 8) | | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 | | | 5. Amount Securities Beneficially Following I Transaction (Instr. 3 and | / Owned Reported n(s) | Form: | irect (I) | 7. Nature of Indirect Beneficial Ownership (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 | cise (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Yea | 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 of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficia Owned Following Reported Transacti | e s ally g | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | Code | ie V | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | ioii(a) | | |
| Restricted Stock Units | (1) | 03/31/2015 | | А | | 26,473 ⁽¹⁾ | | (1) | | (1) | Common Stock | 26,473 | \$40.57 | 57,20 |)1 | D | |

Explanation of Responses:

1. Represents grant of Restricted Stock Units subject to cliff vesting on December 31, 2017 and subject to continued employment on the vesting date and certain exceptions for qualifying termination of employment.

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