FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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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 (Last) (First) (Middle)					2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI] 3. Date of Earliest Transaction (Month/Day/Year)										ationship of Reporting k all applicable) Director Officer (give title below)		Person(s) to Issuer 10% Owner Other (specify below)		
200 INTERNATIONAL CIRCLE				08/18/2015															
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)														^	Form filed by One Reporting Person Form filed by More than One Reporting Person				
HUNT VALLE	Y MD	21	030																
(City)	(State)	(Zi	p)		-														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
in this or documy (mount)			2. Transaction Date (Month/Day/Year)		Exe	. Deemed ecution D iny onth/Day/	ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 au				Beneficially Ow Following Repo		6. Own Form: I or India (Instr. 4	Direct (D) rect (I) 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code V		Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(mstr. 4)	
Common Stock				08/1	08/18/2015				Α		339 ⁽¹⁾ A		Α	\$36.84	65,927			D	
Common Stock															47,1	82		ı	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)	tle of 2. 3. Transaction 3A. Deemed execution Date Execution Date		ate, T	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date I Expirati (Month/	on Da	sable and 7. Title and Ar Securities Un Derivative Sec (Instr. 3 and 4		derlying curity I)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code \	,	(A) (D)		Date Exercisable		Expiration Date	Title	or Number of Shares		(mou. 4				

Explanation of Responses:

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

/s/ Thomas H. Peterson, 08/20/2015 Attorney-in-Fact

** Signature of Reporting Person

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.

^{*} 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).