FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPRO	/AL					
	OMB Number:	3235-0287					
	Estimated average burden						
l	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 • HILL BARBARA B							2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) 200 INTERNA	OHI] 3. Date of Earliest Transaction (Month/Day/Year) 08/18/2015									1	Officer (give title below)		Other (sp below)		pecify						
SUITE 3500						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) HUNT VALLE	Y MD	21	030												Form file	d by More	than Or	ne Reportin	g Person		
(City)	(State)	(Zi	o)																		
		Та	ble I - Non	ı-Deri	vativ	e Se	curitie	s Acqı	uired, [Disp	osed of,	or	Benefi	cially Ov	/ned						
1. Title of Security (Instr. 3) 2. Trans Date (Month/I						ear)	2A. Deemed Execution Date, if any (Month/Day/Year)				4. Securities Acquired (A) on Disposed Of (D) (Instr. 3, 4 a				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)		
										v	Amount		(A) or (D)	Price	(Instr. 3 and 4)				(111501.4)		
Common Stock 08/1									A		339 ⁽¹⁾ A		\$36.84	9,564			D				
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)	3A. Deemed Execution Da if any (Month/Day/Y	Code (Instr.			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Ye		e Sec ear) Der		itle and A urities Un vative Se tr. 3 and 4	derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions	illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
Endough Co.	Code V (A) (D) Date Exerc					Date Exercisa		Expiration Date	Title	•	Amount or Number of Shares		(Instr. 4)								

1. Grant of stock for payment of Directors' quarterly compensation.

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

08/20/2015

** Signature of Reporting Person

Date

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.