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							

ı	Check this box if no longer subject to
ı	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

Name and Address of Reporting Person* Bernfield Craig M					2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI]										ationship of R all applicab Director	le)	erson(s) to Issuer 10% Ov Other (s	·
(Last) (First) (Middle) 200 INTERNATIONAL CIRCLE							Earliest T	ransactio	n (Month	n/Day/	Year)		Officer (give title below)		below)		респу		
SUITE 3500					4. If A	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 O	ne Reportin	g Person
(City)	(State)	(Zi _l	o)																
		Та	ble I - Nor	ı-Deri	vativ	e Se	curitie	s Acqı	uired, [Disp	osed of,	or l	Benefi	cially Ow	ned				
Date				Fransaction te onth/Day/Year)		2A. Deem Executior if any (Month/Da	n Date,	3. Transaction Code (Instr 8)		4. Securities Acquired (A) o 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)	
									Code	v	Amount		(A) or (D)	Price	(Instr. 3 and 4)				(
Common Stock 05/1						6			Α	382 ⁽¹⁾ A		\$32.76	235,498		D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Security (Instr. 3) or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		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 Amo Securities Unde Derivative Secur (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
Explanation of Res				C	ode	v	Date Expiration				Amount or Number of Shares	(Instr. 4)		ion(s)					

nation of Responses:

1. Grant of stock as payment of quarterly Director's Fees

/s/ Thomas H. Peterson, Attorney-in-Fact ** Signature of Reporting Person

05/17/2016 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.