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*  LOWENTHAL EDWARD					2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [ OHI ]									tionship of R all applicabl Director Officer (q	e)	erson(	(s) to Issuer  10% Ow Other (s		
(Last) (First) (Middle) 200 INTERNATIONAL CIRCLE					3. Date of Earliest Transaction (Month/Day/Year) 11/16/2016									below)			below)		
SUITE 3500					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person					
(Street) HUNT VALLEY MD 21030													Form filed	d by More t	than C	ne Reportin	g Person		
(City)	(State	) (Z	ľip)																
		Т	able I - Non	-Derivati	ve S	ecuritie	s Acc	uired, C	)isp	osed o	f, or Ber	nefici	ally Ow	ned					
Date				2. Transacti Date (Month/Day/		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr.		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and			5. Amount Securities Beneficially Following I	y Owned or I		lirect (I)	7. Nature of Indirect Beneficial Ownership		
									v	Amount	(A) (D)	or	Price	(Instr. 3 and				(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	(Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	Code (I	Transaction 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)		lying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	i	Amount or Number of Shares		Transaction(s) (Instr. 4)				
Deferred Stock Units	(1)	11/16/2016		А		433 <sup>(2)</sup>		(3)		(3)	Commo Stock		433	\$28.89	6,663	3	D		

## **Explanation of Responses**

- 1. These units represent the grant of deferred stock units to the reporting person and convert into shares of common stock on a 1 for 1 basis. If the participant so elects, dividends will also be converted into Deferred Stock Units
- 2. Grant of stock, elected to be taken as deferred stock units, for payment of Director's quarterly compensation.
- 3. These units will be converted into shares of common stock upon separation from service, death, disability, or certain specified events, all as defined in such plan.

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

\*\* Signature of Reporting Person Date

11/17/2016

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.