SEC Form 4

## 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 <sup>*</sup> HILL BARBARA B					2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [ OHI]								all applicat	ole)	10% Owner			
(Last) (First) (Middle) 200 INTERNATIONAL CIRCLE					3. Date of Earliest Transaction (Month/Day/Year) 02/16/2017								Officer (g below)	give title		Other (specify below)		
SUITE 3500					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) HUNT VALLEY MD 21030												Form filed by More than One Reporting Person						
(City)	(State)	(Zij	p)															
		Та	ble I - Non	n-Deri	vative Se	curities Acq	uired, D	Disp	osed of,	or E	Benefi	cially Ov	/ned					
Date					/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)				4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			Securities Beneficial Following	Beneficially Owned Following Reported		ship rect (D) ct (I)	7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount		(A) or (D)	Price	<ul> <li>Transaction(s) (Instr. 3 and 4)</li> </ul>				(Instr. 4)		
Common Stock 02/1				6/2017		Α		401		Α	\$31.19	17,9	17,942					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities)																		
			l. Fransaction Code (Instr. 3)	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 Under Derivative Secur (Instr. 3 and 4)			derlying curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported	e Ov s Fo lly Dir or J (l)	rm: ect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					

Date Exercisable

(D)

Expiration Date

Title

Explanation of Responses:

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

Amount

or Number of Shares

\*\* Signature of Reporting Person

02/21/2017 Date

(Instr. 4)

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).

Code v (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.