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*					2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI]							1 1 1 1	tionship of R all applicabl Director	le)		10% Ov		
(Last) (First) (Middle) 200 INTERNATIONAL CIRCLE				3. Date of Earliest Transaction (Month/Day/Year) 04/01/2015								Officer (gi below)	ive title		Other (s pelow)	pecity		
SUITE 3500					4. If Amendment, Date of Original Filed (Month/Day/Year) 04/03/2015								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		. 0) Person		
(City)	(State)	(Zi	p)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Tran Date (Month					Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (In 8)			es Acquired (A) or Of (D) (Instr. 3, 4 ar			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. 3 and				(Instr. 4)	
							Code	v	Amount	(A) (D)) or)	Price	(instr. 5 and	d 4)				
Common Stoc	k			04/01	1/2015		Code A	v	Amount 13,866 ^{(*}	(D)) or) A	Price \$40.57	13,8		D			
Common Stoc	k			Deriva	tive Sec	urities Acqui s, warrants, d	A red, Di	spos	13,866 ⁽⁾ sed of, or	(D) 1) Bene) A eficia	\$40.57 Ily Owne	13,8		D			

		Price of Derivative Security	(Month/Day/Year)			Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				(Instr. 3 and 4)		(Instr. 5)	Owned Following Reported	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Transaction(s) (Instr. 4)				
	Explanation of Po	enoneoe.														

Explanation of Responses:

1. Due to clerical error, the original filing erroneously double counted 2,025 shares, which has now been corrected.

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

02/21/2017

** 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.