FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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П	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* PERKS BEN W (Last) (First) (Middle) 200 INTERNATIONAL CIRCLE						2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI] 3. Date of Earliest Transaction (Month/Day/Year) 02/16/2017									tionship of F all applicab Director Officer (g below)	10% ive title Oth		10% Ov Other (s below)	
SUITE 3500 (Street) HUNT VALLEY MD 21030					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 Form filed by More than One Reporting Person					
(City)	(State)	(Zi	p)																
		Та	ble I - Nor	n-Deri	vativ	e Se	curitie	s Acqı	uired, [Disp	osed of,	or B	Benefi	cially Ow	ned				
Date							2A. Deem Execution if any (Month/Da	n Date,			4. Securiti Disposed					ities icially Owned ving Reported		nership Direct (D) irect (I) 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	Amount		(A) or (D)	Price	(Instr. 3 an				(111341.4)				
Common Stock 02/1						7			А		401 ⁽¹⁾ A		\$31.19	22,9	22,928		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Security (Instr. 3)	tive Conversion Date Execution Date, by (Instr. 3) or Exercise (Month/Day/Year) if any			· c	I. Fransac Code (In 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)		te	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 Transacti	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
Evaluation of Pos				C					Date Exercisa		Expiration Date	Title		Amount or Number of Shares		(Instr. 4)			

Explanation of Responses:

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

/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.