FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-028								
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

1. Name and Address of Reporting Person* PERKS BEN W (Last) (First) (Middle) 303 INTERNATIONAL CIRCLE							2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI] 3. Date of Earliest Transaction (Month/Day/Year) 05/16/2017									Reporting Person(le) give title		s) to Issuer 10% Ov Other (s below)	
SUITE 200 (Street)						4. If Amendment, Date of Original Filed (Month/Day/Year)									I. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
HUNT VALLEY	MD	21	030																
(City)	(State)	(Zi _l	p)																
		Та	ble I - Nor	n-Deri	vativ	e Se	curitie	s Acqı	uired, [Disp	osed of,	or E	3enefi	cially Ow	/ned				
Date							2A. Deem Execution if any (Month/Da	Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				5. Amount of Securities Beneficially Owned Following Reported		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	6/201	7			Α		376 ⁽¹⁾ A		\$33.23	23,3	23,304		D						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Security (Instr. 3) or Pri	ivative Conversion Date Execution Date, urity (Instr. 3) or Exercise (Month/Day/Year) if any			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)		7. Title and Amo Securities Unde 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)		
Explanation of Respo				C	Code	v	Date Expiration Date Title					Amount or Number of Shares	(Instr. 4)		On(s)				

anation of Responses:

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

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

** Signature of Reporting Person Date

05/18/2017

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.