FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
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Estimated average burden								
hours per response:	0.5							

1	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*  PICKETT C TAYLOR  (Last) (First) (Middle)  303 INTERNATIONAL CIRCLE SUITE 200  (Street)  HUNT VALLEY MD 21030					OM OHI 3. Dat 07/08	2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [ OHI ]  3. Date of Earliest Transaction (Month/Day/Year) 07/08/2019  4. If Amendment, Date of Original Filed (Month/Day/Year)									tionship of Reporting Person(s all applicable)  Director  Officer (give title below)  Chief Executive (  ridual or Joint/Group Filing (Chief Form filed by One Reporting Form filed by More than One			10% Ow Other (s below) Officer	pecify
(City)	(State)	(Zi	p)																
		Та	ble I - Nor	n-Deri	ivative	Se	curitie	s Acqı	uired, I	Disp	osed of,	or E	Benefic	ially Ov	/ned				
Date				nsaction n/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			or 4 and 5)	Following			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount		(A) or (D)	Price	(Instr. 3 and				(1130.4)
Common Stock				07/0	/08/2019				S		5,500(1)		D	\$38	227,	933		D	
Common Stock											8,2	200		I	Family Trust				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, Tr			Transact Code (Ins	ransaction Deriving Security (Instr. Acquire or Discourse)			6. Date E Expiration (Month/I	on Da			derlying curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
Explanation of Res	Code V (A) (D) Date Expiration Date Title					Amount or Number of Shares	Transac (Instr. 4)		ion(s)										

1. The sales reported in this Form 4 were effected pursuant to a rule 10b5-1 trading plan adopted by the reporting person on February 28, 2019.

/s/ Thomas H. Peterson, 07/09/2019 Attorney-in-Fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).