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 *  KLOOSTERMAN HAROLD J  (Last) (First) (Middle)  9690 DEERECO ROAD  SUITE 100						2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [ OHI ]  3. Date of Earliest Transaction (Month/Day/Year) 01/07/2008  4. If Amendment, Date of Original Filed (Month/Day/Year)								[ (Check	all applicab Director Officer (g below)  idual or Join Form file	ive title  it/Group Fi d by One I	Person(s) to Issuer  10% Owner  Other (specify below)  siling (Check Applicable Line)  Reporting Person		able Line)
(Street) TIMONIUM	MD		093												i om me	u by More	tilali O	ne Reportin	g r erson
(City)	(State)	(Zip			<u> </u>														
Table I - Non-Deriv  1. Title of Security (Instr. 3)  2. Trans Date (Month/						ed Date,	3. Transaction Code (Instr.		4. Securiti Disposed	es Acq	quired (A	) or	5. Amount Securities Beneficially Following	y Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	int (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 01/0				01/0	7/2008				Α		1,500(1)		Α	\$15.04	71,4	71,481		D	
Common Stock															10,8	327		I	Shares held directly by spouse
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date		Code (Instr.			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date I Expirati (Month/	on Da		7. Title and Amou Securities Under Derivative Securi (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio	Ownership Form: Ily Direct (D) or Indirect (I) (Instr. 4	Ownership Form:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
Explanation of Re					Code	v	(A)	(D)	Date Exercisable		Expiration Date	OI N		Amount or Number of Shares		(Instr. 4)			

1. Represents grant of restricted stock to the reporting person vesting over time.

## Remarks:

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

01/08/2008

\*\* 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.

 $<sup>^{\</sup>star}$  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).