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 Addr STEPHENS (Last) 303 INTERNA	2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [ OHI ] 3. Date of Earliest Transaction (Month/Day/Year) 06/28/2017									all applicab Director Officer (g below)	10% Owner		Owner (specify				
SUITE 200					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				
(Street) HUNT VALLE	Y MD	21	1030											Form file	d by More 1	than One Repor	ting Person
(City)	(State)	(Zi	ip)														
		Та	ible I - N	lon-Der	ivative	e Sec	urities A	Acqu	uired	, Dis	posed of,	or Benef	icially Ow	ned			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				ay/Year) Exec				3. Transaction Code (Instr. 8)		4. Securities of (D) (Instr. 3	or Disposed	5. Amoun Securities Beneficial Following	lly Owned Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Co	ode	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			(msu.4)
COMMON STOCK 06/28/2						/2017			s		23,000	D S	34.5759(1	68,978		D	
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Day/Year) Execution Date, if any (Month/Day/Year) Transaction Code (Instr. 8) Derivati Securiti Acquire or Disp			5. Number Derivative Securities Acquired ( or Dispose (D) (Instr. 3 and 5)	Expiration Date (Month/Day/Year) Securities Under Derivative Secur (Instr. 3 and 4)				nderlying ecurity 4)	lying Derivative Security (Instr. 5)		of Ownersh Form: Direct (D) or Indirect (I) (Instr.	Beneficial Ownership t (Instr. 4)		
					Code	v	(A) (D	))	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		

## **Explanation of Responses:**

1. Share price reflects the weighted average price of shares sold.

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

\*\* Signature of Reporting Person Date

06/29/2017

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

- $^{\star}$  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.