Edgar Filing: OMEGA HEALTHCARE INVESTORS INC - Form 4/A

OMEGA HEALTHCARE INVESTORS INC

Form 4/A

February 23, 2007

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average

OMB APPROVAL

burden hours per

response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * PICKETT C TAYLOR			2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI]				ng	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 9690 DEERECO ROAD, SUITE 100			3. Date of Earliest Transaction (Month/Day/Year) 02/09/2007						_X_ Director 10% Owner _X_ Officer (give title Other (specify below) Chief Executive Officer		
TIMONIUM, MD 21093				4. If Amendment, Date Original Filed(Month/Day/Year) 02/13/2007					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
	, ,				n-D			_	ired, Disposed of		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) Execution Date, i any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price			of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
OHI Common Stock	02/09/2007			S		12,000	D	\$ 18.5	398,942	D	
OHI Common Stock	02/09/2007			S		100	D	\$ 18.51	398,842	D	
OHI Common Stock	02/09/2007			S		200	D	\$ 18.52	398,642	D	
OHI Common	02/09/2007			S		100	D	\$ 18.53	398,542	D	

Edgar Filing: OMEGA HEALTHCARE INVESTORS INC - Form 4/A

Stock						
OHI Common Stock	02/09/2007	S	300	D	\$ 18.54 398,242	D
OHI Common Stock	02/09/2007	S	400	D	\$ 397,842 18.55	D
OHI Common Stock	02/09/2007	S	100	D	\$ 18.57 397,742	D

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

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 control number.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transacti Code (Instr. 8)	orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	.		Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
.r. g	Director	10% Owner	Officer	Other			
PICKETT C TAYLOR							
9690 DEERECO ROAD	X		Chief Executive Officer				
SUITE 100	Λ		Chief Executive Officer				
TIMONIUM, MD 21093							

Reporting Owners 2

Edgar Filing: OMEGA HEALTHCARE INVESTORS INC - Form 4/A

Signatures

Thomas Peterson, Attorney-In-Fact 02/23/2007

**Signature of Reporting Person Date

Explanation of Responses:

- * 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Signatures 3