KLOOSTERMAN HAROLD J

Form 4 May 20, 2009

FORM 4

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

OMB Number:

3235-0287 January 31,

0.5

Check this box if no longer

subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Expires: 2005 Estimated average

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Form 5 obligations may continue.

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).

(Last)

(City)

Common

Common

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person * KLOOSTERMAN HAROLD J

(Middle)

2. Issuer Name and Ticker or Trading Symbol

OMEGA HEALTHCARE INVESTORS INC [OHI]

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

200 INTERNATIONAL

(First)

3. Date of Earliest Transaction

(Month/Day/Year) 05/18/2009

X_ Director 10% Owner Officer (give title Other (specify below)

CIRCLE, SUITE 3500 (Street)

(State)

4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

HUNT VALLLEY, MD 21030

1.Title of	2. Transaction Date	2A. Deemed	3.	4. Se	
Security	(Month/Day/Year)	Execution Date, if	TransactionAcc		
(Instr. 3)		any	Code	Disp	
		(Month/Day/Year)	(Instr. 8)	(Insti	

(Zip)

ecurities uired (A) or osed of (D) tr. 3, 4 and 5)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 5. Amount of Securities Beneficially (D) or Indirect (I) Owned (Instr. 4) **Following** Reported

I

6. Ownership 7. Nature of Form: Direct Indirect Beneficial Ownership (Instr. 4)

(A) Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

63,040 D

Stock

Held Directly By Spouse

Shares

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

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SEC 1474 (9-02)

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number.

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.		Nun	ıber	6. Date Exerc		7. Title and A		
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac				Expiration D		Underlying S		Derivativ
Security	or Exercise		any	Code		eriva		(Month/Day/	Year)	(Instr. 3 and	4)	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	1	ecurit						(Instr. 5)
	Derivative				A	cquir	ed					
	Security				(A	A) or						
					D	ispos	ed					
					of	(D)						
					(I	nstr. :	3, 4,					
					ar	id 5)						
											Amount	
											or	
								Date	Expiration	Title	Number	
								Exercisable	Date	11110	of	
				Code	V (A)	(D)				Shares	
Deferred										C		
Stock	<u>(1)</u>	05/18/2009		A	4	42		(2)	(2)	Common	442	\$ 14.1
Units		02/10/2007			•			_	_	Stock	. 12	Ψ 1 1,1
Omts												

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
KLOOSTERMAN HAROLD J 200 INTERNATIONAL CIRCLE SUITE 3500 HUNT VALLLEY, MD 21030	X						

Signatures

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

05/20/2009

**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).
- Deferred Stock Plan: These units represent the grant of restricted stock to the reporting person vesting over time or upon other specified (1) events and convert into shares of common stock on a 1 for 1 basis. If the participant so elects, dividends will also be converted into Deferred Stock Units.
- (2) Deferred Stock Plan: These units will be converted into shares of common stock upon separation from service, death, disability, or certain specified events, all as defined in such plan.

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.

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