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Form 4											
	October 28, 2005 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL			
	UNITEL	SIAIES			, D.C. 20		NGE C	OMM/15510N	OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 o Form 5 obligation	6. Filed pu	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934							Expires: January 31 2005 Estimated average burden hours per response 0.5		
may cont See Instru 1(b).	inue. Section 17			•	ding Com Compan	· ·		1935 or Section 0	1		
(Print or Type F	Responses)										
PICKETT C TAYLOR Sy				2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
				 Date of Earliest Transaction (Month/Day/Year) 10/26/2005 				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Chief Executive Officer			
	(Street) 4. If Amer Filed(Mon				ate Original r)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
TIMONIUM	1, MD 21093							Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative S	Securi	ities Acqu	uired, Disposed of	, or Beneficiall	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
a				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	10/26/2005			М	20,000	А	\$ 3.17	629,318	D		
Common Stock	10/26/2005			F	10,414 (1)	D	\$ 12.59	618,904	D		

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

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (Right to Buy)	\$ 3.17	10/26/2005		М	20,000	10/25/2003 <u>(2)</u>	10/25/2011	Common Stock	20,0

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
PICKETT C TAYLOR 9690 DEERECO ROAD SUITE 100 TIMONIUM, MD 21093	Х		Chief Executive Officer				
Signatures							
Thomas Peterson, Attorney-In-Fact		10/28/2005					
**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).

Represents the aggregate of 5,035 shares held by the person for more than six months prior to the exercise of the option and delivered as(1) payment of the exercise price and 5,379 shares otherwise issuable pursuant to the exercise of the option withheld as payment of the reporting person's tax liability in connection with the option.

(2) These options were part of a previously reported grant of 320,000 shares on October 25, 2001 by the Issuer to the Reporting Person of which one-half vested on October 25, 2003 with the balance vesting in equal monthly amounts through October 25, 2005.

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.