Edgar Filing: KLOOSTERMAN HAROLD J - Form 4

KLOOSTER Form 4 January 04, 2	2006	JD J								
FORM	1 /								OMB AF	PROVAL
FORM 4 UNITED STATES SE				ECURITIES AND EXCHANGE CO Washington, D.C. 20549				OMMISSION	OMB Number:	3235-0287
Check th if no long subject to Section 1 Form 4 o	STATE 6.	EMENT O	IGES IN BENEFICIAL OWNERSHIP OF SECURITIES				Expires: January 3 200 Estimated average burden hours per response 0			
Form 5 obligation may cont <i>See</i> Instru 1(b). (Print or Type I	ns Section 1 inue. action	7(a) of the	Public Ut		ling Con	npany	y Act of	e Act of 1934, 1935 or Section 0	1	
(I fint of Type I	(csponses)									
KLOOSTERMAN HAROLD J Symbol OMEGA			r Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer				
				GA HEALTHCARE STORS INC [OHI]				(Check all applicable)		
			of Earliest Transaction Day/Year) 2006			X_ Director 10% Owner Officer (give title below) Other (specify below)				
				endment, Date Original nth/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
BASALT, C	CO 81621							Form filed by M Person	lore than One Re	porting
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	med	3. Transactio Code (Instr. 8) Code V	4. Securi on(A) or D (Instr. 3,	ties Adispose 4 and (A) or	cquired d 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
OHI Common Stock	01/04/2006			А	1,000 (1)	A	\$ 12.59 (2)	69,477 <u>(3)</u>	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.

 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
KLOOSTERMAN HAROLD J 0777 OLD HERRON ROAD BOX 4360 BASALT, CO 81621	Х						
Signatures							
Thomas Peterson, Attorney-In-Fact	0	1/04/2006					
<u>**</u> 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).
- (1) Represents grant of restricted stock to the reporting person vesting over time.
- (2) Granted for no consideration
- (3) The reporting person also indirectly owns 13,269 shares, which are held directly by spouse.

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.