Edgar Filing: OMEGA HEALTHCARE INVESTORS INC - Form 4

OMEGA HE Form 4 May 22, 2000	ALTHCARE INVESTO	ORS INC								
FORM	1								PPROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Check this box if no longer									January 31, 2005	
subject to Section 10	subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated a burden hou	average irs per		
Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b).	Filed pursuant to sinue. Section 17(a) of th		ility Hold	ling Con	ipany	Act of	f 1935 or Section	response n	0.5	
(Print or Type R	Responses)									
FRANKE THOMAS F Symbol OMEG.			er Name and Ticker or Trading GA HEALTHCARE STORS INC [OHI]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Month/			te of Earliest Transaction th/Day/Year) 8/2006				_X_ Director10% Owner Officer (give titleOther (specify below)below)			
(Street) 4. If Amer			nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check			
MARSHAL	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person									
(City)	(State) (Zip)	Table	e I - Non-D	erivative	Securi	ities Acc	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. D (Month/Day/Year) Execu any (Mont		3. Transactic Code (Instr. 8)		ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
OHI Common Stock	05/18/2006		P	5,000	(D) A	\$ 11.7	34,187 <u>(1)</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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	Title and nount of derlying curities str. 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						
Treporting of their funite (frauloso	Director	10% Owner	Officer	Other			
FRANKE THOMAS F 410 NORTH EAGEL STREET MARSHALL, MI 49068	Х						
Signatures							
Thomas Peterson, Attorney-In-Fact	0	5/22/2006					
**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).
- The reporting person also indirectly owns 47,141 shares, which are owned by a family limited liability company of which Mr. Franke is a (1) member.

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.