SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* STEPHENSON ROBERT O						2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
					ОНІ]								Director Officer (g	ive title	Oti	er (specify	ý	
(Last) (First) (Middle) 303 INTERNATIONAL CIRCLE					3. Date of Earliest Transaction (Month/Day/Year) 06/20/2019							 ^	below) below) Chief Financial Officer					
SUITE 200					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv X	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street)													Form filed by More than One Reporting Person					
HUNT VALLE	JNT VALLEY MD 21030																	
(City)	(State)	(Zi	p)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date					saction /Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				5. Amount Securities Beneficiall Following	y Owned Reported	6. Ownership Form: Direct or Indirect (I) (Instr. 4)	D) Indire Benef Owne	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount		(A) or (D)	Price	 Transaction(s) (Instr. 3 and 4) 			(insu	(Instr. 4)	
Common Stock 06/2					0/2019		S		10,000) (1)	D	\$ <mark>38</mark>	223,326		D			
	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 Da if any (Month/Day/N	Code (Inst		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expiration Date Securitie (Month/Day/Year) Derivativ			tle and An urities Und vative Sec r. 3 and 4)	derlying surity	8. Price of Derivative Security (Instr. 5) Beneficial Owned Following Reported		Owner Form: Direct or Indi	hip of Ind Bene D) Own ect (Instr	Nature ndirect eficial nership tr. 4)		

Date Exercisable

(D)

Expiration Date

Title

Explanation of Responses:

1. The sales reported in this Form 4 were effected pursuant to a rule 10b5-1 trading plan adopted by the reporting person on March 18, 2019.

Code

V (A)

<u>/s/ Thomas H. Peterson,</u> <u>Attorney-in-Fact</u>

** Signature of Reporting Person

Amount

Number of Shares Transaction(s) (Instr. 4)

06/21/2019

Date

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

* 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.

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 Number.