F	ORM	5
-	Check this box if no	longer

 Check this box if no longer
subject to Section 16. Form 4
or Form 5 obligations may
continue. See Instruction 1(b).
Form 3 Holdings Reported

Form 4 Transactions

Reported

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

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ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 Per INSOFT STEVEN J	2. Issuer Name and Ticker or Trading Symbol OMEGA HEALTHCARE INVESTORS INC [OHI]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X_Officer (give title below) Other (specify below)				
(Last) (First) 303 INTERNATIONAL CIRC		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2021					Chief Corp Development Officer			
(Street) HUNT VALLEY, MD 21030	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Reporting (check applicable line) _X_ Form Filed by One Reporting Person				
(City) (State)	(Zip)	Form Filed by More than One Reporting Person Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transaction Code (Instr. 8)	· ·			5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	12/27/2021		G	50,000	А	\$ 0	50,000	Ι	Family Trust (1)	
Common Stock	12/27/2021		G	50,000	D	\$0	130,929	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 5EC 2270 (9-02) 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 (a.g., puts, calls, warrants, ontions, convertible securities)

(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Numb	ber	and Expirati	on Date	Amou	unt of	Derivative	of	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Derivative	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			Secur	rities	(Instr. 5)	Securities	Derivative	Ownership
	Derivative				Secur	ities			(Instr	. 3 and		Beneficially	Security:	(Instr. 4)
	Security				Acqui	ired			4)				Direct (D)	
					(A) or							End of	or Indirect	
					Dispo								(I)	
					of (D)							Fiscal Year	(Instr. 4)	
					(Instr.	· · · ·						(Instr. 4)		
					4, and	15)								
										Amount				
							Date	Expiration		or				
							Exercisable		Title	Number				
							LACICISADIC	Date		of				
					(A)	(D)				Shares				

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
INSOFT STEVEN J 303 INTERNATIONAL CIRCLE SUITE 200 HUNT VALLEY, MD 21030			Chief Corp Development Officer						

Signatures

/s/ Thomas H. Peterson, Attorney-in-Fact	02/11/2022

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) The shares are held in a trust for the benefit of the reporting person's spouse and children.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.