#### OMEGA HEALTHCARE INVESTORS INC

Form 4 March 11, 2002

# U.S. SECURITIES AND EXCHANGE COMMISSION Washington, DC 20549

FORM 4

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

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[_]	Check box if no longer subjec may continue. See Instruction		n 16.	Form 4 or Form	5 obligations
1.	Name and Address of Reporting	Person*			
P	Plavin	Stephen		D.	
(I	 _ast)	(First)		(Middle)	
7	71 Great Hills Road				
		(Street)			
S	Short Hills	NJ		07078	
(0	 City)	(State)		(Zip)	
2.	Issuer Name and Ticker or Trad	ing Symbol			
	Omega Healthcare Investors, In				
3.	IRS Identification Number of R				Joluntary)
4.	Statement for Month/Year				
	February 2002				
5.	If Amendment, Date of Original	(Month/Yea	 r)		
6.	Relationship of Reporting Pers (Check all applicable)	on to Issue	 r		
	<pre>[X] Director [_] Officer (give title below</pre>	)		10% Owner Other (specify	below)

7. Individual or Joint/Group Filing (Check applicable line)

[X] Form filed by one Reports		rson				
Table I Non-Derivativ	===					
	2. Transaction Date (mm/dd/yy)	3.	4. Securities Ac	(A) or		
1.		Transaction Code	(Instr. 3, 4			
Title of Security (Instr. 3)		Code V	intourie	or (D)	Price	
Common Stock - Rights Offering	2/20/02	P	1,895	A	\$2.92	
					:======	
Reminder: Report on a separate line owned directly or indirect		of securities	s beneficially			
If the Form is filed by more than $4 \text{ (b) (v)}$ .	n one Reporting	Person, see In	nstruction			
(Print	or Type Respons	e)	(Ove	r)		

FORM 4 (continued)

Table II -- Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

\_\_\_\_\_\_

	2. Conversion or Exercise		Trans-	or Disposed of (D) (Instr. 3, 4 and 5)				7. Title and Amount of Underlying Securities (Instr. 3 and 4)		
1. Title of	Deriv- Date	action	Code (Instr.						Amount	
Derivative Security		(Month/					Expira- tion		Number of	
(Instr. 3)	ity	Year)	Code V	(A)	(D)	cisable	Date	Title	Shares	
=======================================			:======			-=====	-======		=======	
Explanation of Responses:										

\*\*Signature of Reporting Person Date

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations.

See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

/S/ STEPHEN D. PLAVIN

March 8, 2002

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure.

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