Edgar Filing: INSOFT STEVEN J - Form 4

INSOFT ST	EVEN J										
Form 4											
December 12	2, 2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
UNITED STATES SECONTIES AND EXCHANGE COMMISSION								OMB	3235-0287		
Check this box Washington, D.C. 20549								Number:	January 31,		
if no long	ner		ECHAN					EDSUID OF	Expires: 200		
subject to STATEMENT OF CHAN Section 16.				NGES IN BENEFICIAL OWNERSHIP OF SECURITIES				EKSHIP OF	Estimated a		
									burden hours per		
Form 5	Form 5 Eiled automate to Section			16(a) of the Securities Exchange Act of				Act of 1034	response	0.5	
obligatio								1935 or Section	1		
may con	unue.			nvestment	•	· ·	•		L		
See Instr 1(b).	uction	50(11)	of the fi	livestillen	i Compan	ly me	1011740	,			
1(0).											
(Print or Type l	Responses)										
	Address of Reportir	ng Person <u>*</u>	2. Issue	er Name an	d Ticker or	Tradi	ng	5. Relationship of	Reporting Person(s) to		
INSOFT ST	TEVEN J		Symbol				Issuer				
OMEGA HEALTHCARE											
				STORS INC [OHI]			(Check	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	of Earliest T	ransaction			Director		Owner	
(Month/I							XOfficer (give titleOther (specify below) below)				
303 INTER	NATIONAL		12/11/2	2018			I	· · · · · · · · · · · · · · · · · · ·	Development (Officer	
CIRCLE, S	UITE 200							1	1		
(Street) 4. If An			4. If Am	mendment, Date Original			6. Individual or Joint/Group Filing(Check				
Filed(Mo				•				Applicable Line)			
								X Form filed by O Form filed by M			
HUNT VAI	LLEY, MD 210	30						Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tah	le I - Non-l	Derivative	Secur	ities Acau	ired, Disposed of,	or Beneficial	lv Owned	
1.Title of	2. Transaction Da	ta 24 Daan		3.			_	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year				or Dispos		· · ·	Securities	0. Ownership	Indirect	
(Instr. 3)	(any	,	Code (Instr. 3, 4 and 5)				Beneficially	Form:	Beneficial	
		(Month/E	Day/Year)	(Instr. 8)				Owned	Direct (D)	Ownership	
								Following Reported	or Indirect	(Instr. 4)	
						(A)		Transaction(s)	(I) (Instr. 4)		
				Code V	A	or	D::	(Instr. 3 and 4)	(, , , , , , , , , , , , , , , , ,		
Common				Code V	Amount 25,000	(D)	Price \$				
Stock	12/11/2018			S	<u>(1)</u>	D	, ^ф 37.248	315,720	D		
Stock					<u> </u>		57.240				

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (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	Unde Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	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	12/1	2/2018						

**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) The sales reported in this Form 4 were effected pursuant to a rule 10b5-1 trading plan adopted by the reporting person on November 26, 2018.

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.