

**Report of Organizational Actions  
Affecting Basis of Securities**

OMB No. 1545-0123

► See separate instructions.

**Part I Reporting Issuer**

<b>1</b> Issuer's name		<b>2</b> Issuer's employer identification number (EIN)	
Omega Healthcare Investors Inc, Inc.		38-3041398	
<b>3</b> Name of contact for additional information	<b>4</b> Telephone No. of contact	<b>5</b> Email address of contact	
Robert O. Stephenson	410-427-1700	Compliance@OmegaHealthcare.com	
<b>6</b> Number and street (or P.O. box if mail is not delivered to street address) of contact		<b>7</b> City, town, or post office, state, and ZIP code of contact	
303 International Circle, Suite 200		Hunt Valley, MD 21030	
<b>8</b> Date of action		<b>9</b> Classification and description	
February 15, 2019		Common Stock	
<b>10</b> CUSIP number	<b>11</b> Serial number(s)	<b>12</b> Ticker symbol	<b>13</b> Account number(s)
681396100		OHI	

**Part II Organizational Action** Attach additional statements if needed. See back of form for additional questions.

**14** Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action ► Omega Healthcare Investors, Inc. made cash distributions on February 15, 2019, May 15, 2019, August 15, 2019, and November 15, 2019 to each of its common stock shareholders of record on January 31, 2019, April 30, 2019, July 31, 2019 and October 31, 2019 respectively.

**15** Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis ► A portion of each cash distribution paid by Omega Healthcare Investors, Inc. during the calendar year 2019 is not taxable as a dividend under Section 301 (c)(1), but is applied against basis under Section 301 (c)(2) ("return of capital"). The return of capital on a per share basis is:

Distribution Date	Dividends Paid Per Share	Non-Taxable Distribution (Return of Capital)
2/15/19	\$0.66	\$0.147268
5/15/19	\$0.66	\$0.147268
8/15/19	\$0.66	\$0.147268
11/15/19	\$0.67	\$0.149499

As such, each shareholder's tax basis in the common stock of Omega Healthcare Investors, Inc. is decreased by the lesser of the amount of the shareholder's share of the return of the capital distributions or the shareholder's tax basis in such common stock.

**16** Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► The change in basis was determined by comparing the cash distributions made by Omega Healthcare Investors, Inc. during the 2019 calendar year to the amount of Omega Healthcare Investors, Inc's 2019 current earnings and profits determined under Sections 312 and 316. Total cash distributions to the common shares made during the calendar year were \$564,126,548 and the 2019 current earnings and profits, attributable to the common shares, were \$438,251,142 resulting in a total return of capital for the tax year 2019 attributable to all shareholders of the common stock in the amount of \$125,875,405

Accordingly, the return of capital percentage is 22.313328% (\$125,875,405/\$564,126,548).

**Part II** **Organizational Action** (continued)

**17** List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ Sections 301, 312, and 316.

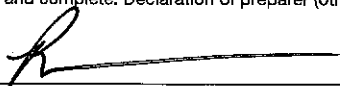
**18** Can any resulting loss be recognized? ▶ No loss can be recognized as a result of the cash distributions to the common shareholders.

**19** Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ The reporting tax year is the 2019 calendar year.

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature ▶



Date ▶

11/16/2020

Print your name ▶ Robert O. Stephenson

Title ▶ Chief Financial Officer

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

Nafis Chowdhury

Preparer's signature

Nafis Chowdhury

Date

11/16/20

Check ☐ if  
self-employed

PTIN

P01671765

Firm's name ▶ Ernst & Young U.S. LLP

Firm's EIN ▶

34-6565596

Firm's address ▶ 1775 Tysons Blvd, Tysons, VA 22102

Phone no.

703-747-1000

Send Form 9937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054

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303 International Circle, Suite 200		Hunt Valley, MD 21030	
<b>8</b> Date of action		<b>9</b> Classification and description	
May 15, 2019		Common Stock	
<b>10</b> CUSIP number	<b>11</b> Serial number(s)	<b>12</b> Ticker symbol	<b>13</b> Account number(s)
681396100		OHI	

**Part II Organizational Action** Attach additional statements if needed. See back of form for additional questions.

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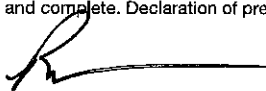
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Signature ►



Date ►

11/16/2020

Print your name ► **Robert O. Stephenson**

Title ► **Chief Financial Officer**

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

**Nafis Chowdhury**

Preparer's signature

*Nafis Chowdhury*

Date

**11/16/20**

Check ☐ if  
self-employed

PTIN

**P01671765**

Firm's name ► **Ernst & Young U.S. LLP**

Firm's EIN ► **34-6565596**

Firm's address ► **1775 Tysons Blvd, Tysons, VA 22102**

Phone no. **703-747-1000**

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054

# Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-0123

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303 International Circle, Suite 200		Hunt Valley, MD 21030	
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August 15, 2019		Common Stock	
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681396100		OHI	

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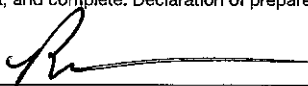
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Date ►

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Print your name ► **Robert O. Stephenson**

Title ► **Chief Financial Officer**

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**Nafis Chowdhury**

Preparer's signature

*Nafis Chowdhury*

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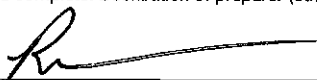
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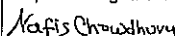
Date ►

11/18/2020Print your name ► **Robert O. Stephenson**Title ► **Chief Financial Officer****Paid Preparer Use Only**

Print/Type preparer's name

**Nafis Chowdhury**

Preparer's signature



Date

11/16/20Check ☐ if self-employed

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