FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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	PROVAL
OMP Number:	2225 020

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

					01 56	:cuon 30(n)	or trie inv	esuner	it Com	pany Act of 19	140						
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol OCWEN FINANCIAL CORP [OCN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>LINN W MICHAEL</u>											X	Director		10% Owne		ner	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 11/05/2007					\dashv	Officer (g below)	Other (spo	ecify				
1661 WORTHINGTON ROAD SUITE 100				11/03/	2007												
(Street) WEST P	ALM F	L	33409		4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Indi Line)	•						
(City)	(5	State)	(Zip)														
		7	able I - Non-	-Deriva	tive S	Securitie	s Acqu	ired,	Disp	osed of, o	r Bene	ficially (Owned				
Dat			2. Transac Date (Month/Da	/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) 8)		n Date,	Transaction Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock			11/05/2	2007			A		5,077(1)	A	\$0	34,574		D			
			Table II - D							sed of, or onvertible			wned				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execution Date		Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year) Se Un De		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio	y Or For Or	o. wnership orm: irect (D) r Indirect (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	11(3)		
Stock Options	\$6.57	11/05/2007		F			40,810 ⁽²⁾	01/3	1/2005	01/31/2015	Stock Options	40,810	\$6.57	0		D	
Stock Options	\$6.1	11/05/2007		F			11,736 ⁽²⁾	01/3	1/2005	01/31/2016	Stock Options	11,736	\$6.1	0		D	
Stock Options	\$8.04	11/05/2007		A		40,810 ⁽³⁾		11/0	5/2007	01/31/2015	Stock Options	40,810	\$8.04	40,810		D	
Stock Options	\$9.64	11/05/2007		A		11,736 ⁽³⁾		11/0	5/2007	01/31/2016	Stock Options	11,736	\$9.64	11,736		D	

Explanation of Responses:

- 1. Due to Internal Revenue Code Section 409A, this restricted stock was granted as partial consideration for the employee's forfeiture and cancellation of stock option awards affected by 409A to replace the loss of the
- 2. Due to Internal Revenue Code Section 409A, these stock options were forfeited and cancelled. Replacement options with exercise prices equal to the fair market value of the stock on the original grant date will be reissued and will follow the vesting schedule of the original award.
- 3. Due to Internal Revenue Code Section 409A, these stock options were reissued with exercise prices equal to the fair market value of the stock on the original grant date and will follow the vesting schedule of the original award. They replace the options which were forfeited and cancelled due to 409A; they vest immediately.

/s/ Paul A. Koches, Attorney-in-11/07/2007 Fact

** Signature of Reporting Person 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.