

(Print or Type Responses)

1. Name and Address of Reporting Person * CROWTHER BRUCE K			2. Issuer Name and Ticker or Trading Symbol NEOGENOMICS INC [NEO]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> 10% Owner <input type="checkbox"/> Other (specify below)				
(Last) (First) (Middle) 12701 COMMONWEALTH DRIVE SUITE 9			3. Date of Earliest Transaction (Month/Day/Year) 05/01/2020							
(Street) FORT MYERS, FL 33913			4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person				
(City) (State) (Zip)			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 any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	Amount	(A) or (D)	Price		
Common Stock		05/01/2020		M		10,000	A	\$ 4.78	46,185	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 form are not required to respond unless the form displays a currently valid OMB control number.


SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
Stock Option (Right to Buy)	\$ 4.78	05/01/2020		M			10,000	05/06/2016 ⁽¹⁾	05/06/2020	Common Stock	10,000.00	\$ 0	0	D	
Stock Option (Right to Buy)	\$ 9.11							07/28/2017 ⁽²⁾	07/28/2021	Common Stock	8,333.00		8,333	D	
Stock Option (Right to Buy)	\$ 7.27							05/25/2018 ⁽³⁾	05/25/2022	Common Stock	10,000.00		10,000	D	
Stock Options (Right to Buy)	\$ 11.60							06/01/2019	06/01/2023	Common Stock	3,017.00		3,017	D	
Stock Options (Right to Buy)	\$ 22.52							06/06/2020	06/06/2026	Common Stock	4,269.00		4,269	D	

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
CROWTHER BRUCE K 12701 COMMONWEALTH DRIVE SUITE 9 FORT MYERS, FL 33913	X			

Signatures

/s/ Bruce K. Crowther	05/04/2020
 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) On May 6, 2015 Mr. Crowther was granted 10,000 stock options. The options vest ratably over the first three anniversary dates of the grant date.
- (2) On July 28, 2016, Mr. Crowther was granted 8,333 stock options. The options vest ratably over the first three anniversary dates of the grant date.
- (3) On May 25, 2017, Mr. Crowther was granted 10,000 stock options. The options vest ratably over the first three anniversary dates of the grant date.

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.