FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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SEC 1474 (9-02)

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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)												
1. Name and Address of Reporting Person* SHOVLIN ROBERT J.	2. Issuer Name and Ticker or Trading Symbol NEOGENOMICS INC [NEO]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
12701 COMMONWEALTH DRIVI	3. Date of Earliest Transaction (Month/Day/Year) 05/25/2021						X Officer (give title below) Other (specify below) President, Clinical Services					
(Street) FORT MYERS, FL 33913	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _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)		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Transaction(s)	Ownership Form:	Beneficial		
	(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)			
Common Stock	05/25/2021		M		96,167	A	\$ 8.03	249,914	D			
Common Stock	05/25/2021		M		16,724	A	\$ 19.6	266,638	D			
Common Stock	05/25/2021		M		14,067	A	\$ 28.33	280,705	D			
Common Stock	05/25/2021		S		130,604	D	\$ 39.31	150,101	D			
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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)	Conversion	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code		of D Secu Acq or D of (I	urities uired (A) Disposed D) tr. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Underlying (Instr. 3 and		Securities Derivative Security (Instr. 5)		Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect (I)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (Right to Buy)	\$ 53.17							(1)	03/02/2028	Common Stock	38,688.00		38,688	D	
Stock Option (Right to Buy)	\$ 8.03	05/25/2021		M			96,167	(2)	02/26/2023	Common Stock	96,167.00	\$ 0	0	D	
Stock Option (Right to Buy)	\$ 19.60	05/25/2021		M			16,724	(3)	03/01/2024	Common Stock	16,724.00	\$ 0	33,449	D	
Stock Option (Right to Buy)	\$ 28.33	05/25/2021		М			14,067	(4)	03/02/2027	Common Stock	14,067.00	\$ 0	42,204	D	

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		

SHOVLIN ROBERT J.			
12701 COMMONWEALTH DRIVE SUITE 9		President, Clinical Services	
FORT MYERS, FL 33913			

Signatures

/s/ Robert J. Shovlin	05/27/2021
**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 March 2, 2021, Mr. Shovlin was granted 38,688 stock options. These options vest ratably over the first four anniversary dates of the grant date
- (2) On February 26, 2018, Mr. Shovlin was granted 288,500 stock options. These options vested ratably over the first three anniversary dates of the grant date
- (3) On March 1, 2019, Mr. Shovlin was granted 66,897 stock options. These options vest ratably over the first four anniversary dates of the grant date.
- (4) On March 2, 2020, Mr. Shovlin was granted 56,271 stock options. These options vest ratably over the first four 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.