FORM 4

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

OMB APPROVAL
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Estimated average burden
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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 *			2. Issuer Name and Ticker or Trading Symbol						5. Re	5. Relationship of Reporting Person(s) to Issuer						
BRODIE STEVEN G.				NEOGENOMICS INC [NEO]							(Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 12701 COMMONWEALTH DRIVE SUITE 9				3. Date of Earliest Transaction (Month/Day/Year) 05/04/2015												
(Street)				1	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)				
FORT MYERS, FL US 33913											_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									d		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea	Execution		Day/Year)		r. 8)	(A) c	or Disposed of r. 3, 4 and 5) (A) or unt (D)	(D) Owne Trans	Owned Followin Transaction(s) (Instr. 3 and 4)		i (Ownership of Form: Be	eneficial wnership	
Common Stock					Code V		V Allio	unt (D) 1		4,482		D				
Reminder:	Report on a	separate line for each		- Deriva	ntive	Securitie	s Acc	Pé in di quired,	ersons w this forr splays a Disposed	ho respond on are not requirently value, of, or Benefic	uired to r lid OMB o	espond (control n	unless the		ed SEC 14	74 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)		4. Transaction Code				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and		Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)		Beneficial	
				Code	V	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (Right to Buy)	\$ 1.48							05/16	5/2012 ⁽¹⁾	05/16/2016	Common Stock	0		50,000	D	
Stock Option (Right to Buy)	\$ 1.69							04/12	2/2012 ⁽²⁾	04/12/2017	Common Stock	0		10,000	D	
Stock Option (Right to Buy)	\$ 3.76							04/16	5/2014 <mark>(3)</mark>	04/16/2018	Common Stock	0		10,000	D	
Stock Option (Right to	\$ 3.45							03/05	5/2015 ⁽⁴⁾	03/05/2019	Common Stock	0		20,000	D	
Buy) Stock																

Describer Comment Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
BRODIE STEVEN G. 12701 COMMONWEALTH DRIVE SUITE 9 FORT MYERS, FL US 33913			Chief Scientific Officer				

Signatures

/s/ Steven G. Brodie	05/06/2015
**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 16, 2011 Dr. Brodie was granted 50,000 stock options. The options vest ratably over the first four anniversary dates of the grant date.
- (2) On April 12, 2012 Dr. Brodie was granted 10,000 stock options. There was immediate vesting of 2,500 shares and then 2,500 shares will vest on the next three anniversary dates of the grant date.
- (3) On April 16, 2013 Dr. Brodie was granted 10,000 stock options. These options will vest ratably over the next three anniversary dates of the grant date.
- (4) On March 5, 2014 Dr. Brodie was granted 20,000 stock options. The options will vest ratably over the next three anniversary dates of the grant date.
- (5) On May 4, 2015 Dr. Brodie was granted 120,000 stock options. The options vest ratably over the next 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.