FORM 4

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

OMB APPROVAL
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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 Ty	pe Response	es)																	
1. Name and Address of Reporting Person * ALBITAR MAHER				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								
(Last) (First) (Middle) 12701 COMMONWEALTH DRIVE SUITE 9				3. Date of Earliest Transaction (Month/Day/Year) 09/09/2016							X Officer (give title below) Other (specify below) Chief Medical Officer								
(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 Acqui							ired, Disposed of, or Beneficially Owned								
3		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		Co (In	(Instr. 8)		4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		of (D))		6. Ownership Form: Direct (D) or Indirect	Benefic Owners	ect cial ship		
Common	Stock							Code	V	Amoun	t (D)	Price	63,49	02			(Instr. 4)	Shares owned Albitar Oncold Define Benefi Plan	l by r ogy ed
Common	Stock												165,3	375			D		
Common Stock 09			09/09/2016				S		9,075	D	\$ 8.31	156,3	156,300			D			
Common	Stock		09/12/2016					S		51,000	D	\$ 8.21	105,3	800			D		
Reminder:	Report on a	separate line for each	h class of securities Table II -	Derivati	ive S	Securit	ies A	i c Acquirec	Person thi displ	ons who s form ays a c	are not i urrently f, or Ben	require valid (eficially	ed to r OMB o	espond control n	of informa unless the number.		ined SEC	C 1474 (9-	-02)
Security	Conversion	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	ttion)	5. Nur of Deriva Securi Acqui (A) or Dispo of (D) (Instr. 4, and	mber ative ities irred ssed	aber 6. Date I Expiration (Month/seed ed ed 3.3, 5)		Day/Year) Expiration			7. Title and Amount of Underlying Securities (Instr. 3 and 4) Amount or Title Number of Shares		8. Price of Derivative Security (Instr. 5)		Owner Form of Deriva Securi Direct or Indi	rship of In Ben Own (Ins (D) rect	neficial
Stock Option (Right to Buy)	\$ 7.15			Code	V	(A)	(D)	04/20	/201′	7(1) 04/	20/2021	Com	mon	200,000		200,00) D		

Reporting Owners

	Reporting Owner Name / Address		Relationships					
			10% Owner	Officer	Other			
	ALBITAR MAHER			G1: 03: 1: 1 0 00				
	12701 COMMONWEALTH DRIVE SUITE 9 FORT MYERS, FL 33913			Chief Medical Officer				

Signatures

/s/ Maher Albitar	09/13/2016
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 April 20, 2016, Dr. Albitar was granted 200,000 stock options. These 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.