FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL
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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).

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

1. Name and Address of Reporting Person* HIGGINS THOMAS T (Last) (First) (Middle) C/O NEUROMETRIX, INC. 1000 WINTER STREET (Street) WALTHAM MA 02451					3. D 08/	Issuer Name and Ticker or Trading Symbol NeuroMetrix, Inc. [NURO] Inc. [(C	S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) Senior Vice President, CFO 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting			
(City) (State) (Zip)														Person		Sorting		
		Tabl	e I - Non	n-Deriv	ative	Sec	curitie	s Acq	uired,	Disp	posed o	f, or	Bene	eficia	lly Ov	vned		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,		Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			nd Sed Bed Ow	Amount of curities neficially vned Following ported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) or D)	Price	Tra	nnsaction(s) str. 3 and 4)		(Instr. 4)			
Common Stock 08/31/									P		1,400)	A	\$1.4	41	70,309	D	
		Та	ble II - D								sed of, onvertib				/ Own	ed		
1. Title of Derivative Security (Instr. 3)	rivative curity Conversion Date Execution or Exercise (Month/Day/Year) if any			Date,	Code (Instr.		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount	8. Price Derivativ Security (Instr. 5)	ve derivative Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

/s/ Thomas T. Higgins

08/31/2016

** 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.