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NEON SYSTEMS INC Form 5 May 15, 2001

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OMB APPROVAL _____

FORM 5

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION WASHINGTON, DC 20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

[] CHECK BOX IF NO LONGER SUBJECT TO SECTION 16. FORM 4 OR FORM 5 OBLIGATIONS MAY CONTINUE. SEE INSTRUCTION 1(b).

[] FORM 3 HOLDINGS REPORTED

[] FORM 4 TRANSACTIONS REPORTED

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 6. Rel NEON Systems, Inc. (NESY) Pate Don _____ _____ (Last) (First) (Middle) 3. IRS or Social Security 4. Statement for Number of Reporting Month/Year Person (Voluntary) Fiscal year ended 14100 Southwest Frwy, Suite 500

_____ (Street)

Sugar Land TX 77478 -----(City) (State) (Zip)

3/31/01 _____

5. If Amendment, Date of Original Month/Year)

7. I

TABLE I -- NON-DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF, OR BENEFICIA

(Instr. 3)

Date (Month/ (Instr. Day/ 8) Year)

Code

1. Title of Security 2. Trans- 3. Transac- 4. Securities Acquired (A) 5. Amount of action tion or Disposed of (D)

Date Code (Instr. 3, 4 and 5) (Instr. 3, 4 and 5)

curities E cially Own end of Iss Fiscal Yea _____ (Instr. 3

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			Amount	(A) 01 (D)		Price		
*If the form is filed by	more than one	reporting per	son, see	Instruction	on 4(b)	(▽).		
ARE 2 FORM 5 (CONTINUED)	NOT REQUIRED TO) RESPOND UNLE						
	(e.g.	., PUTS, CALLS	, WARRAN	rs, OPTIONS	, CONVI	ERTIBLE SE	CURITIES)	
1. Title of Derivative Security (Instr. 3)	sion or	action	action Code	Deriva Securi 8) quired Dispos	ative ties Add (A) of sed of a. 3, 4,	cisab c- Expir r Date (D) (Mont	cisable and Expiration	
						Date	-	
					(D)	- Exer- cisable		
Common Stock	\$6.3125	10/24/00						

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	of Year (Instr. 4)		Ownership of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)		Nature of Indirect Beneficial Ownership (Instr. 4)	
	D					
Exp	planation of Respo					
				-	ncentive Plan which ves 1,875 share increments	
Vic	ntentional misstallations. lee 18 U.S.C. 1001			cts cons	titute Federal Criminal	/s/ Don Pa
2	ee 18 U.S.C. 1001	anu 15) υ.δ.C. /δII(a).			**Signatur

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 ${\tt OMB}$ number.