HEALTHWAREHOUSE.COM, INC.
Reported by
SIEGEL NED L

FORM 4
(Statement of Changes in Beneficial Ownership)

Filed 04/09/15 for the Period Ending 04/07/15

Address 7107 INDUSTRIAL ROAD
FLORENCE, KY 41042
Telephone (513) 618-0911
CIK 0000754813
Symbol HEWA
SIC Code 5912 - Drug Stores and Proprietary Stores
Industry Retail (Drugs)
Sector Services
Fiscal Year 12/31
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

1. Name and Address of Reporting Person *  
SIEGEL NED L  
C/O HEALTHWAREHOUSE.COM, INC., 7107 INDUSTRIAL ROAD  
FLORENCE, KY 41042

2. Issuer Name and Ticker or Trading Symbol  
HealthWarehouse.com, Inc. [ HEWA ]

3. Date of Earliest Transaction (MM/DD/YYYY)  
4/7/2015

4. If Amendment, Date Original Filed (MM/DD/YYYY)  

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  
__ X Director  
_____ 10% Owner  
_____ Officer (give title below)  
_____ Other (specify below)

6. Individual or Joint/Group Filing (Check Applicable Line)  
__ X Form filed by One Reporting Person  
___ Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Trans. Date</th>
<th>Deemed Execution Date, if any</th>
<th>Trans. Code</th>
<th>Securities Acquired (A) or Disposed of (D)</th>
<th>Amount of Securities Beneficially Owned Following Reported Transaction(s)</th>
<th>Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>4/7/2015</td>
<td>A</td>
<td>V</td>
<td>(A) or (D)</td>
<td>196876</td>
<td>D</td>
</tr>
</tbody>
</table>

Option to Purchase Common Stock

<table>
<thead>
<tr>
<th>Code</th>
<th>Option to Purchase Common Stock</th>
<th>Trans. Date</th>
<th>Date Exercisable</th>
<th>Expiration Date</th>
<th>Title</th>
<th>Amount or Number of Shares</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>$0.09</td>
<td>4/7/2015</td>
<td>4/7/2015</td>
<td>4/7/2025</td>
<td>Common Stock</td>
<td>34063 $0 34063 D</td>
</tr>
<tr>
<td>A</td>
<td>$0.12</td>
<td>10/23/2014</td>
<td>10/23/2024</td>
<td>Common Stock</td>
<td>942827 942827 D</td>
<td></td>
</tr>
<tr>
<td>A</td>
<td>$0.16</td>
<td>11/30/2014</td>
<td>8/27/2024</td>
<td>Common Stock</td>
<td>115000 115000 D</td>
<td></td>
</tr>
<tr>
<td>A</td>
<td>$0.30</td>
<td>11/30/2014</td>
<td>11/30/2023</td>
<td>Common Stock</td>
<td>135000 135000 D</td>
<td></td>
</tr>
<tr>
<td>A</td>
<td>$1.45</td>
<td>11/30/2014</td>
<td>(1)</td>
<td>Common Stock</td>
<td>100000 100000 D</td>
<td></td>
</tr>
</tbody>
</table>

Explanation of Responses:
(1) The options vest in three equal installments beginning on June 19, 2014.

Reporting Owners

Reporting Owner Name / Address  
SIEGEL NED L  
C/O HEALTHWAREHOUSE.COM, INC.  
X
Signatures

/s/Ned L. Siegel               4/9/2015

** 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).


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 control number.