HEALTHWAREHOUSE.COM, INC.
Reported by
SIEGEL NED L

FORM 4
(Statement of Changes in Beneficial Ownership)

Filed 08/10/15 for the Period Ending 07/10/15

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)
   7/10/2015

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

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

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

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Trans. Date</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 of Security: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Options to Purchase Common Stock</td>
<td>7/10/2015</td>
<td>A</td>
<td>20407</td>
<td>Common Stock</td>
<td>20407</td>
<td>D</td>
</tr>
</tbody>
</table>

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

<table>
<thead>
<tr>
<th>Title of Derivate Security (Instr. 3)</th>
<th>Conversion or Exercise Price of Derivate Security</th>
<th>Trans. Date</th>
<th>Trans. Code (Instr. 8)</th>
<th>Deemed Execution Date, if any</th>
<th>Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)</th>
<th>Date Exercisable</th>
<th>Expiration Date</th>
<th>Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)</th>
<th>Price of Derivative Security (Instr. 5)</th>
<th>Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 6)</th>
<th>Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Options to Purchase Common Stock</td>
<td>$.15</td>
<td>7/10/2015</td>
<td>A</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Common Stock</td>
<td>20407</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Explanation of Responses:

Reporting Owners

Reporting Owner Name / Address
SIEGEL NED L
C/O HEALTHWAREHOUSE.COM, INC., 7107 INDUSTRIAL ROAD
FLORENCE, KY 41042

Relationships
X Director

Signature
/s/Ned L. Siegel
8/7/2015

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.