

HealthWarehouse.com, Inc.
Form 4
July 29, 2016

FORM 4

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

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
SELIGA DANIEL JOSEPH

(Last) (First) (Middle)

**C/O HEALTHWAREHOUSE.COM,
INC., 7107 INDUSTRIAL ROAD**

(Street)

FLORENCE, KY 41042

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol

HealthWarehouse.com, Inc. [HEWA]

3. Date of Earliest Transaction (Month/Day/Year)

07/27/2016

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)
COO and CFO

6. Individual or Joint/Group Filing(Check Applicable Line)
 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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				(A) or (D)	Price					
Common Stock	07/27/2016		X	V	150,000	A	\$ 0.12	150,000	D	
Common Stock	07/27/2016		X	V	150,000	A	\$ 0.12	300,000	D	
Common Stock	07/27/2016		X	V	75,000	A	\$ 0.12	375,000	D	
Common Stock	07/27/2016		X	V	500,000	A	\$ 0.1	875,000	D	
Common Stock	07/27/2016		X	V	250,000	A	\$ 0.12	1,125,000	D	

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Common Stock	07/27/2016	S ⁽¹⁾	58,064	D	\$ 0.31	1,066,936	D
Common Stock	07/27/2016	S ⁽¹⁾	58,064	D	\$ 0.31	1,008,872	D
Common Stock	07/27/2016	S ⁽¹⁾	29,032	D	\$ 0.31	979,840	D
Common Stock	07/27/2016	S ⁽¹⁾	161,290	D	\$ 0.31	818,550	D
Common Stock	07/27/2016	S ⁽¹⁾	96,774	D	\$ 0.31	721,776	D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Warrants	\$ 0.12	07/27/2016		S ⁽¹⁾	150,000	09/30/2013	09/30/2018	Common Stock	150,000
Warrants	\$ 0.12	07/27/2016		S ⁽¹⁾	150,000	03/28/2014	03/28/2019	Common Stock	150,000
Warrants	\$ 0.12	07/27/2016		S ⁽¹⁾	75,000	04/29/2014	04/29/2019	Common Stock	75,000
Warrants	\$ 0.1	07/27/2016		S ⁽¹⁾	500,000	03/01/2015	03/01/2020	Common Stock	500,000
Warrants	\$ 0.12	07/27/2016		S ⁽¹⁾	250,000	11/11/2015	11/11/2020	Common Stock	250,000

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

SELIGA DANIEL JOSEPH
C/O HEALTHWAREHOUSE.COM, INC.
7107 INDUSTRIAL ROAD
FLORENCE, KY 41042

COO
and
CFO

Signatures

/s/ Daniel J.
Seliga

07/29/2016

__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 July 27, 2016, the Reporting Person exercised warrants on a cashless basis and the issuer withheld a portion of the warrants to pay the exercise price.

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.