

HealthWarehouse.com, Inc.
Form 3
August 19, 2016

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2015
Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF 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)

<p>1. Name and Address of Reporting Person *</p> <p>Â Rx Investor Value Corp</p> <p>(Last) (First) (Middle)</p> <p>5027 MADISON ROAD</p> <p>(Street)</p> <p>CINCINNATI, OH 45227</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>07/23/2016</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>HealthWarehouse.com, Inc. [HEWA]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner</p> <p><input type="checkbox"/> Officer <input checked="" type="checkbox"/> Other</p> <p>(give title below) (specify below)</p> <p>Member of a 10% Owner Group</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person</p> <p><input type="checkbox"/> Form filed by More than One Reporting Person</p>
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Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Shares	1,100 ⁽¹⁾	D	Â

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

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

Shares (I)
(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Rx Investor Value Corp 5027 MADISON ROAD CINCINNATI, OH 45227	Â	Â	Â	Member of a 10% Owner Group

Signatures

/s/ Jeffrey T. Holtmeier, as President of RX Investor Value Corp. 08/19/2016

__Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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) The Reporting Person ("RP") is filing this report because the RP is a member of a Section 13D group, as disclosed in the Schedule 13D report originally filed with the SEC on August 2, 2016 filed on behalf of the RP and the other members of such group. As of the date of the event requiring this statement, the group beneficially owned an aggregate 19,062,600 shares and consisted of the following: RX Investor Value Corp., Jeffrey T. Holtmeier, GENext, LLC, Robert Smyjunas, Cormag Holdings, Ltd., Mark Douglas Scott, Osgar Holdings, Ltd., Hong Penner, Bruce Bedrick, Patrick Delaney, Stephen J. Weiss, SCW Holdings, LLP, Lynn Peppel, Cape Bear Partners, LLC, Arthur W. Liberati, LFLP, Ltd., Patricia Corona, Estate of Wayne Corona, Vincent Rinaldi, and Brian Ross. The RP disclaims beneficial ownership of the shares held by the other members of such Section 13(d) group except to the extent of the RP's pecuniary interest therein.

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.