Backus John C Form 3 August 04, 2011

# FORM 3

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

OMB APPROVAL

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response...

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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

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

(Print or Type Responses)

1. Name and Address of Reporting

Person * A Backus John C			Statement (Month/Day/Year)		HealthWarehouse.com, Inc. [HEWA]			
(Last)	(First)	(Middle)	08/03/2011		4. Relationshi Person(s) to Is	p of Reporting	5. If Amendment, Date Original Filed(Month/Day/Year)	
11911 FREE SUITE 1080		IVE,			(Check all applicable)			
	(Street)				_X_ Director Officer (give title below	Othe	Filing(Check Applicable Line)	
RESTON,Â	VAÂ 2019	90					Person Form filed by More than One Reporting Person	
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned					
1.Title of Secur (Instr. 4)	of Security			2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Sto	ock			1,956,941		I	By New Atlantic Venture Fund III, L.P. (1) (2)	
Common Stock				72,708		I	By New Atlantic Entrepreneur Fund III, L.P. (1) (3)	
Common Sto	ock			21,947		I	By NAV Managers Fund, LLC (1)	
Common Sto	ock			2,029,649		I	By New Atlantic Fund III, LLC (1) (5)	

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)

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

### **Reporting Owners**

Relationships Reporting Owner Name / Address

Director 10% Owner Officer Other

Backus John C

ÂΧ ÂX Â 11911 FREEDOM DRIVE, SUITE 1080 RESTON, VAÂ 20190

# **Signatures**

/s/ John C. 08/04/2011 Backus

\*\*Signature of Date Reporting Person

### **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).

On August 3, 2011, Mr. Backus was appointed as a director of Healthwarehouse.com, Inc. Mr. Backus is a managing member of New Atlantic Fund III, LLC (the "General Partner"), which is the general partner of New Atlantic Venture Fund III, L.P., a Delaware limited partnership ("Fund III") and New Atlantic Entrepreneur Fund III, a Delaware limited partnership ("Entrepreneur Fund"). In addition, Mr.

- (1) Backus, as trustee of the John C. Backus, Jr. Irrevocable Trust, is a member of NAV Managers Fund, LLC, a Delaware limited liability company ("NAV LLC"), an affiliate of Fund III and Entrepreneur Fund III. Mr. Backus disclaims beneficial ownership of all shares held by NAV, except to the extent of his pecuniary interest therein. This report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for Section 16 or other any other purpose.
- (2) Represents shares owned directly by Fund III.
- (3) Represents shares owned directly by Entrepreneur Fund.
- (4) Represents shares owned directly by NAV LLC.
- (5) Represents shares owned indirectly by the General Partner.

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.

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