| Rackwise, In Form 5 | | | | | | | | | | |
|---|--|--|--|--------------|--|--------------------|--|---|---|--|
| April 07, 201 FORN | _ | | | | | | | OMB AI | PPROVAL | |
| | JRITIES AN | RITIES AND EXCHANGE COMMISSION | | | | OMB Number: | 3235-0362 | | | |
| Check this box if no longer subject | | | Washington, D.C. 20549 | | | | Expires: | January 31 | | |
| to Section Form 4 or 5 obligation may contin | 16. Form ANN ons nue. | | TATEMENT OF CHANGES IN BENER OWNERSHIP OF SECURITIES | | | | FICIAL | Estimated a burden hou response | rs per | |
| See Instruct 1(b). Form 3 Ho Reported Form 4 Transaction Reported | Filed pu | rsuant to Section (a) of the Public 30(h) of the | | ng Compa | ny A | ct of 1 | | n | | |
| 1. Name and Address of Reporting Person <u>*</u> Gottbetter & Partners LLP | | | 2. Issuer Name and Ticker or Trading Symbol Rackwise, Inc. [RACK] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) | Middle) 3. State | | | | | | k all applicable) | | |
| | | | nth/Day/Year) 1/2013 | | | _ | DirectorX_ 10% Owner Officer (give title Other (specify | | | |
| 488 MADIS FLOOR | SON AVENUE, | | | | | b | elow) | below) | | |
| | | | Amendment, Date Original 6. Indi Month/Day/Year) | | | . Individual or Jo | al or Joint/Group Reporting | | | |
| | | | | | | | (checl | k applicable line) | • | |
| NEW YOR | K, NY 10022 | 2 | | | | _ | X_ Form Filed by (Form Filed by N erson | | | |
| (City) | (State) | (Zip) Ta | ble I - Non-Der | vivative Sec | urities | s Acqui | red, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | | on Date, if Transaction Code | | 4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5) (A) | | 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common | 07/11/2012 | â | I (1)(2) | Amount | or (D) | Price \$ | (Instr. 3 and 4) | D | â | |
| | 07/11/2013 | Â | J(1)(2) | 57,778 | A | 2.25 | 57,778 | D | Â | |

securities beneficially owned directly or indirectly.

Persons who respond to the collection of informationSEC 2270contained in this form are not required to respond unless(9-02)the form displays a currently valid OMB control number.(9-02)

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

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| 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) | | ate | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. O B O E I S F I S (I |
|---|---|---|---|---|---|---------------------|--------------------|-------|--|---|---|
| | | | | | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Gottbetter & Partners LLP 488 MADISON AVENUE, 12TH FLOOR NEW YORK, NY 10022 | Â | ÂX | Â | Â | | |
| Signatures | | | | | | |
| /s/ Adam S. Gottbetter, Managing Partner | 04/04/2 | 2014 | | | | |

**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) The Reporting Person acquired securities of the Issuer in consideration of the conversion of \$130,000 in legal fees.
- (2) The reported securities reflect a 1:300 reverse stock split effected by the Issuer on August 2, 2013.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.