SEC Form 4	
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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	umber: 3235-0287							
Estimated average burden								
hours per response	: 0.5							

	tion 1(b).	unue. See		Filed	l pursua or Se	ant to S ection 3	Section 30(h) o	16(a) If the li	of the S nvestme	ecurit nt Co	ies Exchang mpany Act o	e Act of f 1940	1934		hours	s per re	esponse:	0.5
1. Name and Address of Reporting Person* <u>Mekhail Adel</u>				2. Issuer Name and Ticker or Trading Symbol Prestige Consumer Healthcare Inc. [PBH]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 660 WHITE PLAINS RD.				3. Date of Earliest Transaction (Month/Day/Year) 05/03/2023									X Officer (give title Other (spi below) below) EVP, Marketing & Sales					
(Street) TARRYTOWN NY 10591				4. If Amendment, Date of Original Filed (Month/Day/Year)								ine) X Forr Forr	,					
(City)	(5	itate) (Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	e I - No	n-Deriva	ative S	Secu	rities	Acq	uired,	, Dis	posed of	, or B	enefic	ially Ow	ned			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution Date,		3.4. SecuritieTransactionDisposed 0Code (Instr.5)8)				nd Secur Benet Owne	icially d Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) oi (D)	Price	Trans	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common	Common Stock, par value \$0.01 per share 05/03/2				2023			F		469	D	\$ <mark>6</mark> 1	.25 1	15,775		D		
		Та									osed of, o convertib				d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Executi if any	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)			and it of ies ying ive y (Instr.)	8. Price of Derivative Security (Instr. 5)		g dition(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Exercis	able	Expiration Date		Amount or Number of Shares							

Explanation of Responses:

/s/ Adel Mekhail by William P'Pool as attorney-in-fact pursuant to power of attorney 05/05/2023 dated May 14, 2019 on file

with the Commission

** Signature of Reporting Person Date

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).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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 Number.