FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Nashington | D.C. 20549 | |
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| rvasilliquui, | D.C. 20049 | |

| STATEMENT OF | CHANGES IN | BENEFICIAL | OWNERSHIP |
|---------------------|-------------------|-------------------|------------------|
| | | | |

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | | |
| hours per response | e: 0.5 | | | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* ZIER DAWN M. | | | | | 2. Issuer Name and Ticker or Trading Symbol Prestige Consumer Healthcare Inc. [PBH] | | | | | | | | (Che | 5. Relationship of Reporting (Check all applicable) X Director | | | g Person(s) to Issuer 10% Owner | |
|--|--|------------------|------------------------------|-----------------|--|--|--|------|---|-----------------------------|--------------------------------|-------------------------------------|--|---|--|--|------------------------------------|-------------|
| (Last) 660 WHI | (ITE PLA | First) NS RD. | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/02/2022 | | | | | | | | Office below | er (give title | | Other (below) | specify |
| (Street) TARRY1 | rown 1 | IY State) | 10591 (Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Ind Line) | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acqu Disposed Of (D) (In | | | | Securit Benefic Owned | Securities For Beneficially (D | | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | Code | v | Amount | ount (A) or P | | Price | Transa | ansaction(s) str. 3 and 4) | | | (111341. 4) |
| Common | Stock, pa | r value \$0.01 p | er share | 08/02/ | 2022 | | A | | 2,495(1) | I | 1 | \$ <mark>0</mark> | 9,942 | | | D | | |
| | 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) | rivative curity or Exercise Price of Derivative Security Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) | | 4. Transa Code (8) | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date Date Expiration Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) Amoun or Numbe of Title Shares | | str. | Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. The Reporting Person received 2,495 restricted stock units (equal to \$150,000 divided by the closing stock price of \$60.12 on August 2, 2022) in connection with the Issuer's director compensation program. The restricted stock units vest on the first anniversary of grant and will be settled by delivery to the Reporting Person of one share of common stock of the Issuer for each vested restricted stock unit promptly following the earliest of (i) the Reporting Person's death, (ii) the Reporting Person's separation from service or (iii) change in control.

> /s/ Dawn M. Zier by William P'Pool as attorney-in-fact pursuant to power of attorney 08/03/2022

dated May 4, 2020 on file with

the Commission

** Signature of Reporting Person

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.