Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C. 20549	
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Check this box if no longer subject	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
to Section 16. Form 4 or Form 5		
obligations may continue. See		

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

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

Name and Address of Reporting Person* Sacco Christine					2. Issuer Name and Ticker or Trading Symbol Prestige Consumer Healthcare Inc. [PBH]									(Chec	k all app Direc	tionship of Reportir all applicable) Director Officer (give title		rson(s) to Is 10% O Other (/ner
(Last) 660 WH	(Fi ITE PLAIN	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/08/2020								X	below	below) Chief Financial Officer			Specify
(Street) TARRY (City)	TOWN N		0591 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benefi	cially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,		3. 4. Secur Transaction Dispose Code (Instr. 8)		Disposed C	es Acquired (A) or Of (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	Amount	(A) (D)	Pri	ce	Transaction(s) (Instr. 3 and 4)				()				
Common Stock 05/08/				05/08/2	2020		F		1,594	D	\$5	6.11	1 24,668			D			
Common Stock 05/08/2				2020		F		656	D	\$5	6.11	24,012			D				
		Tal									osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Dat Security or Exercise (Month/Day/Year) if any			ion Date,	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)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y O F D o (!)	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	Title	Amount or Number of Shares	er						

Explanation of Responses:

/s/ Christine Sacco by William P'Pool attorney-in-fact

pursuant to power of attorney 05/12/2020

dated May 9, 2017 on file with

the Commission

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

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.

^{**} Signature of Reporting Person Date

^{*} 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).