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	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Instruc	tion 1(b).			Filed			ection 16(a) o 80(h) of the In					34			5 pci 103		0.5
Name and Address of Reporting Person* ZIER DAWN M.				2. Issuer Name and Ticker or Trading Symbol Prestige Consumer Healthcare Inc. [PBH]								Relationsh heck all ap X Dire	olicable)	,			
(Last) (First) (Middle) 660 WHITE PLAINS ROAD				3. Date of Earliest Transaction (Month/Day/Year) 05/04/2020								Offic belo	er (give title w)		Other (below)		
(Street) TARRY	FOWN NY		.0591 Zip)		4. If Ar	mendı	ment, Date of	f Original	Filed	(Month/Day/	Year)	6. Lir	ie) <mark>X</mark> Forr	or Joint/Grou In filed by On In filed by Mo In	e Repo	` rting Pers	son
,	`																
		Table	I - Non-	Deriva	tive S	ecur	rities Acq	uired,	Disp	osed of,	or Ben	efici	ally Owr	ied			
1. Title of	Security (Ins		2	Deriva 2. Transac Date (Month/Da	ction	2A. I Exec if an	Deemed cution Date,	3. Transa Code (I	ction	4. Securities Disposed Of 5)	Acquire	d (A) b	5. Am Secur Benef Owne	ount of ities icially d Following	Form:	Direct Indirect	7. Nature of Indirect Beneficial Ownership
1. Title of	Security (Inst		2	2. Transac	ction	2A. I Exec if an	Deemed cution Date,	3. Transa Code (I	ction	4. Securities Disposed Of	Acquire	d (A) b	5. Am Secur Benef Owne Repor	ount of ities icially d Following	Form: (D) or	Direct Indirect	of Indirect Beneficial
	- `		2 E (I	2. Transac	etion ay/Year)	2A. I Exec if an	Deemed cution Date,	3. Transa Code (I 8)	ction nstr.	4. Securities Disposed Of 5)	Acquired (D) (Inst	d (A) or r. 3, 4 a	5. Am Secur Benef Owne Repor Trans (Instr.	ount of ities icially d Following ted action(s)	Form: (D) or (I) (Ins	Direct Indirect	of Indirect Beneficial Ownership
	- `	value \$0.01 per	share	2. Transac Date (Month/Da	etion ay/Year) 2020 ve Sec	2A. I Exec if an (Mor	Deemed cution Date,	3. Transa Code (1 8) Code	ction nstr. V	4. Securities Disposed Of 5) Amount 907 ⁽¹⁾ sed of, of	(A) or (D) A Bene	Price	5. Am Secur Benef Owne Repor Trans (Instr.	ount of ities icially d Following ted action(s) 3 and 4)	Form: (D) or (I) (Ins	Direct Indirect tr. 4)	of Indirect Beneficial Ownership

Explanation of Responses:

Security

1. The Reporting Person received a prorated grant of 907 restricted stock units (equal to \$145,000 divided by the closing stock price of \$39.98 on May 4, 2020). The restricted stock units vest on May 4, 2021.

Date

Exercisable

(A) or Disposed

of (D) (Instr. 3, 4

and 5)

(A) (D)

> /s/ Dawn M. Zier by William P'Pool as attorney-in-fact pursuant to power of attorney 05/06/2020

dated May 4, 2020 on file with

the Commission

Title

Expiration

Date

Security (Instr. 3 and 4)

Amount Number

Shares

Following Reported

Transaction(s) (Instr. 4)

(I) (Instr. 4)

** 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).

Code

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.