FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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

	tion 1(b).			Filed	l pursua or Se	ant to S ection 3	Section 30(h) c	n 16(a) of the li	of the S ovestme	ecurit nt Co	ies Exchang mpany Act o	je Act of of 1940	1934		lioui	s per i	esponse:	0.5	
Name and Address of Reporting Person* Lombardi Ronald M.					2. Issuer Name and Ticker or Trading Symbol Prestige Consumer Healthcare Inc. [PBH]								Check all a Dir		orting Person(s) to I:				
(Last) 660 WH	,	First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/08/2020								X Oliter (give the below) Chief Executive O			below)		
(Street) TARRY	ΓOWN N	State) (.	.0591 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)								L	ine) X Foi Foi Pe	Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				tion 2A. Deemed Execution Date,			3. 4. Securitie			es Acquired (A) Of (D) (Instr. 3,		r 5. Ar and Secu Bene Own	nount of rities ficially ed Following	For (D)	Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership			
				05/00/5	/2020				Code	v	Amount	(A) or (D) Pri		(Inst	saction(s) r. 3 and 4)	L		(Instr. 4)	
	Common Stock 05/08/2020 Common Stock 05/08/2020							F F		2,441 5,933	D D	\$56 \$56		+		D D			
		Ta	ble II -								osed of, convertib				ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		if any	emed ion Date, /Day/Year)	action (Instr.	of Deriv Secu Acqu (A) o Dispo	r osed) r. 3, 4 5)	6. Date	ion Da /Day/Y	Expiration	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivativ Security (Instr. 5)		i lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		

Explanation of Responses:

/s/ Ronald M. Lombardi by William P'Pool pursuant to

power of attorney dated May 05/12/2020

8, 2017 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.