Edgar Filing: Prestige Brands Holdings, Inc. - Form 4

| Prestige Bran Form 4 July 31, 2013 | ds Holdings, Inc. | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|------------------------------------------------------------------|---------------------|-----------------------------------------------------------------------------------------------------------------------|--------------|----------|--------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-----------|--|
| OMB APPROVAL OMB APPROVAL | | | | | | | | | | | |
| | UNITEDS | STATES | | hington, | | | NGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Check this box if no longer | | | | NGES IN BENEFICIAL OWNER SECURITIES | | | | NERSHIP OF | Expires: Estimated a burden hou response | irs per | |
| Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | | |
| (Print or Type Responses) | | | | | | | | | | | |
| BYOM JOHN E Symbol Prestig | | | Symbol | ge Brands Holdings, Inc. | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | (First) (M | st) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | _X_ Director10% Owner Officer (give titleOther (specify below) below) | | | |
| (Street) 4. If Amer | | | | endment, Date Original onth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| TARRYTOWN, NY 10591 | | | | | | | | Form filed by More than One Reporting Person | | | |
| (City) | (State) (| Zip) | Table | e I - Non-Do | erivative S | Securi | ties Ac | quired, Disposed o | f, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution any | emed on Date, if | 3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or | | or)) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| Common | | | | Code V | Amount | (D) | Price | (Instr. 3 and 4) | | | |
| Stock, par value \$0.01 per share | 07/29/2013 | | | А | 1,751 (1) | A | \$0 | 23,771 | D | | |

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

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 control number.

 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|----------------------------------------|-------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------|---------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
| | | | Code V | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Edgar Filing: Prestige Brands Holdings, Inc. - Form 4

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|-------------------------------------------------------------|---------------|-----------|---------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| BYOM JOHN E 660 WHITE PLAINS ROAD TARRYTOWN, NY 10591 | Х | | | | | | |
| Signatures | | | | | | | |
| /s/ John E. Byom by Sam Cowl attorney-in-fact | 07/31/2013 | | | | | | |

<u>**</u>Signature of Reporting Person

Date

Explanation of Responses:

* 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).

The Reporting Person received 1,751 restricted stock units (equal to \$60,000 divided by the closing stock price of \$34.27 on July 29, 2013) in connection with the Issuer's director compensation arrangement. The restricted stock units vest on July 29, 2014 and shall be

(1) 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 the Reporting Person's (i) death, (ii) disability or (iii) the six-month anniversary of the date on which the Reporting Person's Board membership ceases for reasons other than death or disability.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.