## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

vvasnington,	D.C.	2054

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235		

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OMB Number:	3235-0287					
Estimated average burden						
hours per response:	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*  PHALEN MIRIAM GRINBERG  (Last) (First) (Middle)  C/O MOVADO GROUP, INC.				Issuer Name and Ticker or Trading Symbol     MOVADO GROUP INC [ MOV ]  3. Date of Earliest Transaction (Month/Day/Year) 03/16/2005									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner  Officer (give title Other (specify below)					
(Street) PARAM (City)		J (date)		4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)     X 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. Transa Date (Month/D					2A. Deemed Execution Date,			3. Transact Code (In 8)	Fransaction Disposed Of (D) (Instr. 3, 2)  Disposed Of (D) (Instr. 3, 2)			red (A) o	s 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)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction		e.g., pu	ransac	s, calls, warra  s, calls, warra  5. Numl of Derivati Securit Acquire (A) or Dispose of (D) (Instr. 3 and 5)		ants ber tive ties ed	6. Date Exer				urities  id of s ig e Security	8. Price of Derivativ Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct ( or Indir (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				c	ode \	v	(A)	(D)	Date Exercisable	Ex <sub>I</sub> Dat	piration te	Title	Amour or Numbe of Shares					
Class A Common Stock	(1)	03/16/2005		J	J(2)		8,647		(3)		(4)	Common Stock	8,647	\$0	289,24	1	D <sup>(5)</sup>	
Class A Common Stock	(1)	03/16/2005		J	(2)		663		(3)		(4)	Common Stock	663	\$0	37,107	7	I	See footnote <sup>(6)</sup>
Class A Common Stock	(1)	03/16/2005		J	<sub>J</sub> (2)		663		(3)		(4)	Common Stock	663	\$0	37,065	5	I	See footnote <sup>(7)</sup>
Class A Common Stock	(1)								(3)		(4)	Common Stock	0		5,000		I	By spouse

## **Explanation of Responses:**

- 1. 1 for 1
- 2. Distribution by Grinberg Partners L.P. in which reporting person is a limited partner
- 3. Immediately
- 5. The reporting person also has an indirect pecuniary interest in an additional 509,990 shares of Class A Common Stock, of which (i) 184,356 are owned by a trust and 287,634 are owned by another trust, for both of which trusts the reporting person is the beneficiary and (ii) 38,000 are owned by CAP I Partners, L.P. in which the reporting person is a limited partner. The reporting person disclaims beneficial ownership of the shares held by CAP I Partners, L.P., except to the extent of her pecuniary interest therein.
- 6. By Adrian Phalen Trust

7. By Nathan Phalen Trust.

03/18/2005 /s/ Miriam G. Phalen \*\* 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.