FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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

					. 0	r Sect	ion 30(h) of t	hè Ínvestm	nent C	Comp	any Act	t of 1940									
1. Name and Address of Reporting Person* PHALEN MIRIAM GRINBERG							2. Issuer Name and Ticker or Trading Symbol MOVADO GROUP INC [MOV]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner					
FHALEN WIIMAWI GRINDERG																		X		·		
(Last) (First) (Middle) C/O MOVADO GROUP, INC., 650 FROM ROAD					3. Date of Earliest Transaction (Month/Day/Year) 03/08/2004										Officer below)	(give title		Other (s below)	specify			
G/O MOVIDO GROOT, IIVG., 050 I ROM ROID					4	If Amendment, Date of Original Filed (Month/Day/Year)										dividual or J	oint/Groun	Filing	(Check An	nlicable		
(Street)					4. II Amenument, Date of Original Flied (Month/Day/Year)										Line		om o o o o o	, i iiiig	(Oncor / p)	Silicable		
PARAM	US N	J	07652										2	X Form filed by One Reporting Person								
															Form filed by More than One Reporting Person							
(City) (State) (Zip)																i cisuii						
		Tal	ble I - Nor	n-Deriv	ativ	re Se	curit	ies <i>F</i>	Acquire	d, D	ispo	sed o	of, or I	Benef	icially	y Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					ear)	2A. Deemed Execution Date if any (Month/Day/Yea		Cod	e, Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		4 and Securitie Benefici Owned F		s Illy ollowing	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
									Cod	e V	, ,	Amount	(A) or (D) Pr		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
			Table II -													Owned		ı				
				(e.g., p	uts,	, call	s, wa	ırran	ts, opti	ons,	, coı	nverti	ible se	curiti	es)							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day	Date, T	I. Transaction Code (Instr. 3)		of		6. Date Exercisab Expiration Date (Month/Day/Year)		е	and	7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership tt (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisal	ole	Expi Date	ration	Title	Amo or Num of Si								
Class A Common Stock	\$0.00 ⁽¹⁾	03/08/2004			G		742		03/08/200)4 ⁽²⁾	((3)	Commo Stock	n 7	42	\$0	18,96	4	I	See Footnote ⁽⁴⁾		
Class A Common Stock	\$0.00 ⁽¹⁾	03/08/2004			G		742		03/08/200)4 ⁽²⁾	((3)	Commo Stock	¹ 7	42	\$0	18,94	3	I	See Footnote ⁽⁵⁾		
Class A Common Stock	\$0.00 ⁽¹⁾								03/08/200)4 ⁽²⁾	((3)	Commo Stock	¹ 144	,797		144,79	97	D			
Class A Common Stock	\$0.00 ⁽¹⁾								03/08/200)4 ⁽²⁾	((3)	Commo Stock	ⁿ 19,	000		19,00	0	I	See Footnote ⁽⁶⁾		
Class A	(1)									(X)			Commo	, , ,	170		l	_		I		

03/08/2004⁽²⁾

03/08/2004⁽²⁾

03/08/2004(2)

(3)

(3)

(3)

Explanation of Responses:

\$0.00⁽¹⁾

\$0.00⁽¹⁾

\$0.00(1)

1. 1 for 1

Common

Common

Class A

Stock

Common

Stock Class A

- 2. Immediately
- 3. Not Applicable
- 4. By Adrian Phalen Trust
- 5. By Nathan Phalen Trust
- 6. By CAP I Partners, L.P. 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.

/s/ Miriam G. Phalen

03/0<u>8/2004</u>

92,178

143,817

2,500

By Trust

By Trust

By Spouse

** Signature of Reporting Person

92,178

143,817

2,500

Stock

Stock

Stock

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.