FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vacinington,	D.O.	_00.0

STATEMENT	OF C	CHANGES	IN BENE	FICIAL	OWNERS	HIP

OMB APPROVAL								
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

Name and Address of Reporting Person* Isserman Richard D					2. Issuer Name and Ticker or Trading Symbol MOVADO GROUP INC [MOV]						(Che	eck all app	tor	ng Pers	10% Ov	vner			
(Last)	(Fir	st) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024							Office below	er (give title v)		Other (s below)	specify			
C/O MOVADO GROUP, INC.						mend	ment,	Date of	f Origina	l Filed	l (Month/Da	y/Year	.)	6. Individual or Joint/Group Filing (Check Applicable					
650 FROM ROAD, SUITE 375														X Form filed by One Reporting Person				on	
(Street)	US NJ	0	7652												Form Perso	filed by Mo	re than	One Repo	orting
			7032		Rul	Rule 10b5-1(c) Transaction Indication													
(City)	(Sta	ate) (Z	Zip)			Check this box to indicate that a transaction was made pursuant to a cor satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruct													
		Table	I - Nor	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	oosed of	, or E	3ene	ficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date		Date,	Transaction Disposed Of (Code (Instr. 5)		es Acquired (A) Of (D) (Instr. 3, 4			Benefic Owned	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	mount (A) or (D)		Price		ed ction(s) 3 and 4)			(Instr. 4)	
Common Stock 04/				04/01/	/2024			A		4,500	1	A	\$ <mark>0</mark>	19,961			D		
	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)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transa Code (8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		(3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ow For Dire or I (I) (10. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amou or Numb of Share	ber					

Explanation of Responses:

/s/ Mitchell C. Sussis, attorney-in-fact

04/03/2024

** Signature of Reporting Person

Date

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

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.

^{*} 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).