## Edgar Filing: MOVADO GROUP INC - Form 4

| MOVADO G  | ROUP INC   |             |  |                      |                        |                                 |           |                |                                       |                  |                        |  |  |
|---|--|-------------|--|----------------------|------------------------|---------------------------------|-----------|----------------|---------------------------------------|------------------|------------------------|--|--|
| Form 4  |  |             |  |                      |                        |                                 |           |                |                                       |                  |                        |  |  |
| April 20, 201   | 5  |             |  |                      |                        |                                 |           |                |                                       |                  |                        |  |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION   |  |             |  |                      |                        |                                 |           |                | PPROVAL                               |                  |                        |  |  |
| <b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b><br>Washington, D.C. 20549   |  |             |  |                      |                        |                                 |           | OMB<br>Number: | 3235-0287                             |                  |                        |  |  |
| Check this box  |  |             |  |                      |                        |                                 | Expires:  | January 31,    |                                       |                  |                        |  |  |
| if no longer<br>subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF  |  |             |  |                      |                        |                                 |           | 2005           |                                       |                  |                        |  |  |
|   | Section 16. SECURITIES   |             |  |                      |                        |                                 |           |                | Estimated average<br>burden hours per |                  |                        |  |  |
| Form 4 or   |  |             |  |                      |                        |                                 |           |                |                                       | response         | •                      |  |  |
| Form 5<br>obligation  | ~ <b>^</b>   |             |  |                      |                        |                                 |           | -              | ge Act of 1934,                       |                  |                        |  |  |
| may contin  |  |             |  | •                    | -                      | -                               | · ·       |                | f 1935 or Sectio                      | n                |                        |  |  |
| See Instructure 1(b).   |  | 30(h)       | of the Inv                                     | vestment             | t Co                   | mpany                           | / Act     | of 19          | 40                                    |                  |                        |  |  |
| (Print or Type R  | esponses)  |             |  |                      |                        |                                 |           |                |                                       |                  |                        |  |  |
| × , , , , , , , , , , , , , , , , , , ,   | 1  |             |  |                      |                        |                                 |           |                |                                       |                  |                        |  |  |
| 1. Name and Address of Reporting Person *<br>BRIDGMAN PETER A2. Issuer Name and Ticker or Trading<br>Symbol5. Relationship of P<br>Issuer |  |             |  |                      | Reporting Person(s) to |                                 |           |                |                                       |                  |                        |  |  |
| •   |  |             |  | VADO GROUP INC [MOV] |                        |                                 |           |                | (Check all applicable)                |                  |                        |  |  |
| (Last) (First) (Middle) 3. Date of Ear  |  |             |  | Earliest T           | ransa                  | action                          |           |                | (Check all applicable)                |                  |                        |  |  |
| × ,   |  | · · · · · · |  | h/Day/Year)          |                        |                                 |           |                | X Director                            | 10%              | b Owner                |  |  |
| C/O MOVADO GROUP, INC., 650 04/15/20  |  |             |  | -                    |                        |                                 |           |                | Officer (give title Other (specify    |                  |                        |  |  |
| FROM ROA  | D, SUITE 37  | 5           |  |                      |                        |                                 |           |                | below)                                | below)           |                        |  |  |
| (Street) 4. If Amendment, Date Original 6. Ind  |  |             |  |                      | 6. Individual or J     | ual or Joint/Group Filing(Check |           |                |                                       |                  |                        |  |  |
|   | ~ /  |             | Filed(Mont                                     |                      |                        | Applicable Line)                |           |                |                                       |                  |                        |  |  |
| _X_ Form filed by On  |  |             |  |                      |                        |                                 |           |                |                                       |                  |                        |  |  |
| PARAMUS,  | NJ 07652   |             |  |                      |                        |                                 |           |                | Form filed by M<br>Person             | More than One Ro | eporting               |  |  |
| (City)  | (State)  | (Zip)       | Table  | e I - Non-l          | Deriv                  | vative S                        | ecuri     | ties Ac        | quired, Disposed o                    | f, or Beneficia  | lly Owned              |  |  |
| 1.Title of  | 2. Transaction I   |             |  |                      |                        |                                 |           |                | 5. Amount of                          | 1                | 7. Nature of           |  |  |
|   |  |             | on Date, if TransactionAcquired (A) or $C_{A}$ |                      |                        |                                 |           |                | Securities                            | Form: Direct     | Indirect<br>Beneficial |  |  |
| (Instr. 3)  | nstr. 3) any Code Disposed of (D)<br>(Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) |             |  |                      | Beneficially<br>Owned  | (D) or<br>Indirect (I)          | Ownership |                |                                       |                  |                        |  |  |
|   |  |             |  | Following            | (Instr. 4)             | (Instr. 4)                      |           |                |                                       |                  |                        |  |  |
|   |  |             |  |                      |                        |                                 | (A)       |                | Reported                              |                  |                        |  |  |
|   |  |             |  |                      |                        |                                 | or        |                | Transaction(s) (Instr. 3 and 4)       |                  |                        |  |  |
|   |  |             |  | Code V               | V A                    | mount                           | (D)       | Price          | (insu. 5 and 4)                       |                  |                        |  |  |
| Common<br>Stock   | 04/15/2015   |             |  | А                    | 3,                     | ,130                            | А         | \$0            | 7,277 <u>(1)</u>                      | 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)

| De<br>Se | Title of<br>erivative<br>ecurity<br>1str. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transactic<br>Code<br>(Instr. 8) | 5.<br>onNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |                     |                    | 7. Title and<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|----------|--|---|---|--|---|---------------------|--------------------|---|--|---|--|
|          |  |   |   | Code V                                 | (A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of<br>Shares |   |  |

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# **Reporting Owners**

| Reporting Owner Name / Address  |                     | Relationships |           |         |       |  |  |  |
|---|---------------------|---------------|-----------|---------|-------|--|--|--|
|   |                     | Director      | 10% Owner | Officer | Other |  |  |  |
| BRIDGMAN PETER A<br>C/O MOVADO GROUP, I<br>SUITE 375<br>PARAMUS, NJ 07652 | INC., 650 FROM ROAD | Х             |           |         |       |  |  |  |
| Signatures  |                     |               |           |         |       |  |  |  |
| /s/ Peter A.<br>Bridgman  | 04/17/2015          |               |           |         |       |  |  |  |

\*\*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).

(1) Includes 7 shares acquired in December 2014 through a dividend reinvestment feature of the reporting person's brokerage account.

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.