FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

|   | OMB APPROVAL             |           |  |  |  |  |  |  |  |  |  |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| ١ | 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     |
| $\cup$ | obligations may continue. See       |
|        | Instruction 1(b).                   |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 at Bie Bo  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol Movella Holdings Inc. [ MVLA ]  |       |         |   |               |  |   |  |   | heck all app<br>Direc | ctor   |             | 10% Ov          | wner  |  |  |  |                                       |   |
|--|--|-------|---------|---|---------------|--|---|--|---|-----------------------|--|-------------|-----------------|---|--|--|--|---------------------------------------|---|
| (Last)<br>3535 EX  | ast) (First) (Middle) 535 EXECUTIVE TERMINAL DRIVE, SUITE  |       |         |   |               |  | 3. Date of Earliest Transaction (Month/Day/Year) 05/23/2023 |  |   |                       |  |             |                 |   |  | Officer (give title below)  Chief Oper |  | Other (s<br>below)<br>Officer         | вреспу<br>  |
| 110  |  |       |         |   |               | 4. If Amendment, Date of Original Filed (Month/Day/Year)   |   |  |   |                       |  |             |                 | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |  |  |                                       |   |
| (Street) HENDERSON NV 89052                                    |  |       |         |   |               |  |   |  |   |                       |  |             |                 |   | X Form filed by One Reporting Person Form filed by More than One Reporting Person                                  |  |  |                                       |   |
| (City)   | Rule 10b5-1(c) Transaction Indication  |       |         |   |               |  |   |  |   |                       |  |             |                 |   |  |  |  |                                       |   |
|  |  |       |         |   |               | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |   |  |   |                       |  |             |                 |   |  | ended to                               |  |                                       |   |
|  |  | Table | l - Noı | n-Deriva                                | tive S        | ecur   | ities   | Acq  | uired,  | Disp                  | osed of  | f, or       | Ben             | efici   | ally Owr   | ned                                    |  |                                       |   |
| 1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day) |  |       |         |   | y/Year) Execu |  | Deemed<br>cution Date,<br>y<br>nth/Day/Year)                |  | 3.<br>Transaction<br>Code (Instr.<br>8) 4. Securiti<br>Disposed<br>and 5) |                       |  |             |                 |   | 5. Amo<br>Securi<br>Benefi<br>Owned  | cially<br>1                            | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)     | n: Direct                             | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |  |       |         |   |               |  |   | Code   | v   | Amount                | (A<br>(D   | () or<br>() | Price           |   |  |  |  |                                       |   |
| Common   | 2023   |       |         |   | P             |  | 10,000  |  | A   | \$1.                  | 8 1  | 10,000      |                 | D   |  |  |  |                                       |   |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |       |         |   |               |  |   |  |   |                       |  |             |                 |   |  |  |  |                                       |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)            | ative Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any  |       |         | 4.<br>Transaction<br>Code (Instr.<br>8) |               | 5.<br>Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5)   |   | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |   |                       | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security<br>(Instr. 3 and |             |                 | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)         | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | у                                      | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |   |
|  |  |       |         |   | Code          | v  | (A)   | (D)  | Date<br>Exercisa  |                       | Expiration<br>Date   | Title       | or<br>Num<br>of | .   |  |  |  |                                       |   |

Explanation of Responses:

Remarks:

/s/ Dennis Calderon,

Attorney-in-fact for Boele de 05/25/2023

Bie

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.