## FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 200

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

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* <u>Klauder N Jeffrey</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol SEI INVESTMENTS CO [ SEIC ]									Check all a Di	applicable) rector	p Person(s) to Issuer  10% Owner	
(Last) (First) (Middle) ONE FREEDOM VALLEY DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 07/25/2014								A be	ficer (give title low) ECUTIVE V	Other below VICE PRESID	,	
(Street) OAKS (City)	PA		.9456 Zip)		4. If An	nendment, Date	of Oriç	ginal	Filed	(Month/Da	ay/Y	'ear)		ine) X F	orm filed by On	p Filing (Check on the Reporting Per or than One Re	son
		Tabl	e I - Non-	-Deriva	ative S	ecurities Ac	quir	ed,	Dis	posed o	of, c	or Ben	efici	ally Ow	ned		
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			Execution Date,		, Tr	Transaction Dispo		Disposed	ecurities Acquired (A) osed Of (D) (Instr. 3, 4			nd Sed Bed Ow	mount of urities eficially ned Following orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Co	ode	v	Amount		(A) or (D)	Price	Tra	nsaction(s) tr. 3 and 4)		(111341.4)
COMMO	MMON STOCK 07/25/2014 s 11,000 D				D	\$35.85		82,464	D								
		Та				urities Acqı s, warrants									d		
1. Title of Derivative Security (Instr. 3)	ive Conversion Date Execution Date, Tra y or Exercise (Month/Day/Year) if any Co		Transactio		Expiration Date (Month/Day/Year)			•	Amount of		ıstr. 3	8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		

Date

Exercisable

**Explanation of Responses:** 

**RUTH MONTGOMERY** (ATTORNEY IN FACT

Expiration

Date

Amount or Number

of Shares

Title

07/29/2014

\*\* 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.

Code

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.

(A) (D)