FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| Isnington, D.C. 20549 | OMB APPROVAL |
|-----------------------|--------------|
| | |

| ON | OMB Number: 32 | | | | | | |
|----|--------------------------|--|--|--|--|--|--|
| Es | Estimated average burden | | | | | | |
| | urs per response: | | | | | | |

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* Barr Kevin | | | | | 2. Issuer Name and Ticker or Trading Symbol SEI INVESTMENTS CO [SEIC] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | |
|------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------|--------|--------------------------------|---------------------|---------------------------------------------------------------|------------|-----------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|--------------------------------------------------------------------------|------------------------------------------|
| (Last) (First) (Middle) 1 FREEDOM VALLEY DRIVE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/09/2014 | | | | | | X | below) | | ICE P | Other (s below) RESIDEN | · | |
| (Street) OAKS (City) | OAKS PA 19456 (City) (State) (Zip) | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) attive Securities Acquired, Disposed of, or Benefic | | | | | Line) X | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans. Date | | | | ransaction | action 2A. Deemed Execution Date, | | 3. Transaction Code (Instr. 2) | | | (A) or | 5. Amount of Securities Beneficially Owned Follo | | Form: | : Direct I r Indirect E str. 4) C | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Amou | nt | (A) or (D) | Price | Reported Transactio (Instr. 3 an | on(s) | | | Instr. 4) |
| | 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) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code (| Transaction Code (Instr. | | of E | | 6. Date Exercisable an Expiration Date (Month/Day/Year) | | 7. Title and Amo of Securities Underlying Deri Security (Instr. 3 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ct (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | | Title | Amount or Number of Shares | umber | | | | |
| STOCK OPTION (RIGHT TO PURCHASE) | \$40.64 | 12/09/2014 | | М | | 30,000 | | 12/09/2021 | 12/09/20 | | COMMON STOCK | 30,000 | \$40.64 | 30,00 | 00 | D | |

Explanation of Responses:

RUTH MONTGOMERY (ATTORNEY IN FACT)

12/09/2014

** Signature of Reporting Person

Data

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.