FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

| - 1 |                          |           |
|-----|--------------------------|-----------|
|     | OMB Number:              | 3235-0287 |
| ı   | Estimated average burden |           |
| ı   | 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).

#### 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

| Name and Address of Reporting Person     WEST ALFRED P JR |         |          | 2. Issuer Name and Ticker or Trading Symbol SEI INVESTMENTS CO [ SEIC ] | Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|-----------------------------------------------------------|---------|----------|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| (Last)                                                    | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 06/17/2010             | Officer (give title Other (specify below) below)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |
| ONE FREEDOM VALLEY DRIVE  (Street)                        |         |          | 4. If Amendment, Date of Original Filed (Month/Day/Year)                | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |
| OAKS                                                      | PA      | 19456    |                                                                         | , and a second approximation of the second approximation o |  |  |  |  |
| (City)                                                    | (State) | (Zip)    |                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | Transaction Code (Instr. |   | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) |               |         | 5. Amount of<br>Securities<br>Beneficially Owned<br>Following Reported | Form: Direct (D) | Beneficial<br>Ownership |
|---------------------------------|--------------------------------------------|-------------------------------------------------------------|--------------------------|---|-------------------------------------------------------------------|---------------|---------|------------------------------------------------------------------------|------------------|-------------------------|
|                                 |                                            |                                                             | Code                     | v | Amount                                                            | (A) or<br>(D) | Price   | Transaction(s)<br>(Instr. 3 and 4)                                     |                  | (Instr. 4)              |
| Common Stock                    | 06/17/2010                                 |                                                             | S                        |   | 45,000                                                            | D             | \$21.65 | 15,369,227(1)                                                          | 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 (Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | <br>3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transac<br>Code (In<br>8) |   | 5. Num<br>Derivat<br>Securit<br>Acquire<br>or Disp<br>(D) (Ins<br>and 5) | ive<br>ies<br>ed (A)<br>osed of | 6. Date Exerc<br>Expiration Da<br>(Month/Day/Y | ate                | 7. Title and A<br>Securities Un<br>Derivative Se<br>(Instr. 3 and A | nderlying<br>ecurity                | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported | (I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|--------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------|---------------------------------|---|--------------------------------------------------------------------------|---------------------------------|------------------------------------------------|--------------------|---------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------|--------------------------------------------------------------------------------------------|----------------|--------------------------------------------------------------------|
|                                                  |                                                                       |                                                                 | Code                            | v | (A)                                                                      | (D)                             | Date<br>Exercisable                            | Expiration<br>Date | Title                                                               | Amount<br>or<br>Number<br>of Shares |                                                     | Transaction(s)<br>(Instr. 4)                                                               |                |                                                                    |

### Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$21.54 to \$21.74, inclusive. The reporting person undertakes to provide to SEI, any security holder of SEI, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

#### Remarks:

Ruth Montgomery (Attorney in Fact) 06/21/2010

\*\* 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.

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.