FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: Estimated average burden 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).

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 | ress of Reporting Perso | on [*] | 2. Issuer Name and Ticker or Trading Symbol SEI INVESTMENTS CO [SEIC] | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|----------|-------------------------|-----------------|--|---------------|---|------------------------|--|--|--|--|
| BLUMENS | <u>STEIN SAKAH</u> | | | X | Director | 10% Owner | | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 12/13/2016 | | Officer (give title below) | Other (specify below) | | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv X | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| (City) | (State) | (Zip) | | | Form filed by More that | n One Reporting Person | | | | |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | if any (Month/Day/Year) | Transaction Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|----------------------------|-----------------------------|---|--|---------------|-------|--|-------------------------------|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (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 | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|---|--|---|---|---|--|-----|--|--------------------|--|-------------------------------------|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |
| STOCK OPTION (RIGHT TO PURCHASE) | \$49.63 | 12/13/2016 | | М | | 10,000 | | 12/13/2023 ⁽¹⁾ | 12/13/2026 | STOCK OPTION (RIGHT TO PURCHASE | 10,000 | \$49.63 | 10,000 | D | |

Explanation of Responses:

1. COMPANY GRANT OF NON-QUALIFIED STOCK OPTIONS - 50% WILL VEST WHEN REPORTED, ADJUSTED EARNINGS PER SHARE EQUALS OR EXCEEDS \$2.40, 100% WILL VEST WHEN REPORTED, ADJUSTED EARNINGS PER SHARE EQUALS OR EXCEEDS \$3.30.

RUTH MONTGOMERY (ATTORNEY IN FACT) ** Signature of Reporting Person

Date

12/14/2016

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.

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