FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

APPROVAI

OMB Number:	3235-0104
Estimated average burden	
hours per response:	0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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>Hicke Ryan</u>		2. Date of Event Requiring Statement (Month/Day/Year) 03/11/2020	3. Issuer Name and Ticker or Trading Symbol SEI INVESTMENTS CO [SEIC]					
(Last) (First) (Middle) ONE FREEDOM VALLEY DRIVE			Relationship of Reporting Person(s) to Issuer (Check all applicable) Director		5. If Amendment, Date of Original Filed (Month/Day/Year) 03/13/2020			
(Street) OAKS (City)	PA (State)	19456 (Zip)			Executive Vice	President		vidual or Joint/Group Filing (Check able Line) Form filed by One Reporting Person Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)			
COMMON STOCK	6,812(1)	I	These shares are held in a 401(k)		
COMMON STOCK	1,171	I	These shares are held in the Employee Stock Purchase Plan ⁽¹⁾		

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		Conversion or Exercise	Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	ive (Instr. 5)	

Explanation of Responses:

RUTH MONTGOMERY (Attorney in Fact)

03/13/2020

** Signature of Reporting Person

Date

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

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$

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.

^{1.} These shares were mistakenly not added to the original Form 3.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).