

LIEB RICHARD  
Form 4  
February 03, 2011

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0287  
Expires: January 31, 2005  
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).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
**LIEB RICHARD**

2. Issuer Name and Ticker or Trading Symbol  
**SEI INVESTMENTS CO [SEIC]**

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
**ONE FREEDOM VALLEY DRIVE**  
  
(Street)

3. Date of Earliest Transaction  
(Month/Day/Year)  
**02/01/2011**

Director  10% Owner  
 Officer (give title below)  Other (specify below)

**OAKS, PA**

(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than 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)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price
Common Stock	02/01/2011		S		18,900	D	\$ 23.5
Common Stock	02/03/2011		S		6,100	D	\$ 23.5

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

**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 control number.**

SEC 1474 (9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

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Table with columns: 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 Underlying Securities (Instr. 3 and 4), 8. Price of Derivative Security (Instr. 5), 9. Number of Derivative Securities Owned Beneficially (Instr. 6, 7, and 8), 10. Ownership Form: Common (C) or Preferred (P) (Instr. 7), 11. Transaction Type: Open (O) or Closed (C) (Instr. 8), 12. Derivative Instrument Name and Instrument Number, 13. Reporting Date (Month/Day/Year), 14. Filing Date (Month/Day/Year), 15. Form Type: Common (C) or Preferred (P) (Instr. 9), 16. Other Reporting Person's Full Name, 17. Reporting Person's CIP Number, 18. Reporting Person's Title, 19. Reporting Person's Position, 20. Reporting Person's Signature, 21. Reporting Person's Title, 22. Reporting Person's Position, 23. Reporting Person's Signature, 24. Reporting Person's Title, 25. Reporting Person's Position, 26. Reporting Person's Signature, 27. Reporting Person's Title, 28. Reporting Person's Position, 29. Reporting Person's Signature, 30. Reporting Person's Title, 31. Reporting Person's Position, 32. Reporting Person's Signature, 33. Reporting Person's Title, 34. Reporting Person's Position, 35. Reporting Person's Signature, 36. Reporting Person's Title, 37. Reporting Person's Position, 38. Reporting Person's Signature, 39. Reporting Person's Title, 40. Reporting Person's Position, 41. Reporting Person's Signature, 42. Reporting Person's Title, 43. Reporting Person's Position, 44. Reporting Person's Signature, 45. Reporting Person's Title, 46. Reporting Person's Position, 47. Reporting Person's Signature, 48. Reporting Person's Title, 49. Reporting Person's Position, 50. Reporting Person's Signature, 51. Reporting Person's Title, 52. Reporting Person's Position, 53. Reporting Person's Signature, 54. Reporting Person's Title, 55. Reporting Person's Position, 56. Reporting Person's Signature, 57. Reporting Person's Title, 58. Reporting Person's Position, 59. Reporting Person's Signature, 60. Reporting Person's Title, 61. Reporting Person's Position, 62. Reporting Person's Signature, 63. Reporting Person's Title, 64. Reporting Person's Position, 65. Reporting Person's Signature, 66. Reporting Person's Title, 67. Reporting Person's Position, 68. Reporting Person's Signature, 69. Reporting Person's Title, 70. Reporting Person's Position, 71. Reporting Person's Signature, 72. Reporting Person's Title, 73. Reporting Person's Position, 74. Reporting Person's Signature, 75. Reporting Person's Title, 76. Reporting Person's Position, 77. Reporting Person's Signature, 78. Reporting Person's Title, 79. Reporting Person's Position, 80. Reporting Person's Signature, 81. Reporting Person's Title, 82. Reporting Person's Position, 83. Reporting Person's Signature, 84. Reporting Person's Title, 85. Reporting Person's Position, 86. Reporting Person's Signature, 87. Reporting Person's Title, 88. Reporting Person's Position, 89. Reporting Person's Signature, 90. Reporting Person's Title, 91. Reporting Person's Position, 92. Reporting Person's Signature, 93. Reporting Person's Title, 94. Reporting Person's Position, 95. Reporting Person's Signature, 96. Reporting Person's Title, 97. Reporting Person's Position, 98. Reporting Person's Signature, 99. Reporting Person's Title, 100. Reporting Person's Position

Reporting Owners

Table with columns: Reporting Owner Name / Address, Relationships (Director, 10% Owner, Officer, Other). Entry: LIEB RICHARD, ONE FREEDOM VALLEY DRIVE, OAKS, PA, Director: X

Signatures

Ruth Montgomery (attorney in fact) 12/03/2011
Signature of Reporting Person Date

Explanation of Responses:

\* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.