

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

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per response	e 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

(Print or Type Responses)								
1. Name and Address of Reporting Person* TUDER JEFFREY	2. Date of Event Requiring Statement (Month/Day/Year) 02/28/2019			3. Issuer Name and Ticker or Trading Symbol SEACHANGE INTERNATIONAL INC [SEAC]				
(Last) (First) (Middle) C/O SEACHANGE INTERNATIONAL, INC., 50 NAGOG PARK			Issuer	of Reporting Person k all applicable)	Filed(Mor	5. If Amendment, Date Original Filed(Month/Day/Year)		
ACTON, MA 01720			Officer (give t	Other (sp below)				
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)	2. Amount of Se Beneficially Own (Instr. 4)			ally Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock	23,000				D			
Reminder: Report on a separate line for each class  Persons who respor unless the form disp	d to the c	ollection	of info	ormation contained in	this form are n	ot required to re	SEC 1473 (7-02)	
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
(Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)  3. Title an Securities Security (Instr. 4)		•	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(I) (Instr. 5)		

### **Reporting Owners**

		Relationships				
Reporting Owner Name / Address	Diı	rector	10% Owner	Officer	Other	
TUDER JEFFREY C/O SEACHANGE INTERNATIONAL, IN 50 NAGOG PARK ACTON, MA 01720	C.	X				

## **Signatures**

/s/ Jeffrey Tuder	03/04/2019
**Signature of Reporting Person	Date

### **Explanation of Responses:**

- \* 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).

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.