FORM 4

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

OMB APPROVAL							
OMB Number:	3235-0287						
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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 or Section 30(h) of the Investment Company Act of 1940

	e Responses)															
1. Name and Address of Reporting Person * GOLDFARB IRA (Last) (First) (Middle) C/O SEACHANGE INTERNATIONAL, 124 ACTON STREET				2. Issuer Name and Ticker or Trading Symbol SEACHANGE INTERNATIONAL INC [SEAC] 3. Date of Earliest Transaction (Month/Day/Year) 08/04/2004						1	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) Other (specify below) Sr VP, Sales North America						
										X							
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Fo	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person						
	RD, MA 0																
(City	7)	(State)	(Zip)				Tal	ole I - Non-De	erivati	ive Securities	Acquired, I	Disposed o	f, or Benefi	cially Owned	ı		
1.Title of Security 2. Transaction (Instr. 3) Date (Month/Day/Yea			r) any	ition]	n Date, if Co (In Day/Year)		Fransaction de str. 8)	4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		D) Owned Transa	l Followin ction(s)			Form:	of In Ben	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			(Month/Da				Code V	Amount (A) or (D) F		rice (Instr.	nstr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)			
Reminder: I	Report on a se	eparate line for each	class of securities be					Perso in this	forn	ho respond t n are not requ valid OMB c	uired to re	spond ur				1474	4 (9-02)
			I abie ii	- Deriva	ative	Securiti	ies A	cauired, Disi	posed	of, or Benefic	ially Owned	l					
	1	ı		(e.g., p	uts,	calls, wa	arra	nts, options, c	onve	of, or Benefic rtible securitie		l ————					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if	(e.g., p 4. Transact Code	tion	calls, wa 5. Numl	ber ive es ed		conver cisable ate	rtible securitie		l Amount ing	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form of Deriva Securit Direct or Indi	rship of litive (ty: (D) rect	11. Nature of Indirec Beneficial Ownership (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	(e.g., p 4. Transact Code	tion	5. Numbof Derivati Securitic Acquire (A) or Dispose of (D) (Instr. 3. and 5)	ber ive es ed	nts, options, c 6. Date Exerc Expiration Da	cisable ate Year)	rtible securitie	7. Title and of Underly Securities	l Amount ing	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction	Owner Form of Deriva Securit Direct or Indi (s) (I)	rship of litive (ty: (D) rect	of Indirect Beneficial Ownership

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GOLDFARB IRA C/O SEACHANGE INTERNATIONAL 124 ACTON STREET MAYNARD, MA 01754			Sr VP, Sales North America				

Signatures

Kevin Thimble/Attorney-in-Fact	08/06/2004
**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).
- $\textbf{(16)}\ \ 25\%\ (1,562\ shares)\ vest\ at\ the\ end\ of\ the\ first\ year\ (8/04/2005)\ and\ 6.25\%\ (390\ shares)\ vest\ each\ quarter\ thereafter.$

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.