FORM 4

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

OMB APPROV	√AL
OMB Number:	3235-0287
Estimated average bur	den
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 or Section 30(h) of the Investment Company Act of 1940

(Print or Typ	pe Responses)																
1. Name and Address of Reporting Person * TERINO EDWARD				2. Issuer Name and Ticker or Trading Symbol SEACHANGE INTERNATIONAL INC [SEAC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director							
(Last) (First) (Middle) C/O SEACHANGE INTERNATIONAL, 50 NAGOG PARK				3. Date of Earliest Transaction (Month/Day/Year) 06/03/2015								X Officer (give title below) Other (specify below) Chief Operating Officer						
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
ACTON, MA 01720 (City) (State) (Zip)												_ , , ,						
		(State)							-					• ′		ially Owned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Ye	Execut any		2A. Deemed Execution Date, if any Month/Day/Year)		(Instr. 8)		on 4. Securities Acquire (A) or Disposed of ((Instr. 3, 4 and 5)					curities Beneficially g Reported		Ownership Form:	7. Nature of Indirect Beneficial Ownership	
				(111	.onui	Buy, Tour)		Code	V A	Amoun	(A) or (D)) or			or Indirect (I) (Instr. 4)			
Common Stock 06/03/20		06/03/2015				A		55,172	ΙΔ	\$ 0 (1)	160,533		-	D				
			Table					cquired	urrent I, Dispo	ly val	d OMB co	ontrol cially (numb		s the form	displays a		
1. Title of Derivative Security (Instr. 3)	ive Conversion Date Execution Date, if Transaction Derivative (Month/Day/Year) any Code Securities Expiration D (Month/Day/Year)		te Exercisable and 7. To ation Date of U th/Day/Year) Secu			7. Tit of Ut Secur	Underlying			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownersh Form of Derivati Security Direct (I or Indirects)	(Instr. 4)						
				Code	V	(A)	(D)	Date Exerci	isable		xpiration ate	Title	;	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Non- Qualified Stock Option (right to buy)	\$ 7.25	06/03/2015		A		200,000		12/03	3/2015	5(2) 0	6/03/2022	?.I	nmon	200,000	\$ 0	0	D	

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
TERINO EDWARD C/O SEACHANGE INTERNATIONAL 50 NAGOG PARK ACTON, MA 01720	X		Chief Operating Officer				

Signatures

/s/ Edward Terino	06/04/2015
**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).

- The securities awarded on June 3, 2015 are in the form of restricted stock units (RSUs) issued pursuant to the Corporation's Amended and Restated 2011 Compensation and Incentive Plan that entitles the reporting person to receive one (1) share of common stock per RSU. The RSUs will vest ratably over 4 years. The first tranche will vest June 3, 2016, with an equal number of shares vesting on June 3, 2017 and June 3, 2018 and the balance of the shares vesting on June 3, 2019. The reporting person has elected to defer the issuance of vested shares underlying the RSU award until the earlier of the reporting person's termination of employment with the Corporation or a change in control of the issuer.
- (2) The options shall vest in increments based upon the closing price of the Corporation's common stock. In compliance with the terms of the Corporation's 2011 Amended and Restated Compensation and Incentive Plan, none of the options shall vest prior to six months from the date of grant.

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.