## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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

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 <sup>*</sup> GABELLI ASSET MANAGEMENT INC					WE	2. Issuer Name and Ticker or Trading Symbol WESTWOOD HOLDINGS GROUP INC									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner						
ETAL					[ WH	[WHG]										Director X 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 02/06/2004										belov			below)			
GABELLI FUNDS ONE CORPORATE CENTER				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														Form filed by One Reporting Person X Form filed by More than One Reporting Person							
RYE NY 10580														1 010							
(City)	(St	ate) (2	Zip)																		
		Tabl	el-N	lon-Deriv					· ·	Dis			·			<u> </u>					
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day.					Exe if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)			4. Securities Acquired ( Disposed Of (D) (Instr. 3 and 5)				3,4 Secur Benet Owne		ficially d	For (D) Ind	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	4			() or ()	Price		Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)			
Common	Stock			02/06/2	2004				Р			600		A	\$17	7.1	65	53,350		D	
		Та	ble II	- Derivat (e.g., p												y Ov	vned	l			
1. Title of Derivative Security (Instr. 3) 2. Or Exercis Price of Derivative Security		3. Transaction Date (Month/Day/Year)	Execut if any			tior			6. Date Exercis Expiration Dat (Month/Day/Ye		ite	te A ear) S U D S		7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)				9. Number o derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	,	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Exp Dat	oiration e	Title	or	nber						
		f Reporting Person <u>ET MANAGE</u>		NT INC	ET																
	LI FUNDS RPORATE	(First) CENTER	(M	iddle)																	
(Street) RYE		NY	10	)580																	
(City)		(State)	(Zi	p)		~															

1. Name and Address of Reporting Person <sup>*</sup> GABELLI MARIO J								
(Last)	(First)	(Middle)						
C/O GABEL	LI ASSET MANAG	EMENT INC						
ONE CORPO	DRATE CENTER							
(Street)								
RYE	NY	10580						
(City)	(State)	(Zip)						
	ddress of Reporting Pe GROUP CAPI	rson <sup>*</sup> TAL PARTNERS						
(Last)	(First)	(Middle)						
(Street)								
(City)	(State)	(Zip)						

Explanation of Responses:

<u>/s/ James E. McKee Attorney-</u> in-Fact for Mario J. Gabelli and Secretary of Gabelli Asset 02/10/2004 Management Inc. and Gabelli Group Captial Partners, Inc.

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.

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.