FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL					
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	Check this box if no longer subject
П	to Section 16. Form 4 or Form 5
Ш	obligations may continue. See
_	Instruction 1(h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

											mpany Act o							
GABELLI ASSET MANAGEMENT INC WES				2. Issuer Name and Ticker or Trading Symbol WESTWOOD HOLDINGS GROUP INC WHG ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner  Officer (give title Other (specify							
(Last)	(Fir	st) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/20/2004								belo	ν.Ο	below			
	RPORATE	,	,		4. If	Am	endment	, Date	of Origina	ıl File	d (Month/Da	ay/Year)		6. Indiv	vidual o	or Joint/Grou	p Filing (Check	Applicable
(Street) RYE	NY	7 1	0580											X		filed by Mor	e Reporting Pel e than One Re	
(City)	(Sta		Zip)															
		Tabl	e I - I	Non-Deriv	ative	Se	curitie	s Ac	quired,	Dis	posed of	, or Be	nefi	cially	Own	ed		
1. Title of \$	Security (Inst	r. 3)		2. Transacti Date (Month/Day		Exe if a	. Deemed ecution D any onth/Day	ate,	3. Transact Code (In 8)		4. Securiti Disposed 5)				Secur	icially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D)	Prid	ce	Repo Trans		(111341. 4)	(111301. 4)
Common	Stock			04/20/20	004				P		1,000	A	\$1	7.205	8	16,150	D	
		Та	ble II	l - Derivat (e.g., ρι							osed of, onvertible				wned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu		4. Transa Code 8)		on of Deriving Security (A) of (Dispose)	osed ) r. 3, 4	6. Date E Expirati (Month/I	on Da		7. Title a Amount Securition Underly Derivativ Security 3 and 4)	of es ing ve (Instr	Secu (Inst	vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
					Code	,	V (A)	(D)	Date Exercisa	ble	Expiration Date		Amour or Numbe of Shares	er				
		Reporting Person		NT INC	<u>ET</u>													
(Last)		(First)	(N	Middle)														
ONE CO	RPORATE	CENTER				_												
(Street) RYE		NY	1	0580														
(City)	(	(State)	(Z	Zip)														

	address of Reporting Per	son*
(Last)	(First)	(Middle)
C/O GABEL	LI ASSET MANAGI	EMENT INC
ONE CORPO	ORATE CENTER	
(Street)		
RYE	NY	10580
(City)	(State)	(Zip)
	ddress of Reporting Per	SON ΓAL PARTNERS
(Last)	(First)	(Middle)
ONE CORPO	ORATE CENTER	
(Street)		
RYE	NY	10580
(City)	(State)	(Zip)

**Explanation of Responses:** 

/s/ James E. McKee, Attorneyin-Fact for MARIO J.
GABELLI and Secretary of
GABELLI ASSET
MANAGEMENT INC. AND
GABELLI GROUP CAPITAL
PARTNERS, INC.

\*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).