FORM 4

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

Washington, D.C. 20549

| OMB APPROVAL             |           |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |
| hours per response: 0.8  |           |  |  |  |  |  |

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

|   |   |  |                   | 1 1100  |  |   |        |  |                |  |  | pany Act of   |  | 001   |  |  |  |   |               |   |  |
|---|---|--|-------------------|---|--|---|--------|--|----------------|--|--|---|--|-------|--|--|--|---|---------------|---|--|
| 1. Name and Address of Reporting Person*  GABELLI ASSET MANAGEMENT INC  ET AL |   |  |                   | 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 |  |       |  |  | Owner  |   |               |   |  |
|   |   |  |                   |   |  | 3. Date of Earliest Transaction (Month/Day/Year)            |        |  |                |  |  |   | $\neg$   |       | Offic<br>belo  | er (give title<br>w)   |  | Other<br>below  | (specify<br>) |   |  |
| (Last) (First) (Middle)   |   |  |                   |   | _  | 02/25/2004  |        |  |                |  |  |   | _  |       |  |  |  |   |               |   |  |
|   | LI FUNDS<br>RPORATE   | CENTER                                     |                   |   | 4. If <i>i</i>   | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |        |  |                |  |  |   |  |       | Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person |  |  |   |               |   |  |
| (Street)  |   |  |                   |   |  |   |        | X  | Form<br>Pers   | n filed by Moi   | re tha   | an One Rep  | oorting  |       |  |  |  |   |               |   |  |
| RYE   | NY  | ? 1  | 0580              |   |  |   |        |  |                |  |  |   |  |       |  | 1 010  | 011  |   |               |   |  |
| (City)  | (Sta  | ate) (Z                                    | Zip)              |   |  |   |        |  |                |  |  |   |  |       |  |  |  |   |               |   |  |
|   |   | Tabl                                       | e I - N           | Non-Deriv   | ative  | Se  | ecurit | es Ac  | quire          | d, Dis   | sp   | osed of,  | or Ben   | efici | ally (   | Own  | ed   |   |               |   |  |
| Date  |   |  |                   | ansaction<br>th/Day/Year)   |  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |        | Transaction<br>Code (Instr.                                    |                | 4. Securities Acquired (<br>Disposed Of (D) (Instr. and 5) |  |   | B, 4 Secu<br>Bend<br>Own                             |       | icially<br>d   | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) |  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |               |   |  |
|   |   |  |                   |   |  |   |        |  | v              |  | Amount   | (A) or (D)  |  |       | Following Reported Transaction(s) (Instr. 3 and 4)   |  | (msu. 4)   |   | (111501.4)    |   |  |
| Common  | Stock   |  |                   | 02/25/2   | 004  |   |        |  | P              | $\top$   |  | 2,000   | A  | \$17  | 2.25   | 6'   | 71,650   |   | D             |   |  |
|   |   | Та   | ble II            | - Derivat<br>(e.g., pı  |  |   |        |  |                | •  |  | sed of, or<br>onvertible  |  |       | •  | vned   |  |   |               | , |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                           | Derivative   Conversion   Date   Execution Security   Or Exercise   (Month/Day/Year)   if any |  | tion Date, Transa |   | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |   | Expira | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                |  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr<br>3 and 4) |   | 8. Price<br>of<br>Derivati<br>Security<br>(Instr. 5) |       | derivative<br>Securities<br>Beneficially   |  | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr.<br>4) | Beneficial<br>Ownership   |               |   |  |
|   |   |  |                   |   | Code   |   | V (A)  | (D)  | Date<br>Exerci | isable   |  | expiration<br>late T  | or<br>Nu<br>of                                       | umber |  |  |  |   |               |   |  |
|   |   | Reporting Person                           |                   | NT INC  | <u>ET</u>  |   |        |  |                |  |  |   |  |       |  |  |  |   |               |   |  |
| (Last)  | LI FUNDS  | (First)                                    | (M                | liddle)   |  | _   |        |  |                |  |  |   |  |       |  |  |  |   |               |   |  |
|   | RPORATE   | CENTER                                     |                   |   |  | _   |        |  |                |  |  |   |  |       |  |  |  |   |               |   |  |
| (Street)  |   |  |                   |   |  |   |        |  |                |  |  |   |  |       |  |  |  |   |               |   |  |
| RYE   |   | NY<br>———————————————————————————————————— | 1(                | 0580  |  | _   |        |  |                |  |  |   |  |       |  |  |  |   |               |   |  |
| (City)  |   | (State)                                    | (Zi               | ip)   |  |   |        |  |                |  |  |   |  |       |  |  |  |   |               |   |  |
|   |   |  |                   |   |  |   |        |  |                |  |  |   |  |       |  |  |  |   |               |   |  |

| 1. Name and Address of Reporting Person*  GABELLI MARIO J                        |         |          |  |  |  |  |  |  |
|--|---------|----------|--|--|--|--|--|--|
| (Last)   | (First) | (Middle) |  |  |  |  |  |  |
| C/O GABELLI ASSET MANAGEMENT INC   |         |          |  |  |  |  |  |  |
| ONE CORPORATE CENTER   |         |          |  |  |  |  |  |  |
| (Street)   |         |          |  |  |  |  |  |  |
| RYE  | NY      | 10580    |  |  |  |  |  |  |
|  |         |          |  |  |  |  |  |  |
| (City)   | (State) | (Zip)    |  |  |  |  |  |  |
| Name and Address of Reporting Person*     GABELLI GROUP CAPITAL PARTNERS     INC |         |          |  |  |  |  |  |  |
| (Last)   | (First) | (Middle) |  |  |  |  |  |  |
| (Street)   |         |          |  |  |  |  |  |  |
| (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

02/26/2004

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).