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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					or Sec	ction	30(h) o	t the Ir	nvestment	Com	pany Act	of 19	940								
GAMCO INVESTORS, 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						
(Last) (First) (Middle) ONE CORPORATE CENTER					3. Da	3. Date of Earliest Transaction (Month/Day/Year) 12/10/2010										Offic belo	er (give title w)		Other below)	(specify	
					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) RYE NY 10580														Form filed by One Reporting Person X Form filed by More than One Reporting Person							
(City) (State) (Zip)																					
		Tabl	el-N	lon-Deriv	ative	Sec	uritie	s Acq	uired,	Disp	osed o	of, o	r Ben	efic	ially	Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						y/Year) Execution Date, if any (Month/Day/Year)		3. Transac Code (Ir 8)		on Dispose		ities Acquired d Of (D) (Instr.		3,4 Secur Benef Owne Follo		icially d	Foi (D) Ind	Ownership rm: Direct or direct (I) str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amoun	t	(A) or (D)	Pri	ice	(Instr	action(s) 3 and 4)					
Common Stock					12/10/2010				G		1,50				\$ <mark>0</mark>	932,400(1)		D			
		Та	ble II	- Derivat (e.g., p												wned					
1. Title of Derivative Security (Instr. 3)	Conversion Date Execution Date, Tr or Exercise (Month/Day/Year) if any C. Month/Day/Year) 8) Derivative		Code (I	4. 5. Number Transaction Code (Instr. Derivative			Expiration Date Amount of (Month/Day/Year) Securities Underlying Derivative				1	of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned		Ownership Form: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
	Security						(A) o Disp of (D (Instr and s	osed) *. 3, 4				Security (Instr 3 and 4)			·		Following Reported Transaction (Instr. 4)	1(S)	(I) (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisat		expiration Date	Titl	or Nu of	ioun mbei ares							
1. Name and Address of Reporting Person [®] GAMCO INVESTORS, INC. ET AL																-			-		
(Last) (First) (M ONE CORPORATE CENTER			iddle)		-																
(Street) RYE NY 10			9580		_																
(City) (State) (Zip)																					
1. Name and Address of Reporting Person [*] GABELLI MARIO J																					
(Last)(First)(Middle)C/O GAMCO INVESTORS, INCONE CORPORATE CENTER																					
(Street) RYE NY 10580				9580																	
(City) (State) (Zip)			p)																		

1. Name and Address of Reporting Person [*] GGCP, INC.							
(Last) 140 GREENWICH	(First) I AVENUE	(Middle)					
(Street) GREENWICH	СТ	06830					
(City)	(State)	(Zip)					

Explanation of Responses:

1. These securities are owned by GAMCO Investors, Inc. ("GBL"). GGCP, Inc. and Mr. Mario J. Gabelli have less than a 100% interest in GBL and hereby disclaim ownership of these securities in excess of their pecuniary interests.

<u>/s/ Peter D. Goldstein.</u> <u>Attorney-In-Fact for MARIO J.</u> <u>GABELLI, GGCP, INC., and</u> <u>GAMCO INVESTORS, INC.</u> ** Signature of Reporting Person Date

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

 * 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.