## 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

							.,				ipany Act									
1. Name and Address of Reporting Person <sup>*</sup> 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) 09/20/2005										Office Delov	er (give title w)		Other below)	(specify
					4. lf /	4. If Amendment, Date of Original Filed (Month/Day/Year)										ual o	or Joint/Group	p Filing	g (Check A	Applicable
(Street) RYE NY 10580														Line) Form filed by One Reporting Person X Form filed by More than One Reporting						
(City) (State) (Zip)														F	Perso	-				
		Tabl	el-l	Non-Deriv	ative	Sec	uritie	s Aco	quired,	Disp	oosed o	f, or E	Bene	ficia	ally O	wne	əd			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)						Execution Date,				Disposed	ities Acquired (A d Of (D) (Instr. 3			3, 4 Secur Benef Owned Follow		icially 1 ving	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)		Price	(Instr. 3 and 4)		action(s)			
Common Stock 09/20/20				.005	)05					1,700	A \$		\$18	.55	55 1,092,250		<b>D</b> <sup>(1)</sup>			
		Та	ble II	- Derivat							sed of, o				y Owr	ned				
1. Title of	2.	3. Transaction		eemed	4.		_	ımber	6. Date E	xerci	sable and	7. Title	e and		8. Price	•	9. Number o			11. Nature
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	if any	ition Date, h/Day/Year)		Transaction Code (Instr. 8)		vative rities uired r osed ) r. 3, 4 5)	Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Inst 3 and 4)		str.	of Derivative Security (Instr. 5)		derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4) (s)	of Indirect Beneficial Ownership (Instr. 4)	
													Amc or Num							
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of Shai	res						
1. Name and Address of Reporting Person <sup>*</sup> GAMCO INVESTORS, INC. ET AL																				
(Last) (First) (Middle) ONE CORPORATE CENTER				1iddle)																
(Otre et)						-														
(Street) <u>RYE</u> NY 1058			0580		_															
(City) (State) (Zip)																				
1. Name and Address of Reporting Person <sup>*</sup> GABELLI MARIO J																				
(Last) (First) (Middle) C/O GAMCO INVESTORS, INC. ONE CORPORATE CENTER					_															
						-														
(Street) <u>RYE</u> <u>NY</u> 10580					_															
(City) (State) (Zip)																				

1. Name and Address of Reporting Person <sup>*</sup> 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.

/s/ James E. McKee Attorneyin-Fact for MARIO J. GABELLI and GGCP, INC and 09/21/2005 Secretary for GAMCO INVESTORS, INC.

\*\* 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.