FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burd	len					
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

				riied								pany Act of		1934								
1. Name and Address of Reporting Person* GABELLI ASSET MANAGEMENT INC FT AI				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								
ET AL					[WHG]					_			er (give title	2	_	(specify						
(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 12/22/2003								below) below)														
GABELI	LI FUNDS				4. If	Ame	endme	nt, Date	of Origi	nal Fil	ed	(Month/Da	y/Year)	- 1	6. Individual or Joint/Group Filing (Check Applicable							
ONE CO	RPORATE	CENTER												ا	Line) Form filed by One Reporting Person							
(Street)															X		filed by Mor	e tha	n One Rep	oorting		
RYE	NY	7 1	0580													Pers	on					
(City)	(Sta	ate) (Z	Zip)																			
		Tabl	e I - I	Non-Deriv	ative	Se	curit	ies Ac	quire	l, Di	sp	osed of,	or Be	nefici	ally (Owne	ed					
1. Title of	Security (Ins	tr. 3)		2. Transacti Date (Month/Day		Exe if a			3. Transa Code 8)		[4. Securitie Disposed C 5)			and	Secur	icially d	Forr (D) o	wnership n: Direct or rect (I) tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	,	Amount	(A) or (D)	Price		Repor Trans		(iiisi	u. 4)	(111501.4)		
Common	Stock			12/22/20	003				P		T	2,100	A	\$16.	881	64	46,750		D			
		Та	ble II	I - Derivat (e.g., pu								sed of, o				vned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	eemed ution Date,	4. Transa Code (actic	5. on of of De Se Ac (A Di of	Number rivative curities quired or sposed (D) str. 3, 4 d 5)	6. Dat Expira (Mont	Exer	cisa	able and 7	7. Title and Amount of Securities Underlyin Derivative Security (3 and 4)	nd of s ng	8. Pr of Deriv Secu (Insti	vative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F C C C C C C C C C C C C C C C C C C C	0. Dwnership Form: Direct (D) or Indirect I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	Į,	V (A	(D)	Date Exerci	sable		xpiration ate	o N o	umber								
		f Reporting Person ET MANAGE		NT INC	<u>ET</u>																	
	LI FUNDS RPORATE	(First)	(N)	Middle)																		
(Street)		NY	1	0580		_																
(City)		(State)		Zip)		-																

	Address of Reporting Per	rson*					
(Last)	(First)	(Middle)					
C/O GABELLI ASSET MANAGEMENT INC							
ONE CORPORATE CENTER							
(Street)							
RYE	NY	10580					
(City)	(State)	(Zip)					
	Address of Reporting Per	TAL PARTNERS					
(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 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.

 $^{^{\}star}$ 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).