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

1. Name and Address of Reporting Person*  GAMCO INVESTORS, INC. ET AL				2. Issuer Name and Ticker or Trading Symbol WESTWOOD HOLDINGS GROUP INC								Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner							
	[ WHG ]											ctor er (give title	2	_	wner (specify				
(Last) (First) (Middle) ONE CORPORATE CENTER					3. Date of Earliest Transaction (Month/Day/Year) 08/27/2012									belo			below)		
						4. If Amendment, Date of Original Filed (Month/Day/Year)							′ I	Individual or Joint/Group Filing (Check Applicable Line)					
(Street) RYE NY 10580													Form filed by One Reporting Person  X Person  Person						
(City)	(Sta	ate) (Z	<u>Z</u> ip)											1 013	OII				
		Tabl	eI-	Non-Deriv	ative \$	Seci	urities	Ac	quired	, Di	sposed of	f, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				ear) E	emed ion Date n/Day/Ye	. I	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			and Secur Benef Owne		ficially d	For (D) Indi	irect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code V		Amount	(A) or (D)	Price	Price		Following Reported Transaction(s) (Instr. 3 and 4)			str. 4)	
Common Stock 08/27/20				12			S		400	D	\$37.37		853,100			<b>D</b> <sup>(1)</sup>			
Common Stock 08/28/20				12			S		2,300	D	\$37.	337.3485		350,800		<b>D</b> <sup>(1)</sup>			
		Та	ble	II - Derivati (e.g., pu				•	,	•	osed of, o			•	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec if an	Deemed cution Date, y nth/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration I (Month/Day		Date	7. Title Amour Securit Underl Derivat Securit 3 and 4	it of ies ying ive y (Instr.	of Deri Sec (Ins	Price rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	(   [   (   (	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amoun or Numbe of Shares	r					
		Reporting Person	. ET	「AL															

	INVESTORS, INC	
(Last)	(First)	(Middle)
ONE CORPO	ORATE CENTER	
(Street)		
RYE	NY	10580
(City)	(State)	(Zip)

1. Name and Address of Reporting Person*  GABELLI MARIO J									
(Last)	(First)	(Middle)							
C/O GAMCO INVESTORS, INC									
ONE CORPORATE CENTER									
(Street)									
RYE	NY	10580							
(City)	(State)	(Zip)							
Name and Address of Reporting Person*     GGCP, INC.									
(Last)	(First)	(Middle)							
140 GREENWICH AVENUE									
(Street)									
GREENWICH	CT	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/ Douglas R. Jamieson, Attorney-In-Fact for MARIO J. GABELLI, GGCP, INC., and GAMCO INVESTORS, INC.

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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).

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.