## 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

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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				
					3. Date of Earliest Transaction (Month/Day/Year) 10/13/2008									Offic belo	er (give title w)	Othe below	r (specify v)
				4. lf /	Ameno	dment,	Date	of Origir	nal Fi	led (Month/D	ay/Yea	r)		ividual o	or Joint/Grou	p Filing (Checł	Applicable
(Street)													Line)	Form	n filed by One	e Reporting Pe	rson
RYE NY 10580												X Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)														
		Tabl	e I - Non-Deriv	vative	Secu	uritie	s Ac	quired	, Di	1			-	Own	ed		
1. Title of Security (Instr. 3) Date (Month/Day/Ye				Year) i	Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			4 and Secu Bene Own		wing	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	)	Trans	saction(s) 3 and 4)				
Common	Stock		10/13/20					S		2,400	D		.7571		055,900	<b>D</b> <sup>(1)</sup>	
		Та	ble II - Deriva (e.g., p	tive Se uts, ca	ecuri alls,	ties / warra	Acqı ants	uired, I , optio	Disp ns, (	osed of, o	or Ber le sec	neficia uritie	ally C s)	wned	l		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		ansaction of ode (Instr. Derivative		vative rities uired r osed ) r. 3, 4	Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	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	Amour or Numbe of Shares	er				
		Reporting Person															
(Last) ONE CO	RPORATE	(First) CENTER	(Middle)		_												
(Street) RYE	-	NY	10580		_												
(City)		(State)	(Zip)														
	nd Address of	Reporting Person	•														
(Last) (First) (Middle) C/O GAMCO INVESTORS, INC ONE CORPORATE CENTER																	
(Street) RYE	-	NY	10580		_												
(City)		(State)	(Zip)														

1. Name and Address of Reporting Person <sup>*</sup> GGCP, INC.							
(Last) (First) (Middle) 140 GREENWICH AVENUE							
(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/ Peter D. Goldstein.

 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.

 $^{\ast}$  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.