## 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 <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)					- 3. Da	3. Date of Earliest Transaction (Month/Day/Year) 11/15/2005									Offic belo	er (give title w)	Othe belo	er (specify w)
ONE CORPORATE CENTER					4. If Amendment, Date of Original Filed (Month/Day/Year)								· .	6. Individual or Joint/Group Filing (Check Applicable				
(Street) <u>RYE NY 10580</u>													Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person					
(City) (State) (Zip)																		
		Tabl	e I - Nor	n-Deriva	ative	Secu	uritie	s Ac	quired	, Dis	sposed of	f, or B	Benefic	cially	Own	ed		
1. Title of Security (Instr. 3) Date (Month/Day/Ye				Execution Date,							red (A) ( str. 3, 4	and Securitie Benefici Owned Followir		rities ficially ed	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			orted saction(s) r. 3 and 4)		
Common	Stock			/15/200					Р		2,900	Α		.0486		104,050	<b>D</b> <sup>(1)</sup>	
		Та									osed of, o convertib				wned	l		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	version Date Execution Date, ixercise (Month/Day/Year) ivative (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Da (Month/Day/Y		Date	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number o derivative Securities Beneficially Owned Following Reported Transaction( (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	Amoun or Numbe of Shares	er				
		Reporting Person		_														
(Last) (First) (Middle) ONE CORPORATE CENTER					-													
(Street) RYE NY			1058	30		_												
(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 interest.

/s/ James E. McKee Attorney-<br/>in-Fact for MARIO J.GABELLI and GGCP, INC.11/16/2005and Secretary for GAMCO<br/>INVESTORS, INC.11/16/2005

\*\* 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.