FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
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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 (Last) (First) (Middle) ONE CORPORATE CENTER (Street) RYE NY 10580					WE [WI 3. Da 03/2	2. Issuer Name and Ticker or Trading Symbol WESTWOOD HOLDINGS GROUP INC [WHG] 3. Date of Earliest Transaction (Month/Day/Year) 03/24/2009 4. If Amendment, Date of Original Filed (Month/Day/Year)							NC (Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner Officer (give title below) Other (specify below) Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(Sta	ate) (Z	Zip)										X	Pers	•				
		Tabl	eI-	Non-Deriv	ative	Secu	urities	s Ac	quired	l, Di	sposed o	f, or B	enefic	ially	Owne	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				ear) if	xecut any	emed ion Date, n/Day/Year)		3. Transac Code (Ir 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Secu Bene Owne		rities ficially ed		Ownership rm: Direct or lirect (I) str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price		Repo Trans	Following Reported Fransaction(s) Instr. 3 and 4)		su. 4)	(111501.4)	
Common	Stock			03/24/200)9			G 1,50		1,500	D	\$	\$0		016,800		D ⁽¹⁾		
Common Stock 03/24/200)9			S		1,600	D	\$40.	0.5867 1		015,200		D ⁽¹⁾			
		Та	ble	II - Derivati (e.g., pu							osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execur) if any	Deemed cution Date, ly nth/Day/Year)	4. Transaction Code (Instr. 8)				Expiration [e (Month/Day/ s		Date	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Seci	Price ivative surity 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 Exerci	sable	Expiration Date	Title	Amount or Number of Shares						
		Reporting Person TORS, INC		<u>Γ AL</u>															

GAMCO INVESTORS, INC. ET AL						
(Last)	(First)	(Middle)				
ONE CORP	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 INV	ESTORS, INC							
ONE CORPORATE CENTER								
(Street)								
RYE	NY	10580						
(City)	(State)	(Zip)						
1. 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/ 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.

- * 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.