FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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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

					or Sec	tion 3	su(n) o	it the ir	ivestment	Con	ipany Act	01 194	<u> </u>						
1. Name and Address of Reporting Person* GAMCO INVESTORS, INC. ET AL					2. Issuer Name and Ticker or Trading Symbol WESTWOOD HOLDINGS GROUP INC [WHG]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner			wner			
(Last) (First) (Middle) ONE CORPORATE CENTER					3. Date of Earliest Transaction (Month/Day/Year) 06/16/2011									Officer (give title Other (specify below) below)					
(Street) RYE NY 10580						If Amendment, Date of Original Filed (Month/Day/Year)							6. Ind Line)	Form filed by One Reporting Person					
(City)	(518		^{Zip)} e I - N	lon-Deriv	ative S	 Secu	ıritie	s Acq	uired, [—— Disp	osed o	f, or	Bene	ficially	Own	ed			
1. Title of Security (Instr. 3) 2. Transa Date				2. Transac	ion 2A. Deemed Execution Date,			d Date,	3. 4. Se Transaction Disp Code (Instr. and			Securities Acquired (5. Amount of Securities Beneficially Owned		Forr (D) o	rect (I)	7. Nature of Indirect Beneficial Ownership
								Code V		Amount		(A) or (D) Price		Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)	
Common Stock 06/16/20					011			G		1,500		D	\$ <mark>0</mark>	927,900		D ⁽¹⁾			
Common Stock 06/17/20					011		G		1,500)	D	\$ <mark>0</mark>	9:	926,400		D ⁽¹⁾			
		Та	ble II	- Derivati (e.g., pu				•	,	•	,			•	wned			•	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)) if any	ion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable an Expiration Date (Month/Day/Year)		te	d 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		of De Se (In	Price rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct or Indi (I) (Ins 4)	Ownership Form: Direct (D) or Indirect I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	V (A) (D)				Expiration Date	Amour or Number of Title Shares		ber					
		Reporting Person		<u>AL</u>															

GAMCO INVESTORS, INC. ET AL						
(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/ 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.