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*  Freeman Mark  (Last) (First) (Middle)  200 CRESCENT COURT  SUITE 1200  (Street)  DALLAS TX 75201  (City) (State) (Zip) |  |  |                    |           |                 | 2. Issuer Name and Ticker or Trading Symbol WESTWOOD HOLDINGS GROUP INC [WHG]  3. Date of Earliest Transaction (Month/Day/Year) 06/19/2014  4. If Amendment, Date of Original Filed (Month/Day/Year) |  |                                  |         |   |  |        |   |  | X Off bell Individuals X For Forest                  | Chief Investment Officer  ividual or Joint/Group Filing (Check Applie |  |  |  |
|--|--|--|--------------------|-----------|-----------------|--|--|----------------------------------|---------|---|--|--------|---|--|--|---|--|--|--|
| (Oity)   | 101  |  |                    | lon-Deriv | ative S         | Secu   | ıritio   | s Aco                            | uired [ | )ier  | nosed of                                   | forl   | Rono  | ficia  | IIv Ow   | ned   |  |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da   |  |  |                    |           | Execution Date, |  |  | 3.<br>Transact<br>Code (In<br>8) | ion     | 4. Securi   | ties Acquired (A) or I Of (D) (Instr. 3, 4 |        | 5. A<br>Seci<br>Ben<br>Own<br>Foll<br>Rep<br>Trar     | 5. Amount of Securities Feneficially (Owned  |  | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4)  |  |  |  |
| Common Stock 06/19/  |  |  |                    |           |                 | 2014 06/   |  | 014                              | G       |   | 887  | $\top$ | D   | \$0.0  | <del>\</del>   | 114,579   |  |  |  |
| Common Stock 06/20/2   |  |  |                    |           |                 | 2014 06.   |  | 6/23/2014                        |         |   | 2,730                                      |        | D   | \$0.0  | 00   | 111,849   |  |  |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |                    |           |                 |  |  |                                  |         |   |  |        |   |  |  |   |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | e Conversion or Exercise (Month/Day/Year) if any (Month/Day/Year) Price of Derivative Security   |  | Transad<br>Code (I |           |                 |  | 6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date |                                  |         | 7. Title and Amount of Securities Underlying Derivative Security (Inst: 3 and 4)  Amou or Numb of Title Share |  | unt    | 8. Price<br>of<br>Derivativ<br>Security<br>(Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owner<br>Form:<br>Direct<br>or Ind<br>(I) (Ins<br>4) | (D)   | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |

Explanation of Responses:

Remarks:

Julie K. Gerron as attorney-in-

<u>fact</u>

\*\* 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.