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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See |
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| 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

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
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| Estimated average burden | | | | | | | | | | |
| hours per response. | 05 | | | | | | | | | |

| | | | | _ | | | |
|------------------------|--|-------|--|------------------------|--|---|--|
| | | | 2. Issuer Name and Ticker or Trading Symbol <u>WESTAR ENERGY INC /KS</u> [WR] | (Check | tionship of Reporting Pers all applicable) Director Officer (give title | son(s) to Issuer 10% Owner Other (specify | |
| (Last) 818 S. KANSA | ast) (First) (Middle) 18 S. KANSAS AVE. | | 3. Date of Earliest Transaction (Month/Day/Year) 04/10/2006 | X | below) EVP, Generation & | below) | |
| (Street) TOPEKA | KS | 66612 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | idual or Joint/Group Filing Form filed by One Repo Form filed by More thar | orting Person | |
| (City) | (State) | (Zip) | | | Person | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---------------------------------|--|---|------------------------------|---|--------|-----------------------|---|---|---|---------------------------|
| | | | Code | v | Amount | (A) or Price Transact | | Transaction(s) (Instr. 3 and 4) | | (11501 4) |
| Common Stock, Par Value \$5.00 | 04/10/2006 | | F ⁽¹⁾ | | 9,829 | D | \$21.125 | 86,181 ⁽²⁾ | D | |
| Common Stock, Par Value \$5.00 | | | | | | | | 9,073 | Ι | Held in 401(k) Plan |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 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) | 4. Transa Code (8) | | of | | 6. Date Exerc Expiration Da (Month/Day/Y | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 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 Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. 9,829 shares were forfeited for the payment of taxes due upon the vesting and distribution of 31,250 restricted share units granted to the Reporting Person under the Issuer's Long Term Incentive and Share Award Plan. The grant of the restricted share units was previously reported in a Form 4 filed by the Reporting Person.

2. Includes 31,250 restricted share units that are subject to forfeiture and 53 shares acquired through the reinvestment of dividends.

Remarks:

Cynthia S. Couch by power of

attorney

** 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.

Date Date

04/11/2006