FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO)VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

	Check this box if no longer subject to								
١	Section 16. Form 4 or Form 5								
ı	obligations may continue. See								
	Instruction 1(b)								

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 * $\underline{AKIN\ BRUCE\ A}$							2. Issuer Name and Ticker or Trading Symbol WESTAR ENERGY INC /KS [WR]									ionship of Reportin all applicable) Director		10%	Owner	
(Last) (First) (Middle) 818 S KANSAS AVE						3. Date of Earliest Transaction (Month/Day/Year) 01/18/2018									X	Officer (give title below) SVP, Power		below	Other (specify below) Delivery	
(Street) TOPEKA KS 66612 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indiv ine) X	lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - No	n-Deriv	ative	Se	curitie	es Ac	quired	, Dis	posed o	f, or	Ben	eficia	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Date,			Transaction Disposed Of (I Code (Instr.			es Acquired (A) or Of (D) (Instr. 3, 4 and !			nd 5)	5. Amount of Securities Beneficially Owned Followin		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect ct Beneficial Ownership	
									Code	v	Amount	(A) or (D) Pri		Price		Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock Par Value \$5.00 01/18/2							2018		A ⁽¹⁾		4,389	1	A	\$0		39,348 ⁽²⁾		D		
Common Stock Par Value \$5.00 01/18/2							2018		F ⁽³⁾		1,289	1	D	\$52.825		38,059(2)		D		
		Та									sed of, onvertib					vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transact Code (Ins 8)				6. Date E Expiration (Month/I	on Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		nstr. 3			9. Number of 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 Exercisa	able	Expiration Date	Title	of	mber ares						

Explanation of Responses:

- 1. Vesting of 4,389 performance-based restricted share units that were granted on February 25, 2015, with a vesting date of January 1, 2018. Under the terms of the grant, the number of shares to be received by the Reporting Person at vesting is increased or decreased based on the Issuer's Total Shareholder Return as compared to the Total Shareholder Return for a defined Peer Group of companies for the defined Performance Period. The determination that the performance criteria relating to the grant had been met and the calculation of the number of shares to be distributed were completed on January 18, 2018.
- 2. Includes 6,780 restricted share units that are subject to forfeiture and 1 share acquired through the reinvestment of dividends.
- 3. Forfeiture of shares for the payment of taxes upon the vesting of 4,389 performance-based restricted share units granted on 2/25/15.

Remarks:

Cynthia S. Couch by power of attorney

01/18/2018

** 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.