

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

Check this box if no longer subject to Section 16. Form 4 or Form 5 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

OMB APPROVAL	
OMB Number:	3235-0287
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1. Name and Address of Reporting Person* <b>GREENWOOD GREG A</b>			2. Issuer Name and Ticker or Trading Symbol <b>WESTAR ENERGY INC /KS [ WR ]</b>			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <b>SVP, Strategy</b>			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) <b>01/01/2016</b>			6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person Form filed by More than One Reporting Person			
<b>818 S KANSAS AVE</b>			4. If Amendment, Date of Original Filed (Month/Day/Year)						
(Street)	<b>TOPEKA</b>	<b>KS</b>	<b>66612</b>						
(City)	(State)	(Zip)							

**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. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock, Par Value \$5.00	11/12/2015		G	V	536	D	\$0	37,019 <sup>(1)</sup>	D	
Common Stock, Par Value \$5.00	01/01/2016		F <sup>(2)</sup>		3,042	D	\$42.6225	33,977 <sup>(3)</sup>	D	
Common Stock, Par Value \$5.00	01/01/2016		G <sup>(4)</sup>	V	6,138	D	\$0	27,839 <sup>(3)</sup>	D	
Common Stock, Par Value \$5.00	01/01/2016		G <sup>(4)</sup>	V	6,138	A	\$0	6,138	I	Held by Trust <sup>(5)</sup>
Common Stock, Par Value \$5.00								1,776	I	401(k) plan account

**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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		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)					

**Explanation of Responses:**

- Includes 28,190 restricted share units that are subject to forfeiture.
- Forfeiture of 3,042 shares for the payment of taxes upon the vesting of 9,180 restricted share units granted on 2/28/13. The grant of the restricted share units was reported at the time of grant.
- Includes 19,010 restricted share units that are subject to forfeiture.
- Shares were transferred from the reporting person to the reporting person's trust, for which he and his spouse are co-trustees and beneficiaries.
- Shares are held in the reporting person's trust, for which he and his spouse are co-trustees and beneficiaries.

**Remarks:**

Cynthia S. Couch by power of attorney 01/04/2016

\*\* 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.