## 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	
Instruction 1(b).	

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     WRIGHT LORI A						GREAT PLAINS ENERGY INC [ GXP ]											all appli Direct Office	icable) or r (give title	g Per	son(s) to Iss 10% Ov Other (s	vner
(Last) (First) (Middle) C/O GREAT PLAINS ENERGY INCORPORATED 1200 MAIN STREET						3. Date of Earliest Transaction (Month/Day/Year) 03/02/2010											below) below)  VP and Controller				
(Street) KANSAS (City)	S CITY M		64105 (Zip)		_   4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)											ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriv  1. Title of Security (Instr. 3)  2. Trans Date Date					saction	2	2A. Deemed Execution Date, if any (Month/Day/Year)		e, 3.		tion	4. Secur Dispose 5)	rities Ad	cquire	d (A) or		Owned  5. Amount of Securities Beneficially		6. Ownership Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial
				(MOHUII)	(Month/Day/Year)				ear)   8)	3)	v	Amount		(A) or (D)	Price			Following d tion(s)		str. 4)	Ownership (Instr. 4)
Common Stock																	2,8	37(1)		I ·	401-k
Common Stock					2/2010					A		1810	(2)	) A :		(2)	15	,522	D		
Common Stock 03/0					2/2010	/2010				A		1,523	3 <sup>(3)</sup> A		\$0	(3)	17,045		D		
	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. Deeme Execution if any (Month/Day	Date,	4. Transactio Code (Insti 8)		of Deriv Secu Acqu (A) o Dispo	or osed ) r. 3, 4	6. Date Exercisal Expiration Date (Month/Day/Year)			Amoun Securit Underly Derivat		Title and lount of surities derlying rivative Security str. 3 and 4)		De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Ex Da	piration te	Title	N C	Amount or Number of Shares						
Stock options (right to buy) <sup>(4)</sup>	(4)								(	(4)		(4)	Comn		1,312			1,312		D	

### **Explanation of Responses:**

- 1. Amount includes 11 shares acquired between February 6, 2010, and March 2, 2010, from automatic payroll deduction/investment and participation in the Company?s 401-K Plan.
- 2. Award of common stock pursuant to performance share grant under the Company?s Long-Term Incentive Plan.
- 3. Award of restricted stock pursuant to the Company?s Long-Term Incentive Plan.
- 4. Stock options granted in tandem with stock appreciation rights exercisable automatically in the event of a change in control as defined by the Long-Term Incentive Plan under which they are granted. Options may be exercised with cash or previously-owned shares of Common Stock.

## Remarks:

Lori A. Wright

03/04/2010

\*\* 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.