Nielsen Kelli

Form 3 July 13, 2018												
FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										OMB APPROVAL		
										OMB Number:	3235-	0104
	IN	NITIAL S	TATEMENI			OW]	NERSH	IP OF		Expires:	Januar	
SECURITIES										Estimated average burden hours per		
		n 17(a) of	to Section 16 the Public Uti O(h) of the Inv	lity Holdi	ng Company	y Ac	t of 1935			response		0.5
(Print or Type Re	esponses)											
1. Name and Ad Person <u>*</u> Nielsen Ko		orting	2. Date of Ever Statement (Month/Day/Ye	3. Issuer Name <b>and</b> Ticker or Trading Sym FS Bancorp, Inc. [FSBW]				ıbol				
(Last)	(First)	(Middle)	07/01/2017						f Amendment, Date Original ed(Month/Day/Year)			
6920 220TH	STREET S	W				11	1. 11.)		,	ý	,	
	(Street)				(Check	all aj	pplicable)	6	. Indi	vidual or Joir	t/Group	
MOUNTLAH TERRACE,Â		)43			Director X Officer (give title below Ex VP,Retai	w) (s		w) Potenting -	X_Fo erson For	Check Applica orm filed by On rm filed by Mo ng Person	e Reporting	
(City)	(State)	(Zip)	7	Fable I - N	Non-Derivat	tive !	Securiti		-	•	1	
1.Title of Securi (Instr. 4)	ty		2	2. Amount o Beneficially (Instr. 4)	f Securities	3. Ow For Dire or I (I)	nership		e of I hip	ndirect Benef		
Common Sto	ck, par valı	ue \$0.01 p	er share	C			D	Â				
Reminder: Report owned directly o	-	te line for ea	ch class of secur	ities benefic	ially S	SEC 1	473 (7-02)	)				
	informa require	ation conta d to respo	pond to the co ained in this fo nd unless the MB control nur	rm are not form displ								
Τε	ble II - Deri	vative Secu	rities Beneficiall	y Owned (e	.g., puts, calls,	, war	rants, opti	ions, con	verti	ble securities	;)	
1. Title of Deriv (Instr. 4)	ative Security	Expir	te Exercisable ar ration Date /Day/Year)	Securiti	and Amount o les Underlying ive Security		4. Conversio or Exercis Price of	e Forn	nershij n of vative	p Beneficia (Instr. 5)	e of Indire al Owners	

Date

Exercisable Date

Expiration Title

Derivative

Security

Amount or

Number of

Security:

Direct (D)

or Indirect

Shares

(I) (Instr. 5)

## **Reporting Owners**

Reporting Own	Relationships							
	Director	10% Owner	Officer	Other				
Nielsen Kelli 6920 220TH STREET MOUNTLAKE TERF	Â	Ex VP,Retail Banking/Marketin		Â				
Signatures								
/s/Kelli Nielsen	07/11/2018							
<u>**</u> Signature of Reporting Person	Date							

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 5(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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.