## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, | D.C. | 20549 |
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| Filed pursuant to Section 2 |
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## GES 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*     ONEILL THOMAS F      |                                                                                                                                              |             |                 |                                         |         |              | 2. Issuer Name and Ticker or Trading Symbol BankFinancial CORP [ BFIN ] |                                                                |              |                  |                                                                                                   |                    |                    |                                         |                                                                                                 |                                                                   | olicable)                                                                                                                        |                       | Person(s) to Issuer  10% Owner |  |
|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------|-----------------------------------------|---------|--------------|-------------------------------------------------------------------------|----------------------------------------------------------------|--------------|------------------|---------------------------------------------------------------------------------------------------|--------------------|--------------------|-----------------------------------------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|-----------------------|--------------------------------|--|
| (Last)<br>15W060                                               |                                                                                                                                              | First)      | (M<br>TTAGE ROA | Middle)                                 |         |              | 3. Date of Earliest Transaction (Month/Day/Year) 06/19/2013             |                                                                |              |                  |                                                                                                   |                    |                    |                                         |                                                                                                 | Offic<br>belov                                                    | er (give title<br>w)                                                                                                             |                       | Other (specify below)          |  |
| (Street) BURR R (City)                                         |                                                                                                                                              | L<br>State) |                 | 0527<br>Zip)                            |         | 4. If        | 4. If Amendment, Date of Original Filed (Month/Day/Year)                |                                                                |              |                  |                                                                                                   |                    |                    |                                         | 6. Indi<br>Line)<br>X                                                                           | Forn<br>Forn                                                      | idual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person |                       |                                |  |
|                                                                |                                                                                                                                              |             | Table           | e I - Noi                               | n-Deriv | ative        | Sec                                                                     | uritie                                                         | s Ac         | quired           | , Dis                                                                                             | posed o            | f, or E            | 3ene                                    | ficially                                                                                        | Owne                                                              | ed                                                                                                                               |                       |                                |  |
| 1. Title of Security (Instr. 3)  2. Transact Date (Month/Date) |                                                                                                                                              |             |                 |                                         |         | Execution Da |                                                                         | Date,                                                          | Code (Instr. |                  |                                                                                                   |                    |                    | Securi<br>Benefi                        | icially<br>d Following                                                                          | Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)                 | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)                                                                |                       |                                |  |
|                                                                |                                                                                                                                              |             |                 |                                         |         |              |                                                                         |                                                                |              | Code             | v                                                                                                 | Amount             | (A) or<br>(D) Pri  |                                         | rice                                                                                            |                                                                   | Transa                                                                                                                           | action(s)<br>3 and 4) | (111341.4)                     |  |
| Common                                                         | Common Stock 0                                                                                                                               |             |                 |                                         | 06/19/  | /2013        |                                                                         |                                                                |              | P                |                                                                                                   | 100                | A \$8.3            |                                         | 8.1644                                                                                          | 100                                                               |                                                                                                                                  | D                     |                                |  |
|                                                                | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |             |                 |                                         |         |              |                                                                         |                                                                |              |                  |                                                                                                   |                    |                    |                                         |                                                                                                 |                                                                   |                                                                                                                                  |                       |                                |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)            |                                                                                                                                              |             | n Date,         | 4.<br>Transaction<br>Code (Instr.<br>8) |         | of           |                                                                         | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |              |                  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |                    | Der<br>Sec<br>(Ins | rice of<br>ivative<br>curity<br>ctr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)                                                               |                       |                                |  |
|                                                                |                                                                                                                                              |             |                 |                                         |         | Code         | v                                                                       | (A)                                                            | (D)          | Date<br>Exercisa |                                                                                                   | Expiration<br>Date | Title              | or<br>Numl<br>of<br>Share               | per                                                                                             |                                                                   |                                                                                                                                  |                       |                                |  |

**Explanation of Responses:** 

/s/ F. Morgan Gasior, pursuant to power of attorney

06/21/2013

\*\* 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.