FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

	OMB APPRO	OVAL
	OMB Number:	3235-0287
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1	hours ner resnonse.	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

1. Name and Address of Reporting Person* <u>Gasior F Morgan</u>					2. Issuer Name and Ticker or Trading Symbol BankFinancial CORP [BFIN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 02/21/2017								X Director 10% Owner X Officer (give title below) Other (specify below) Chairman, CEO & President					(specify
15W060 NORTH FRONTAGE ROAD (Street) BURR RIDGE IL 60527				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(City)					_								X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Та	ble I - N	on-De	rivati	ve S	ecur	ities Ac	quire	d, Di	sposed o	f, or Be	nefici	ally	Owned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea		Execution Date,	Transaction Dispose Code (Instr.			ies Acquired (A) or Of (D) (Instr. 3, 4 and 5		d 5)	Beneficially Owned Followin		6. Own Form: I (D) or II (I) (Inst	oirect Ind idirect Be	7. Nature of ndirect Beneficial Dwnership				
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Stock			02/21/2017		7	7		М		150,000) A	\$11.	.99	275,380		D		
Common Stock			02/2	/21/2017				F		134,439	D	\$14.	.79	79 140,941		D			
Common Stock													46,109.	46,109.5856		[]	By 401k ⁽¹⁾		
Common Stock													16,137.2178		I S		By Employee Stock Ownership Plan ⁽²⁾		
Common Stock														2,500			[]	By spouse's IRA ⁽³⁾	
Common Stock														122,500		I		By spouse's rust ⁽³⁾	
			Table II								posed of converti				Owned				
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/Da	Date,	4. Transaction Code (Instr. ar) 8) 5. Numl Derivat Securit Acquire or Disp		urities uired (A) visposed O) (Instr.	nher of titive Expiration Dayl's (Month/Dayl's posed (Instr.		ate	7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Numl derivati Securiti Benefic Owned Followi Reporte Transac (Instr. 4	ve ies ially ng ed ction(s)	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Numbe of Sha	er	(ilisu. a				
Stock Options (Rights to Buy)	\$11.99	02/21/2017			M			150,000	(4)	(4) 06/2		Common Stock	150,0	000	\$0 50,		000	D	

Explanation of Responses:

- 1. The information in this report is based on the 401(k) report dated February 14, 2017.
- 2. Reflects ESOP allocations that occurred as of December 31, 2015.
- 3. The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.
- 4. Stock Option Awards granted pursuant to the 2006 Equity Incentive Plan of BankFinancial Corporation vest ratably over four quarterly installments commencing September 30, 2015.

02/23/2017 /s/ F. Morgan Gasior

** 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.