| SEC Form 4 | |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 APPRC | VAL |
|-------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burde | en |
| hours per response: | 0.5 |

| 1. Name and Address of Reporting Person* DOOLAN ELIZABETH A (Last) (First) (Middle) 15W060 NORTH FRONTAGE ROAD (Street) BURR RIDGE IL 60527 | | n* | 2. Issuer Name and Ticker or Trading Symbol <u>BankFinancial CORP</u> [BFIN] | (Check | tionship of Reporting Persor all applicable) Director Officer (give title | n(s) to Issuer 10% Owner Other (specify | |
|--|---------|-------|--|--------|---|---|--|
| | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/20/2016 | | below) SVP & Principal Acce | below) | |
| · , | IL | 60527 | 4. If Amendment, Date of Original Filed (Month/Day/Year) 12/21/2016 | | Individual or Joint/Group Filing (Check Applicable) ne) X Form filed by One Reporting Person Form filed by More than One Reporting | | |
| (City) | (State) | (Zip) | | | Person | | |

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.4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 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 | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Common Stock | 12/20/2016 | 12/21/2016 | I | | 23,654.5794 | D | \$14.7605 | 48,025.9642 | I | By 401k ⁽¹⁾ |
| Common Stock | | | | | | | | 6,000 | D | |
| Common Stock | | | | | | | | 12,976.2471 | I | By Employee Stock Ownership Plan ⁽²⁾ |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | | | (0.9.) P | , . | | | | | | | | | | | | | |
|----|--|---|---|----------|------|--|--|-----|---------------------|---|---|---|--|--|--|--|--|--|
| DS | . Title of erivative ecurity nstr. 3) | 2. Conversion or Exercise Price of Derivative Security | Conversion Date Execution Date, Transaction or Exercise (Month/Day/Year) if any Code (Instr. Price of Derivative 8) | | | of Deriv Secu Acqu (A) or Dispo of (D) | erivative ccurities cquired) or (D) sposed (D) str. 3, 4 | | | 7. Title Amour Securi Underl Deriva Securi and 4) | nt of ties ying tive ty (Instr. 3 | 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) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |

Explanation of Responses:

1. The information in this report is based on the 401(k) report dated December 21, 2016.

2. Reflects ESOP allocations that occurred as of December 31, 2015.

/s/ Elizabeth A. Doolan

<u>12/21/2016</u>

** 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.