FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average b	ourden									

0.5

hours per response:

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

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*  DOOLAN ELIZABETH A						2. Issuer Name and Ticker or Trading Symbol BankFinancial CORP [ BFIN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner							
(Last) (First) (Middle) 15W060 NORTH FRONTAGE ROAD						3. Date of Earliest Transaction (Month/Day/Year) 02/16/2017									Officer (give title below)  SVP & Principal			belov	′		
(Street) BURR R	IDGE IL		60527		4. II										6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person						
(City)	(S	tate)	(Zip)										Form filed by More than One Reporting Person								
		Tab	le I - N	on-Deriv	/ative	Sec	curit	ies Ac	quired	l, Di	sposed o	of, or Be	nefici	ally C	Owned						
1. Title of Security (Instr. 3)			2. Transac Date (Month/Da		Exo () if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)			and Securit Benefic Owned		у	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
										v	Amount	(A) or (D)	Price	Tra	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)			
Common	Common Stock			02/16/2	02/16/2017						5,000	A	\$12.9	99	11,0	00		D			
Common Stock			02/16/2017					F		4,607	D	\$14.7	72	6,39	93	D					
Common	Stock														48,150.627			I	By 401k <sup>(1)</sup>		
Common Stock													1	12,976.2471		I		By Employee Stock Ownership Plan <sup>(2)</sup>			
		٦	Table II								posed of converti				vned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)		tion of		6. Date Exercis Expiration Dat (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Der Sec	Price of rivative curity str. 5)	9. Numb derivativ Securiti Benefici Owned Followin Reporte Transac (Instr. 4)	ve es ially ng d tion(s)	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)		Date Exercisa		Expiration Date	Title	Amour or Number of Shares	er							
Stock Options (Rights to Buy)	\$12.99	02/16/2017			М			5,000	(3)		06/26/2017	Common Stock	5,000	0	\$0	0		D			
Stock Options	\$11.99								(4)		06/26/2017	Common	37,08	34		37,0	184	D			

## Explanation of Responses:

- 1. The information in this report is based on the 401(k) report dated February 16, 2017.
- 2. Reflects ESOP allocations that occurred as of December 31, 2015.
- 3. Stock Option Awards granted pursuant to the 2006 Equity Incentive Plan of BankFinancial Corporation vest ratably over four quarterly installments commencing March 31, 2016.
- 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.

<u>/s/ Elizabeth A. Doolan</u> <u>02/17/2017</u>
\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.