FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response... 0.5

_X_10% Owner Other (specify below)

5. Relationship of Reporting Person(s) to Issuer

X Director

Officer (give title below)

(Check all applicable)

Chairman and CEO

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

BOCHNOWSKI DAVID A

1. Name and Address of Reporting Person*

(Print or Type Responses)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

NORTHWEST INDIANA BANCORP [NWIN

10203 C	0203 CHERRYWOOD LANE				3. Date of Earliest Transaction (Month/Day/Year) 03/19/2004										/	
(Street) MUNSTER, IN 46321				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(Cit	(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui							ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yea		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)		of (D) O				Ownership form:	7. Nature of Indirect Beneficial Ownership		
				(Monuli Day/Tear)		Cod	de V A	Amount (A) or (D)		Price	msu. 3 and 4)	٦)		r Indirect I) Instr. 4)		
Common	ı		03/19/2004	03/19/2	2004	M	f 1	,775 A		\$ 16 2	230,119		I)		
common			03/19/2004	03/19/2	2004	M	f 1	,800 A		\$ 20.5	231,919		I)		
			Tabla II	Derivativ	ze Securit	ies Acc	in this display	form are	not re ntly v	equired t /alid OM	collection of to respond IB control n	unless the		J	1474 (9-02)	
1. Title of Derivative Security (Instr. 3)	Conversion	11112		4. Transaction Code	5. Nu	arrants, mber 6 Eative ities ired seed 3, 4,	in this	form are is a curre osed of, or nvertible stisable and ate	not re ntly v Benef	equired to a sequired to a sequired to a sequired to a sequired to a sequire to a s	to respond IB control n Owned and Amount erlying es	unless the umber. 8. Price of		Ownersh Form of Derivativ Security Direct (I or Indire	11. Natur of Indirec Beneficia Ownershi (Instr. 4)	
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transactic Code (Instr. 8)	5. Num on of Derive Secur Acqui (A) on Dispo of (D) (Instr.	arrants, mber 6 E ative (ities rred ssed s, 4,)	in this display uired, Dispondation, options, co but Exercises.	form are is a curre osed of, or nvertible stisable and ate	not reently v	ficially O tities) 7. Title a of Under Securitie	to respond IB control n Owned and Amount erlying es	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownersh Form of Derivativ Security: Direct (I or Indire	11. Natur of Indirec Beneficia Ownershi (Instr. 4)	
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, if any	4. Transactic Code (Instr. 8)	s, calls, w on of Deriv. Secur Acqui (A) or Dispo of (D) (Instr. and 5)	arrants, mber 6 E ative (tities ured) 3, 4,) (D)	in this display quired, Disport , options, co 6. Date Exerc Expiration D Month/Day/	form are s a curre s a curre seed of, or nvertible sisable and ate Year)	not reconstruction not reconstru	equired to valid OM ficially Orities) 7. Title a of Under Securities (Instr. 3	Amount or Number of Shares	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownersh Form of Derivativ Security: Direct (I or Indire	11. Natur of Indirec Beneficia Ownershi (Instr. 4)	

Other

Relationships

Officer

Chairman and CEO

10%

Owner

X

Director

X

Signatures

Reporting Owners

BOCHNOWSKI DAVID A 10203 CHERRYWOOD LANE

MUNSTER, IN 46321

Reporting Owner Name / Address

/s/David A. Bochnowski	03/19/2004
Signature of Reporting Person	Date

Explanation of Responses:

- * 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.

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.