FORM 4

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

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

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

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person* BOCHNOWSKI DAVID A				2. Issuer Name and Ticker or Trading Symbol NORTHWEST INDIANA BANCORP [NWIB(OB)]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ DirectorOfficer (give title below)Other (specify below)Other (specify below)						
(Last) (First) (Middle) 10203 CHERRYWOOD LANE				3. Date of Earliest Transaction (Month/Day/Year) 06/25/2004							Chairman and CEO						
(Street) MUNSTER, IN 46321				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(Cit		(State)	(Zip)	Table I - Non-Derivative Securities Acqu						Acquired							
(Instr. 3) Date			2. Transaction Date (Month/Day/Year)) any	on Date, it	(Instr. 8)		(A)	4. Securities Acquired (A) or Disposed of (D (Instr. 3, 4 and 5)		f (D) Ov Tra	wned Follow ansaction(s)	,		6. Ownership Form:	nip of Be	Nature Indirect eneficial
				(Month/Day/Y			ode V	Amo	Amount (A) or (D)		(In	(Instr. 3 and 4)			Direct (I or Indire (I) (Instr. 4	ect (In	Ownership (Instr. 4)
	Stock		06/25/2004	06/25/	2004	ı	М	1,0	00 A		\$ 20.5	33,727			D		
Reminder:		separate line for each	1 class of securities l	beneficial	ly owned	directly	Per in ti	sons v	rm are n	spond not re	I to the c	respond	unless the	ion contai	n ed S	EC 147	74 (9-02)
		separate line for each	n class of securities h	- Derivati	ive Securi	ties Ac	Per in the disp	sons vanis for olays a	rm are n a curren	pond not re ntly v	I to the conquired to alid OME	o respond 3 control n	unless the		ned S	EC 141	74 (9-02)
Reminder:	Report on a s	3. Transaction Date	Table II - 3A. Deemed Execution Date, if	- Derivati (e.g., pu 4. Transaci Code	ive Securi ts, calls, w 5. Nu tion of Deriv	ties Acvarrantumber vative rities ired rosed)	Per in the disp	sons vois for blays a bispose s, converse conver	rm are n a curren ed of, or I certible se able and	pond not re ntly v Benef	I to the c quired to alid OME icially Ow	o respond 3 control n vned and Amount lying	unless the umber. 8. Price of		of 10. Owr Forr y Deri Secu Dire or Ir	nership n of vative urity: ct (D) direct	11. Natu
Reminder: 1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - 3A. Deemed Execution Date, if any	- Derivati (e.g., pu 4. Transaci Code	ive Securi ts, calls, w Js. Nu cion of Deriv Secur Acqu (A) o Dispc of (D	ties Acvarrantumber vative rities ired rosed)	Perin tl disp equired, D ts, options 6. Date E Expiration	sons v nis for blays a dispose s, conv exercisa in Date Day/Ye	rm are n a curren ed of, or I certible se able and	spond oot re ntly v	I to the continuous dictally Ownies) 7. Title arof Underly Securities	o respond 3 control n vned and Amount lying	8. Price of Derivative Security	9. Number Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owr Forr y Deri Secu Dire or Ir n(s) (I)	nership n of vative urity: ct (D) direct	11. Natu of Indire Benefici Ownersh

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
BOCHNOWSKI DAVID A 10203 CHERRYWOOD LANE MUNSTER, IN 46321	X	X	Chairman and CEO				

Signatures

/s/ David A. Bochnowski	06/25/2004
**Signature of Reporting Person	Date

Explanation of Responses:

- \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.

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.