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)		-								_				
Name and Address of Reporting Person * Lowry Robert T				NC	2. Issuer Name and Ticker or Trading Symbol NORTHWEST INDIANA BANCORP [NWIN(OB)]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Executive Vice President					
(Last) (First) (Middle) 730 CLOVER					3. Date of Earliest Transaction (Month/Day/Year) 01/21/2005							Exec	utive vice Pi	esident		
(Street) CROWN POINT, IN 46307				4. I	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City)	(State)	(Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Benefici-						Beneficially	Owned				
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Ye	ar) Exec	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		A. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)		of (D)) Beneficia	ant of Securities ally Owned Following d Transaction(s) and 4)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						C	Code	V	Amoun		Price				(Instr. 4)	
Common	Stock		01/21/2005	01/2	21/2005		P		65	1 /	\$ 35.5	5 10,443			D	
			Table 1		vative Secur		cquir	the f	form dis	splays a of, or Be	curr neficia	ently valid	OMB con	spond unle trol numbe		, ,
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Execution (Year) any	ed Date, if	puts, calls, v 4. Transaction Code (Instr. 8)	5. Num of Deri Secu Acq	nber ivative urities uired or posed D) tr. 3,	6. D and (Mo	ate Exer Expirationth/Day/	cisable on Date	7. An Un Sec (In 4)	Title and mount of aderlying curities str. 3 and Amount or lite Number	Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivat Security Direct (or Indir	Beneficia Ownershi (Instr. 4) D) ect
					Code V	(A)	(D)					of Shares				
	4. 0															

Reporting Owners

D (O N /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Lowry Robert T 730 CLOVER CROWN POINT, IN 46307			Executive Vice President				

Signatures

/s/ Robert T. Lowry	01/21/2005
**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.