## 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

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

Name and Address of Reporting Person * BOCHNOWSKI DAVID A				2. Issuer Name and Ticker or Trading Symbol NORTHWEST INDIANA BANCORP [NWIN(OB)]							5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  _X_ Director _X_ Officer (give title below) Other (specify below)  Chairman and CEO				
(Last) (First) (Middle) 10203 CHERRYWOOD LANE				3. Date of Earliest Transaction (Month/Day/Year) 08/22/2005							CI	anman and C	LEO		
(Street)				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					
MUNSTER, IN 46321 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu					Acqui	ured, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		if Co (In	(Instr. 8)		4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	nt of Securities ally Owned Following Transaction(s)		Ownership Form:	Beneficial	
				(Month/Day/Ye		Code	V	Amoun	(A) or (D)	Price			Ownership (Instr. 4)		
Common	Stock		08/22/2005	08/22/2005		P	1	1,000	A	\$ 33.5	242,075			D	
				Derivative Secur		cquire	the for	rm dis	splays a	currer eficial	ntly valid	OMB con	spond unle trol numbe		
1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/Ye	3A. Deemed Execution Day Year) any	(e.g., puts, calls, 4.  ate, if Transactio Code Year) (Instr. 8)	5. Num of Deri Secu Acqu (A) of Disp of (I (Inst	5. 6. l Number and		eate Exercisable Expiration Date onth/Day/Year)		7. Ti Amo Undo Secu	Title and mount of nderlying ecurities nstr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownershi Form of Derivativ Security: Direct (D or Indirect	(Instr. 4)
				Code V	(A)	(D)	Date Exerci	isable	Expiration Date	1 Title	Amount or Number of Shares				

### **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	08/22/2005
**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.