FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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				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 Director Officer (give title below) Executive Vice President					
EAR OF OTHER				3. Date of Earliest Transaction (Month/Day/Year) 02/10/2006								Exect	utive vice P	resident		
		(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 Person Form filed by More than One Reporting Person					
	POINT, I											_ `				
(City))	(State)	(Zip)		T	able I	- Non	-Der	ivative	Securities	s Acqu	ired, Disp	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		Execution Date, if C		Cod (Ins	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)						Ownership of Form:	7. Nature of Indirect Beneficial Ownership		
			(Month/Day/Y			ode	V	Amour	(A) or (D)	Price	(msu. 3 a	nstr. 3 and 4)		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock											3,308			D	
Common	Stock		02/10/2006				P		16	A	\$ 31.4	9,523			I	Profit Sharing
Common	Stock											535			I	By Spouse
Reminder: 1	Report on a s	separate line fo		Derivative Se	curit	ies Ac	quire	Pers conta the f	ons whained i	no respo n this fo splays a	rm are curre neficial	not requesting ntly valid	OMB conf	formation spond unle trol numbe	ess	1474 (9-02)
	1	T.		e.g., puts, ca	ls, w									ı		
Security	Conversion or Exercise (Month/Day/Year) Exec		Year) Execution Da	Sec Ac. (A) Dis of (In:		Numl	rative rities ired rosed) . 3,	and I	ate Exer Expiratinth/Day	on Date	Ame Und Seco	itle and ount of lerlying urities tr. 3 and	of Derivative Securities Security (Instr. 5) Ind Security Securities Beneficial Owned Following Reported Transactic (Instr. 4)		Owners Form o Derivat Security Direct (or Indir	Beneficia Ownersh (Instr. 4)
				Code	V	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares				

Reporting Owners

Report	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	02/10/2006

**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.