## 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

	pe Responses	7												
1. Name and Address of Reporting Person* CERVEN LEANE ENGLISH				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)  Other (specify below)				
(Last) (First) (Middle) 8419 BARING AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 12/23/2010							Vice Preside	nt			
(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						
MUNSTER, IN 46321 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqui					ired. Disposed of, or Beneficially Owned						
(Instr. 3) Dat		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transaction Code (Instr. 8)		·			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. Ownership Form:	Beneficial	
				Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	nd 4)		Direct (D) Ov or Indirect (In (Instr. 4)	Ownership (Instr. 4)	
Commor	Stock		12/23/2010		P		600	A	\$ 13.75	900	00 D		D	
Common	Stock		12/23/2020		P		100	A	\$ 14	1,000			D	
						cont	ained in				ction of inf iired to res			1474 (9-02)
			Table II -	Derivative Securiti	ies Acquir			plays a	currer			trol numbe		
				Derivative Securiti (e.g., puts, calls, wa	rrants, op	ed, Di	isposed o , convert	plays a f, or Be ible sec	neficial	ly Owned	OMB cont	trol numbe	r.	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	on 3A. Deemed Execution Da any	(e.g., puts, calls, wa 4. Transaction Code Year) (Instr. 8)		ed, Dotions 6. Dotions and (Mo	isposed o	f, or Be ible secuisable n Date	neficiallurities) 7. Ti Amo Undo		OMB cont	9. Number	of 10. Owners Form of Derivati Security Direct ( or Indire	Beneficia Ownersh (Instr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
CERVEN LEANE ENGLISH 8419 BARING AVENUE MUNSTER, IN 46321			Vice President			

### **Signatures**

/s/ Leane English Cerven	12/23/2010		
**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.