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)												
1. Name and Address of Reporting Person * DENNISON LOURDES M				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 Officer (give title below) Officer (give title below)					
(Last) (First) (Middle) 416 SCARBOROUGH			3. Date of Earliest Transaction (Month/Day/Year) 11/16/2011											
(Street) VALPARAISO, IN 46383				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 Acqui					ired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year		Date		(Instr. 8)		(A) or Disposed of ((Instr. 3, 4 and 5)			D) Beneficially Owned Following Reported Transaction(s)			Form:	7. Nature of Indirect Beneficial	
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)			Direct (E or Indirect (I) (Instr. 4)		
Common Stock		11/16/2011		S		333	11)	\$ 15	10,366		D			
Common Stock									515		I	Spouse Trustee of Trust		
Common Stock									4,130		I	Spouse IRA		
Reminder:	Report on a s	separate line fo		Derivative Securiti	ies Acquir	Pers cont the f	ons who	respor this for plays a o	m are curre eficial	e not requ ntly valid	ction of inf uired to res OMB conf	spond unl	ess	C 1474 (9-02)
1. Title of	<u></u>	3. Transaction		e.g., puts, calls, wa	irrants, op 5.	1				itle and	9 Dries of	9. Number	of 10.	11. Natur
Derivative Security (Instr. 3) Price of Derivative Security Conversion or Exercise (Month/Day/Year) Code (Instr. 8) Code (Instr. 8) Derivative Security Code (A) (Code (A) (Cod		Number	6. Date Exercisable and Expiration Dat (Month/Day/Year)		n Date	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)		Owne Form Deriv Secur Direct or Inc	rship of Indired Beneficia Ownersh (Instr. 4)			
				Code V	(A) (D)	Date Exer	rcisable I	Expiration Date	Title	Amount or Number of Shares				

Reporting Owners

D 41 0 N 4	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
DENNISON LOURDES M 416 SCARBOROUGH VALPARAISO, IN 46383	X					

Signatures

/s/ Lourdes M. Dennison	11/16/2011			
**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.