# 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				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 10% Owner X_ Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 730 CLOVER				3. Date of Earliest Transaction (Month/Day/Year) 04/11/2013								Exec	utive Vice P	resident		
an aven		(Street)		4. If Amendment, Date Original Filed(Month/Day/Year) 04/15/2013							6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
CROWN (City)	POINT, I	N 46307 (State)	(Zip)											1 0		
(City)	,	(State)	(Zip)		T	able I	- Nor	ı-Der	ivative S	Securitie	es Acq	uired, Disp	osed of, or l	Beneficially	Owned	
(Instr. 3) Date			2A. Deemed 3. Trans Execution Date, if Code any (Instr. 8			le	(A) or Disposed of (D)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership o	7. Nature of Indirect Beneficial	
			(Month/Day/Year)			ode	V	Amoun	(A) or t (D)	Price	Ì	(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock							•	rimoun	(D)	11100	5,279			D	
Common	Stock											602			I	Spouse IRA
Common	Stock		04/11/2013				P		85	A	\$ 24.2	12,033			I	Profit Sharing
Reminder:	Report on a s	separate line fo	or each class of secur	rities benefici				Pers cont the f	ons what ained in	o responsible this formula this	orm ai	re not requently valid	OMB con	formation spond unle trol numbe	ss	1474 (9-02)
		1		(e.g., puts, ca		arran		tions	, conver	tible sec	urities	)		1		
Security	2. 3. Transactic Date or Exercise Price of Derivative Security 3. Transactic Date (Month/Day/		Execution Da (Year) any	4. Transaction Code (Instr. 8) S. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		and	and Expiration Date Month/Day/Year)  And Un Se (Ir		An Un Sec	Amount (Instr. 5) Benefic Owned Followi Reporte Transac (Instr. 4		Derivative Securities Beneficially	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficia Ownersh (Instr. 4)		
				Code	v	(A)	(D)	Date Exer	*	Expirati Date	on Tit	or Number of Shares				

### **Reporting Owners**

P 41 0 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	04/15/2013

**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.