# 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)		ı											
Name and Address of Reporting Person *  Diederich John J				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)  Executive Vice President					
(Last) (First) (Middle) 829 SHANNON				3. Date of Earliest Transaction (Month/Day/Year) 08/04/2014							Exect	itive vice Pi	esident		
(Street) CROWN POINT, IN 46307				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 Acquired, Disposed of, or Beneficially Owned											
(Instr. 3) Dat			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Ye	if Co	(Instr. 8)		(A) or Disposed of (Instr. 3, 4 and 5)			Beneficia	nt of Securities ally Owned Following Transaction(s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
				(Monas Bay) 10		Code	V Ar	nount	(A) or (D)	Price	or Ind (I)		or Indirect		
Commor	Stock		08/04/2014			P	50	00		\$ 26	7,350			D	
				Derivative Secur		.cquire	containe the forn	ed in n dis	this form	m are currer	not requesting noting valid		spond unle trol numbe	SS	C 1474 (9-02)
		1	1	e.g., puts, calls,		ıts, op	T			T			ı		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Y	Execution Date (any)	4. Transaction Code (Instr. 8)	of Deri Secu Acq (A) o Disp of (I	vative arities uired or oosed O)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Undo Secu	itle and ount of erlying urities r. 3 and	Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form of Derivativ Security: Direct (I or Indire	Benefic Owners (Instr. 4	
					(Inst						Amount				

### **Reporting Owners**

D (C N )	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Diederich John J 829 SHANNON CROWN POINT, IN 46307			Executive Vice President				

## **Signatures**

/s/ John Diederich	08/04/2014
**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.