FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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 * MIZE STANLEY E				NO	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 10% Owner Officer (give title below) Other (specify below))		
(Last) (First) (Middle) 594 COUNTRY CLUB DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 02/20/2015															
(Street) ATLANTIS, FL 33462				4. If	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						ne)
(City	')	(State)	(Zip)		Table I - Non-Derivative Securities A						es A	cqui	quired, Disposed of, or Beneficially Owned							
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	Execu	Execution Date, if Code			tion V	(A) or Disposed of (D) (Instr. 3, 4 and 5)			(I	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form:		Benefi Owner	ct cial rship		
Commor	Stock												2	27,555			D			
Commor	Stock												4	1,407			I		Spou IRA	se
Commor	n Stock												1	,984			I	:	for	odian dchild
Commor	n Stock												1	7,316			I		Trust Trust	ee of
Common Stock		02/20/2015				P			135	A	\$ 27.:	5 1	35			I	,	Spou Trust Trust	ee of	
Reminder:	Report on a s	separate line	for each class of sec						Per cor the	rsons wh ntained i	no resp n this f splays	orm a cu	are Irrer	not requesting ntly valid	ction of inf lired to res OMB con	spond u	nless	SE	C 147	4 (9-02)
			Table II		ative Secu puts, calls									ly Owned						
	2. Conversion or Exercise Price of Derivative Security	rcise (Month/Day/Year) any (Month/Day/Year) Continue (Month/Day/Year)		Transacti Code		Number		and (M	nd Expiration Date Month/Day/Year) Am Un Sec		Amo Undo Secu (Inst	itle and ount of erlying prities tr. 3 and	Derivative Security (Instr. 5) Instr. 5) Derivative Security Security Owned Follow Reports		ive Own es Forn ially Deri Secu ng Dire d or In tion(s) (I)	Owner Form Deriva Securi Direct or Ind	ership n of vative rity: ct (D) direct	11. Natur of Indirec Beneficia Ownersh (Instr. 4)		
											Expirat			Amount						

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Reporting Owner Funite / Funitess							

MIZE STANLEY E 594 COUNTRY CLUB DRIVE ATLANTIS, FL 33462	X					
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Signatures

/s/ Stanley E. Mize	02/20/2015
***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.