# 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

(Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person* Fesko Donald P				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)  Check all applicable)				
(Last) (First) (Middle) 9204 COLUMBIA AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 11/19/2015												
(Street) MUNSTER, IN 46321				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				
(City	")	(State)	(Zip)		7	[able]	I - Nor	ı-Deri	vative S	Securities .	Acqui	ired, Dispe	osed of, or I	Beneficially (	Owned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yea		if Code (Instr. 8)		(A) or Disposed o		of (D)	ed 5. Amount of Securities (D) Beneficially Owned Fol Reported Transaction(s) (Instr. 3 and 4)		ollowing Sylvanian Ownership Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						(	Code	V	Amour	nt (A) or (D)	Price			(I) (Instr. 4)		
Common Stock											2,155 <sup>(1)</sup>			D		
	T		r each class of secur	Derivati	ve Securi	ities A	cquire	Perso conta the fo	ons whained in orm dis	no respon n this for splays a c	m are currer eficiall	not requesting noting the noting in the noti	OMB conf	ormation spond unlestrol number	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	3A. Deemed Execution Da	te, if 4.	ransactior	5. Num of Deri Secu Acq (A)	vative urities uired or posed D) cr. 3,	6. Da and E (Mon	ite Exer	cisable on Date	7. Ti Amo Undo Secu (Inst 4)	Amount of		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Owners Form of Derivati Security Direct (1) or Indire	Beneficial Ownershi (Instr. 4)

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Fesko Donald P 9204 COLUMBIA AVENUE MUNSTER, IN 46321	X					

### **Signatures**

/s/ Donald P. Fesko	11/19/2015
**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).
- (1) 30 shares acquired through purchases by the Dividend Reinvestment Plan

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.