# 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

1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Johnson Robert E. III				NORTHWEST INDIANA BANCORP [NWIN(OB)]						X_Director10% OwnerOfficer (give title below)Other (specify below)						
(Last) (First) (Middle) 9204 COLUMBIA AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 03/15/2017												
(Street)				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						
MUNSTER, IN 46321 (City) (State) (Zip)				Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		ction 4			uired of (D)	5. Amoun Beneficia	nt of Securities ally Owned Following I Transaction(s)		6. Ownership Form:	7. Nature of Indirect Beneficial Ownership	
				`			ode	V	Amoun	(A) or (D)	Price	or Inc (I)		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		03/14/2017			I	)		100	A	\$ 39.5	302			D	
				Derivative Se			quire	contaithe fo	ined in orm dis	n this for splays a of, or Ben	m are curre	e not requ ntly valid	OMB con	ormation spond unle trol numbe	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		n 3A. Deemed Execution Da any	4. Transaction Code Year) (Instr. 8)		5.		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. T Am Und Sec	ritle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownershi Form of Derivativ Security: Direct (D or Indirect	Beneficia Ownershi (Instr. 4)	
				Code	V	(A)	(D)	Date Exerci		Expiration Date	n Title	Amount or Number of Shares				

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Johnson Robert E. III 9204 COLUMBIA AVENUE MUNSTER, IN 46321	X					

# **Signatures**

/s/ Michelle H. Manchak, Under POA	03/15/2017		
**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.