FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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

	pe Response			1									1				
1. Name and Address of Reporting Person* Johnson Robert E. III				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) 9204 COLUMBIA AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 03/15/2018													
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							h/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)	any		3. Transaction Code (Instr. 8)		ction			quired of (D)	5. Amour Beneficia Reported	nt of Securities ally Owned Following I Transaction(s)		6. Ownership Form:	Beneficial		
				(Month	1/Day/1	y ear)		ode	V	Amour	(A) or (D)	Price	oi (I		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common	Stock		03/15/2018]	P		100	A	\$ 44.5	643			D	
			Table II - l					quire	conta the fo d, Dis	ined in orm dis	n this fo splays a of, or Ber	rm ar curre	e not requently valid	OMB con	spond unle trol numbe	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	*****	3A. Deemed Execution Day Year) any	4. Transaction Code (Instr. 8)		ition 1	5.		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. T Am Und Sec	Fitle and acount of derlying curities str. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivati Security Direct (I or Indire	Beneficia Ownershi (Instr. 4)	
									Date Exerc	cisable	Expiratio Date	n Tit	Amount or Number of				

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	03/15/2018		
**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.