FORM 4

(Print or Type Pecnonces)

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

1. Name and Address of Reporting Person* Johnson Robert E. III			2. Issuer Name and Ticker or Trading Symbol NORTHWEST INDIANA BANCORP [NWIN]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director						
(Last) (First) (Middle) 9204 COLUMBIA AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 01/30/2020										
(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 PersonForm filed by More than One Reporting Person					
MUNS I	ER, IN 46.	(State)	(Zip)	To	hla I - N	Jon-De	rivativa (Socuritio	s Acqui	irad Dien	osed of or l	Ranaficially	Owned	
1.Title of Security 2. Trans (Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transaction Code (Instr. 8)		1		Reported Transaction(s)			6. Ownership Form:	Beneficial		
			(Month/Day/Year)	Code	· V	Amoun	(A) or (D)	Price	(Instr. 3 a	and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common		01/29/2020		P		150	A	\$ 45.7	1,063		D			
Common		01/30/2020		P		100	A	\$ 45.75	1,163		D			
Reminder:	Report on a s	separate line fo	r each class of secur Table II -	rities beneficially over the security of the s		Per cor the	sons what stained i form dis	no respo n this fo splays a	orm are	not requesting ntly valid	OMB con	formation spond unle trol numbe	ss	1474 (9-02)
1 77:1 6	l _a	la m:		e.g., puts, calls, wa	arrants,	option	s, conver	tible seco	urities)			0.37 1	6 10	11.37.
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Year) Execution Da	te, if Transaction Code Year) (Instr. 8)	5. Number of Derivati Securitic Acquire (A) or Dispose of (D) (Instr. 3, 4, and 5	and Expiration Date (Month/Day/Year) A U S (I I		Amo Und Secu	itle and ount of erlying urities tr. 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 (or Indire	Beneficial Ownership (Instr. 4)	
				Code V	(A) (I		te ercisable	Expiration Date	on 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, POA	01/31/2020
**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.