FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OWR APPRO	JVAL
	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).

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* ONEAL JAMES R (Last) (First) (Middle) C/O NORDSTROM, INC. 1617 SIXTH AVENUE						Name (Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title 100 Other (specify))							
					3. Date of Earliest Transaction (Month/Day/Year) 02/28/2008 4. If Amendment, Date of Original Filed (Month/Day/Year)											below E	Officer (give title below) Executive Vice President ividual or Joint/Group Filing (Check Application)			
(Street) SEATTLE WA 98101					, 1110	namen	i, Date	. 01 01	ingina.	iicu	(World # D	Line	X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(S	ate)	(Zip)													Perso	on .		·	
		Tab	le I - Nor	-Deriv	ative	Sec	curiti	es A	cqui	red, I	Disp	osed o	of, or	Bene	ficial	ly Owne	d			
			2. Transaction Date (Month/Day/Year)		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		e, 1	3. Transaction Code (Instr. 8)					Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	t (A) or (D)		Price	Transac	Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common	Stock															26	26,613		D	
Common Stock																8,021		I		By 401(k) Plan, per Plan statement dated 1/31/08
Common	Common Stock														6	6,719		I	By wife	
Common Stock																2,846			I	By wife in 401(k) Plan, per Plan statement dated 1/31/08
		т	able II - I													Owned			,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	4. Transac Code (I 8)	ction	5. Number of		6. Da	6. Date Exercis Expiration Dat (Month/Day/Ye		ole and	7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer	cisable		piration te	Title	or Nu of	mber					
Employee Stock Option (right to buy)	\$38.02	02/28/2008			A		0(1)			(2)	02	/28/2018	Commo Stock) ⁽¹⁾	\$0	0(1)		D	
Employee Stock Option (right to buy)	\$38.02	02/28/2008			A		0 ⁽¹⁾			(2)	02	/28/2018	Commo Stock) (1)	\$0	0(1)		I	By wife

Remarks:

^{1.} The number of options granted effective 2/28/08 is not known at this time. The number is calculated as a function of base pay, a long-term incentive (LTI) percentage and the fair value of the option. The Binomial Lattice option valuation model will be used to estimate the fair value of the option. This model requires the input of certain assumptions, including risk-free interest rate, volatility, dividend yield, and expected life. The formula for determining the number of options granted is: number of options = (base pay x LTI%) / option fair value. This Form 4 will be amended to report the number of options granted when that number has been calculated.

^{2.} Granted under the issuer's 2004 Equity Incentive Plan, exercisable in four equal annual installments commencing on 2/28/09.

in-Fact for James R. O'Neal

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.