FORM 4

Check this box if no longer subjection 16. Form 4 or Form 5

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

ect to	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Smith Tricia D						2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [JWN]											k all appli Directo Officer	or r (give title		10% C	
(Last) (First) (Middle) C/O NORDSTROM, INC. 1617 SIXTH AVENUE					oate of 04/20		st Tran	isac	ction (M	onth/[Day/Year)		Executive Vice President								
(Street) SEATTL	E W	Ά :	98101		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(Si	tate)	(Zip)														1 0130	•			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
		2. Transaction Date (Month/Day/Year)		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Securitie Benefici		s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)		•	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock																	54	(1)		D	
Common Stock																104.929			I	By 401(k) Plan, per Plan statement dated 2/28/2013	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	Date, Transac Code (In		of I		6. Date Exercisa Expiration Date (Month/Day/Year				7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		l 4)	Di Si (li	s. Price of Derivative Security Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	te ercisabl		opiration ate	Title		Amoun or Numbe of Shares	r					
Employee Stock Option	\$53.82	03/04/2013			A		0(2)			(3)	03	3/04/2023		nmon ock	0(2)		\$0	0(2)		D	

Explanation of Responses:

- 1. Includes 54 shares acquired on September 30, 2012 under the Employee Stock Purchase Plan.
- 2. The number of options granted 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
- 3. Granted under the issuer's 2010 Equity Incentive Plan, exercisable in four equal annual installments commencing on 3/4/2014.

Remarks:

buy)

Paula McGee, Attorney-in-Fact for Tricia D. Smith

03/04/2013

Date

** Signature of Reporting Person 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.