FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	
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	hours per response:	0.5					

## 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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Name and Address of Reporting Person*     SARI ROBERT					2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [ JWN ]							(Che	elationship of ck all applica Director	ıble)	Perso	on(s) to Issue 10% Ow Other (s	ner
(Last) (First) (Middle) C/O NORDSTROM, INC.					3. Date of Earliest Transaction (Month/Day/Year) 02/25/2011						7	below)	Officer (give title below)  Exec. VP and S		below)	Jeeny	
	H AVENUE			L													
(Street) SEATTLE WA 98101					4. If Amendment, Date of Original Filed (Month/Day/Year) 02/28/2011						Line	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(5	State)	(Zip)										Person				
		Ta	able I - Non-	Derivat	ive S	ecurities /	Acq	uired, I	Disp	osed of,	or Bene	eficially	Owned				
Date				2. Transac Date (Month/Da	Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				5. Amoun Securities Beneficial Owned Fo	s Form		n: Direct I or Indirect I nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D)	Price	Transaction (Instr. 3 a				msu. 4)
Common Stock													0			D	
			Table II - D			curities A lls, warrar							Owned				*
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		Transaction(s (Instr. 4)			
Employee Stock Option (right to buy)	\$45.49	02/25/2011		A		18,458 <sup>(1)(2)</sup>		(3)		02/25/2021	Common Stock	18,458	\$0	18,45	58	D	

## **Explanation of Responses:**

1. 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.

- 2. This Form 4 is being amended to report the number of options granted, which was unknown at the time of the original filing on 2/28/11, pursuant to a formula approved by the Compensation Committee.
- 3. Granted under the issuer's 2010 Equity Incentive Plan, exercisable in four equal annual installments commencing on 2/25/2012.

## Remarks:

Paula McGee, Attorney-in-Fact for Robert B. Sari

03/18/2011

\*\* 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.