FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPRO	OVAL
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1. Name and Address of Reporting Person* NORDSTROM ERIK B						2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [JWN]											Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
	RDSTROM	, INC.	(Middle)			Date o		st Trai	nsacti	action (Month/Day/Year)							below)		√ice I	Other (below) President			
1617 SI2	TH AVEN	UE			4. If	f Ame	ndmen	t, Date	of Or	riginal F	iled	(Month/D	ay/Ye	ar)			dual or .	Joint/Group	p Filin	g (Check Ap	oplicable		
(Street) SEATTL	E W	'A !	98101												Liı	Line) X Form filed by One Reporting Form filed by More than One							
(City)	(S	tate) ((Zip)														Persor	1					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																							
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year		Execution Date,		e, 1	r, Transaction D Code (Instr. 5			4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a 5)				and Securities Beneficially Owned Following			n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership				
								-	Code V		Amount		(A) or (D) Price		Reported Transaction (Instr. 3 and		ion(s)			(Instr. 4)			
Common	Stock																1,89	6,754		D			
Common Stock															17,000.452		00.452	I		By 401(k) Plan, per Plan statement dated 1/31/09			
Common Stock														39,925		925		I	By wife				
Common	Stock																30,	073		I	By self as trustee for benefit of child		
Common	Stock																25,	881		I	By self as trustee for benefit of child		
Common Stock																21,809			I	By self as trustee for benefit of child			
		Т	able II -	Derivat	ive S	Secu	ırities	Acc	uire	ed, Di	spo	sed of	, or l	Benef	iciall	y Ov	vned						
1. Title of 2. Security Conversion Date Conversion Security or Exercise (Month/Day/Year) 3A. Deemed Execution Date, if any				Transaction Code (Instr.		5. Number 6.		6. Da	ate Exer iration D nth/Day/	cisal ate	Amount of		ecurity	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exer	e rcisable		piration te	Title	O N O	lumber								
Employee Stock Option (right to buy)	\$13.47	02/27/2009			A		0(1)			(2)	02	/27/2019	Com Sto		0(1)		\$0	0 ⁽¹⁾		D			
Explanation	n of Respons	ses:																					

^{1.} The number of options granted effective 2/27/09 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 2/27/10.

Remarks:

<u>Duane E. Adams, Attorney-in-</u> Fact for Erik B. Nordstrom

** 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.