## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
ſ	OMB Number:	3235-028								

0.5

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obligations may continue. See
Instruction 1(h)

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*  NORDSTROM PETER E					2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [ JWN ]									5. Relationship of Reporting F (Check all applicable)  X Director			10% Owner				
(Last) (First) (Middle) C/O NORDSTROM, INC. 1617 SIXTH AVENUE					02/	3. Date of Earliest Transaction (Month/Day/Year) 02/25/2011									X Officer (give title Other (specify below)  Executive Vice President						
(Street)	E W	A !	98101		-   4. If -	Amei	ndmen	t, Date	of Original Filed (Month/Day/Year)					Line	6. Individual or Joint/Group Filir Line)  X Form filed by One Re			eporting Person			
(City)	(St	ate) (	(Zip)												Person						
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)		Transaction Dispos Code (Instr. 5)		curities Acquired (A) o			or 5. Amount of Securities Beneficially Owned Following Reported		Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount	(A (D	) or P	rice	Transaction		n(s) d 4)		(3 4)		
Common	Stock														1,83	9,812		D			
Common	Stock														22,8	07.205		I	By 401(k) Plan, per Plan statement dated 1/31/11		
Common	Stock														143	3,398		I	By wife		
Common	Stock														342	2.474		I	By wife in 401(k) Plan, per Plan statement dated 1/31/11		
Common Stock														22,370			I	By self as trustee for benefit of child			
		Т	able II - I						uired, D						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	ed Date,	4. Transaction Code (Instr. 8)		5. Number 6.		6. Date Exe	Date Exercisable and xpiration Date flonth/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly [	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisabl		xpiration ate	Title	Amo or Nun of Sha	- 1							
Employee Stock Option (right to buy)	\$45.49	02/25/2011			A		0 <sup>(1)</sup>		(2)	02	2/25/2021	Commo Stock		(1)	<b>\$0</b>	0 <sup>(1)</sup>		D			
	of Dechan																				

## Remarks:

<sup>1.</sup> 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.

 $<sup>2. \</sup> Granted \ under the \ issuer's \ 2010 \ Equity \ Incentive \ Plan, \ exercisable \ in four \ equal \ annual \ installments \ commencing \ on \ 2/25/2012.$ 

Paula McGee, Attorney-in-Fact for Peter E. Nordstrom

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.