FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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	OMB Number:	3235-028
1	Estimated average h	urdon

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 APPROVAL									
OMB Number:	3235-0287								
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hours per response:	0.5								

1. Name and Address of Reporting Person* NORDSTROM BLAKE W						2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [JWN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
					1		0 111	0111			J				X	Direc	ctor	1	0% O	wner	
(Last)	(Last) (First) (Middle)							Date of Earliest Transaction (Month/Day/Year)								Office belov	er (give title v)		Other (specify below)		
C/O NORDSTROM, INC.						02/24/2015									President						
1617 SIXTH AVENUE																					
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)				02/	02/26/2015									Line) X Form filed by One Reporting Person							
SEATTLE WA 98101															Λ		Form filed by More than One Reporting				
														Person							
(City)	(St	ate) (Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,					ties Acquired (A) d Of (D) (Instr. 3, 4			4 and		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
									Code	v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 02/24/						/2015					5,818(1)(2)	2) A S		0 1,984,955		984,955	D			
	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		3A. Deem Execution if any (Month/Da	Date, Transaction Code (Ins					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	Deri	ivative urity tr. 5)	9. Number or derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	Code	v	(A)		Date Exercisa		Expiration Date	Title	Amo or Nun of Sha	ber							

Explanation of Responses:

- 1. This Form 4 is being amended to report the number of Restricted Stock Units granted, calculated pursuant to a formula approved by the Compensation Committee. The number was unknown at the time of the original filing on 2/26/2015.
- 2. Restricted Stock Award vesting and exercisable in four equal annual installments commencing 2/24/2016. The number of RSUs awarded is a function of base pay, a long-term incentive (LTI) percentage and the fair value of an RSU. The fair value of an RSU is calculated as the stock price as of the effective date less the present value of Company stock dividends over the vesting period. This calculation requires the input of certain assumptions, including the risk-free interest rate and the expected Company stock dividends. The formula for determining the number of RSUs granted is: number of RSUs = (base pay x LTI%) / RSU fair value.

Remarks:

Paula McGee, Attorney-in-Fact 03/17/2015 for Blake W. 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.