FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

washington, b.c. 2034

OMB APP	ROVAL

OMB Number: 3235-0287 Estimated average burden 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	Secti	on 30(l	n) of the	Ínvestme	nt Co	mpany Act	of 1940									
1. Name and Address of Reporting Person* <u>SUNDAY DELENA M</u>						2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [JWN]									5. Relationship of Report (Check all applicable) Director			10% O	wner		
(Last) (First) (Middle) C/O NORDSTROM, INC. 1617 SIXTH AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 05/27/2005										X Officer (give title Other (specify below) Executive Vice President					
(Street) SEATTLE WA 98101						4. If Amendment, Date of Original Filed (Month/Day/Year)										filed by One	up Filing (Check Apporting Person ore than One Repor		n		
(City)	(S	tate)	(Zip)												Perso						
			le I - No			_				, Dis	sposed o										
			2. Transa Date (Month/D		ır) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					and 5) Secu Bene Owne		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D)	Pric	:e	Reported Transaction(s) (Instr. 3 and 4)		<u> </u>		(111341. 4)			
Common	Stock			05/27/2005							1,082	32 A \$3		0.281	1 9,538		D				
Common Stock			05/27/2005		,		M		1,190	A	\$	529	10	,728		D					
Common Stock			05/27/2005		+			M		4,462	A		529	15,190		D					
Common	n Stock		05/27/2005		1			S		6,734	D	\$60	0.294	9,230(1)		D					
Common Stock														2,	2,280		I	By 401(k) Plan, per Plan statement dated 4/30/05			
		٦	able II -	Deriva	tive S	Sec call	uritie s. wa	s Acq	uired, I	Disp ns.	osed of converti	, or Ben ble seci	eficia uritie	ally (Owned						
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	ned n Date,	4. Transactio Code (Inst 8)		5. Number 6		6. Date Exercis Expiration Dat (Month/Day/Ye		sable and e	7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		8 D S	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A) (D)		Date Exercisa		Expiration Date	Title	Amo or Num of Shar	ber							
Employee Stock Option (right to buy)	\$30.281	05/27/2005			M			1,082	(2)		11/18/2007	Common Stock	1,08	82	\$0	0		D			
Employee Stock Option (right to buy)	\$29	05/27/2005			М			1,190	(3)		02/26/2008	Common Stock	1,19	90	\$0	4,758	3	D			
Employee Stock Option (right to	\$29	05/27/2005			M			4,462	(4)		02/26/2008	Common Stock	4,40	62	\$0	0		D			

Explanation of Responses:

- $1.\ Includes\ 774\ shares\ acquired\ on\ 3/31/05\ under\ the\ Nordstrom\ Employee\ Stock\ Purchase\ Plan.$
- $2.\ Exercisable\ in\ four\ equal\ annual\ installments\ commencing\ 11/18/98.$
- 3. Exercisable when the issuer's stock sustained an average price for at least 20 consecutive days as follows: 20% at an average price of \$40; 55% at an average price of \$47.50; and 100% at an average price of \$55.
- 4. Exercisable in four equal annual installments commencing 2/26/99.

Remarks:

buy)

Fact for Delena M. Sunday

** 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.