FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

		Reporting Person*							ker or Tra								p of Reportin blicable) ctor	g Per	, ,		
	(Fi RDSTROM TH AVEN	, INC.	(Middle)				of Earlie	st Trans	saction (M	Day/Year)				Office below	er (give title v)	e Other below		(specify			
(Street) SEATTL	E W	A 9	98101 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv ₋ine) X	-7					
		Tab	le I - Nor	n-Deriv	ative	Se	curiti	es Ac	quired,	Dis	posed o	f, or	Bene	fici	ially	Owne	ed				
= mad or occurry (mourty)		2. Transaction Date (Month/Day/Year)		ır)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.) 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Securi Benefi Owned		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock				12/10	12/10/2013				G	V	10,96	7	D		S <mark>O</mark>	11,266,735		D			
Common	Stock															6,9	35,360		I	See ⁽¹⁾	
Common	Stock															1,5	555,200		I	See ⁽²⁾	
Common	Common Stock														5,501,520		I		See ⁽³⁾		
Common Stock 1			12/10	10/2013				G	V	5,000 A		A	\$	S <mark>O</mark>	246,776		i I		By wife		
		Ta	able II - D (sed of, onvertib					wned					
Security or Exercise Price of Derivative Security (Month/Day/Year) if any (Month/Day/Year) or Exercise Price of Derivative Security (Month/Day/Year) or Exercise Price of Price of Derivative Security (Month/Day/Year) or Exercise Price of Price of Price of Price of Price of Derivative Security (Month/Day/Year) or Exercise Price of Price of Derivative Security (Month/Day/Year) or Exercise Price of Price of Derivative Security (Month/Day/Year) or Exercise Price of Derivative Secu			Transa Code (nstr.	on of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/E	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of			rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F C	10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

- 1. By self as trustee for my benefit and the benefit of my children under the Frances Nordstrom Trust.
- 2. By self as trustee for my benefit and the benefit of my children under the 1976 Bruce A. Nordstrom Trust.
- 3. By self as co-trustee for the benefit of my sister, Anne G. Gittinger, with respect to 5,501,520 shares in the Everett Nordstrom Trust. The amount shown does not include my nominal interest in 743,420 shares held in trust for the benefit of Susan Dunn, my niece, and for which I am a co-trustee. I am a contingent remainderman with respect to both trusts, but disclaim beneficial ownership of the securities held within these trusts. This report shall not be deemed an admission that I am the beneficial owner of the securities held within the trusts for purposes of Section 16 or for any other purpose.

Remarks:

Paula McGee, Attorney-in-Fact 12/12/2013 for Bruce A. 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.