FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL							
OMB Number:	3235-0104						
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

COLLINS PETER F			2. Date of Event Requiring Statement (Month/Day/Year) 02/23/2005  3. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [ JWN ]								
(Last) (First) (Middle) C/O NORDSTROM, INC.				Relationship of Reporting Personal (Check all applicable)     Director	10% Owne	er (N	5. If Amendment, Date of Original Filed (Month/Day/Year)				
1700 SEVENTH AVENUE					Officer (give title below)	Other (spe below)	, [0.11	6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street)					Controller			X Form filed by One Reporting Person			
SEATTLE	WA	98101						Form filed by Reporting Po	y More than One erson		
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock					5,000	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of		6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiration Date	n Title	Amount or Number of Shares	Derivative Security				
Employee Stoo	k Option (Righ	nt to Buy)	(1)	05/24/2014	Common Stock	10,000	39.84	D			

## **Explanation of Responses:**

1. Granted under the Nordstrom, Inc. 1997 Stock Option Plan, exercisable in four equal annual installments commencing on 5/24/05.

## Remarks:

/s/ Duane E. Adams, Attorneyin-Fact for Peter F. Collins

Date

\*\* Signature of Reporting Person

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 5 (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.