FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burd	en							
l	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 Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* BLACK LAURIE M					2. Issuer Name <b>and</b> Ticker or Trading Symbol NORDSTROM INC [ JWN ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify					
(Last) (First) (Middle) C/O NORDSTROM, INC. 1700 SEVENTH AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 03/04/2013									X Officer (give title Other (specify below)  Executive Vice President				
(Street) SEATTLE WA 98101				_   4. l <sup>·</sup> _	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(Si		(Zip)	n Davis					iva d	Die		of or D	noficia	aller Ourma					
Date				2. Transa	action		2A. Deemed Execution Date,		3. 4. Sec Transaction Dispo Code (Instr. 5)		4. Securi	rities Acquired (A) or ed Of (D) (Instr. 3, 4 an		5. Amount of		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 (Instr. 3	tion(s)		(Instr. 4)		
Common	Stock			03/04	/2013				A		100	A	\$0	45	,185	D			
Common	Stock			03/04	/2013				F		27	D	\$53.8	32 45	,158	D			
Common Stock														14,20	14,205.125		By 401(k) Plan, per Plan statement dated 2/28/2013		
		Т	able II -											y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Executio if any	(e.g., puts, calls, warrai		vative virities vired r osed )	6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and Amount of Securities Underlying Derivative S (Instr. 3 and				d of s g e Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form: Direct ( or Indir (I) (Instr	Beneficial Ownership ect (Instr. 4)				
					Code	v	(A)		Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Employee Stock Option (right to buy)	\$53.82	03/04/2013			A		0(1)		(2)	(	03/04/2023	Common Stock	0(1)	\$0	0(1)	D			

## Explanation of Responses:

1. 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.

2. Granted under the issuer's 2010 Equity Incentive Plan, exercisable in four equal annual installments commencing on 3/4/2014.

## Remarks:

/s/ Paula McGee, Attorney-in-Fact for Laurie M. Black 03/05/2013

\*\* 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.