FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
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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

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1. Name and Address of Reporting Person*  BICHICH SHERYL GARLAND  2. Date of Event Requiring Statement (Month/Day/Year) 05/22/2019					3. Issuer Name <b>and</b> Ticker or Trading Symbol NORDSTROM INC [ JWN ]							
(Last) 1700 7TH AV	(First) /E, SUITE 1500	(Middle)			Relationship of Reporting Perso (Check all applicable)     Director		on(s) to Issuer 10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street)					X	Officer (give title below)  Secretary	Other (specify below)		Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person			
SEATTLE (City)	(State)	98101 (Zip)								Form filed b Reporting P	y More than One erson	
(5.9)	(=)	(							<u> </u>			
		Т	able I - Non	-Derivat	ive S	ecurities Beneficiall	y Owned					
1. Title of Security (Instr. 4)						int of Securities ially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock						7,849	D					
		(e.ç				urities Beneficially ( options, convertible		s)				
1. Title of Derivative Security (Instr. 4)  2. Date Exercise Expiration Date (Month/Day/Yea			ate	3. Title and Amount of Secur Underlying Derivative Securi			4. Conve	rcise	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date	Expiration	_		Amount or Number of	Price of Derivati Securi	tive	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

Remarks:

Eunice Chung, Attorney-in-

Fact for Sheryl Garland

05/30/2019

**Bichich** 

\*\* Signature of Reporting Person D

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).