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

1. Name and Address of Reporting Person* NORDSTROM BRUCE A					2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [JWN]											p of Reportin blicable) ctor	rson(s) to Is			
	(Fii RDSTROM TH AVEN	, INC.	Middle)		12/	17/2	2012		nsaction (Month/Day/Year) r of Original Filed (Month/Day/Year)							belov			Other (specification)	
(Street)	E W	A 9	98101		4. 11	Ame	enamen	i, Date (or Originai	Filea	(MONTH/Da	ау/ үе	ar)		ine) X	Form	r Joint/Group n filed by One n filed by Mor on	e Rep	oorting Pers	on
(City)	(St		Zip)																	
1. Title of Security (Instr. 3)		2. Transaction Date		ar)	2A. Deemed Execution Date,		3. Transa Code (3. 4. S Transaction Dis Code (Instr. 5)		Osed of, or Benefic 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amount of 4 and Securities Beneficially Owned Follow		ount of ties cially I Following	int of 6. Ownership Form: Direct (D) or Indirect Following (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount (A) or (D)		Pric	rice Reported Transaction(s) (Instr. 3 and 4)		ction(s)			(Instr. 4)			
Common Stock			12/17/2012		2			G	V	33,87	6	D \$		\$ <mark>0</mark>	11,188,991		D			
Common Stock														161,594		I		See ⁽¹⁾		
Common	Stock															6,9	35,360		I	See ⁽²⁾
Common	Stock															1,5	55,200		I	See ⁽³⁾
Common Stock														5,501,520		I		See ⁽⁴⁾		
Common Stock			12/17	17/2012				G	V	5,000		A	\$0		241,776		I		By wife	
		Та	ble II - [)								sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution Date, Transactivative or Exercise (Month/Day/Year) if any Code (Ins		Instr.	of Deri Secu Acqu (A) of Disp	osed) r. 3, 4	6. Date E Expiratio (Month/D	n Date ay/Yea	•	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		ount nber	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	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 under the Bruce A. Nordstrom 2008 5-Year Grantor Retained Annuity Trust.
- $2. \ By \ self \ as \ trustee \ for \ my \ benefit \ and \ the \ benefit \ of \ my \ children \ under \ the \ Frances \ Nordstrom \ Trust.$
- 3. By self as trustee for my benefit and the benefit of my children under the 1976 Bruce A. Nordstrom Trust.
- 4. 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 12/19/2012 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.