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									
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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

1. Name and Address of Reporting Person* FINN LINDA T					NO	2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [JWN]											all appli Directo	cable) or (give title	g Person(s) to Issu 10% Ow Other (s below)		/ner
(Last) (First) (Middle) C/O NORDSTROM, INC. 1617 SIXTH AVENUE				03/	3. Date of Earliest Transaction (Month/Day/Year) 03/01/2007										Executive Vice President						
(Street) SEATTL	E W	Ά !	98101		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(St	rate) (Zip)		Person																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
			2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (II 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			, 4 and Securiti Benefic Owned		es ally 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																32,639		D		
Common Stock																6,415			I	By 401(k) Plan, per Plan statement dated 1/31/07	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transaction Code (Instr 8)				6. Date Exercisa Expiration Date (Month/Day/Year			Amo Secu Und Deri		7. Title and Amount of Securities Juderlying Derivative Secu Instr. 3 and 4)		De	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly Ow Oir Oir Or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	te ercisable		piration ite	Title	1	Amount or Number of Shares						
Employee Stock Option (right to	\$53.63	03/01/2007			A		0(1)			(2)	03	/01/2017	Com: Sto		0(1)		\$0	0 ⁽¹⁾		D	

Explanation of Responses:

1. The number of options granted effective 3/1/07 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 granted when that number has been calculated.

2. Granted under the issuer's 2004 Equity Incentive Plan, exercisable in four equal annual installments commencing on 3/1/08.

Remarks:

/s/ Duane E. Adams, Attorney-03/05/2007 in-Fact for Linda Toschi Finn

** 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.