FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OIVID AFFROVAL										
OMB Number:	3235-0287									
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0.5

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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

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* Myers Margaret				2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [JWN]									elationship c ck all applic Directo			on(s) to Issu 10% Ow				
					.									>	Officer	give title		Other (s	· I	
(Last)	(F	irst)	(Middle)		3. [Date c	of Earliest 1	Fransa	action (Mc	nth/E	Day/Year)			7	below)		below)		·	
C/O NORDSTROM, INC.						03/15/2010								Executive Vice President						
1617 SIXTH AVENUE					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line						
SEATTL	LE W	'A	98101)		•	•	rting Persor		
					-										Form fi Person		re than	One Repor	ting	
(City)	(S	tate)	(Zip)																	
		Tal	ble I - No	n-Deriv	/ativ	e Se	curities	Acq	uired,	Dis	posed o	f, or B	ene	ficially	/ Owned					
1. Title of Security (Instr. 3) 2. Transc Date (Month/I					saction									5. Amount of		6. Ownership		7. Nature of		
					/Day/Ye	Execution Date, Day/Year) if any			Transa Code (i		Disposed 5)	Disposed Of (D) (Instr. 3, 4			and Securities Beneficially				Indirect Beneficial Ownership (Instr. 4)	
				ļ.			(Month/Day/Year)				- '				Owned F Reported	ed Following				
									Code	v	Amount	nount (A) or P		Price	Transacti (Instr. 3 a	ion(s)			,	
Common	Stock											\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			15,	<u> </u>		D		
Common	JUCK					_					ļ	_	_		15,	400		D		
																			Ву	
																			401(k)	
Common Stock															5.96	5,963.504			Plan, per Plan	
															3,300	J.504			statement	
																		lated		
																			2/28/10	
			Table II -	Doriva	tivo	Soci	uritios /	\ cau	irod D	icne	seed of	or Po	nofi	oially	Owned					
											onvertik				Owneu					
1. Title of	2.	3. Transaction	3A. Deeme		Code (Instr.		on Derivative I		6. Date Exercisable and Expiration Date Amount of (Month/Day/Year) Securities				8. Price of	9. Number of		10.	11. Nature			
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution I												Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial	
(Instr. 3) Price of (Month/Day/Year)				//Year) 8	3)		Acquired (A) or Disposed		, ,			Underlying Derivative Secu		ecurity	(Instr. 5)	Beneficia Owned	lly	Direct (D) or Indirect	Ownership (Instr. 4)	
Security							of (D) (In:	str.				(Instr. 3 and 4)		4)		Following Reported		(I) (Instr. 4)	` ′	
				H			o, rand	-,		\neg				mount		Transactio (Instr. 4)	tion(s)			
													0	r						
									Date		Expiration	<u> </u>	0							
					Code	V	(A)	(D)	Exercisal	ole	Date	Title	-	hares						
Stock	(1)	03/15/2010			Α		13.98 ⁽²⁾		(3)		(3)	Commo		13.98	\$40	304.6	2	D		

Explanation of Responses:

- 1. 1 for 1
- 2. Stock unit dividend paid on performance share units that were deferred at the election of the reporting person under the Executive Deferred Compensation Plan.
- 3. The stock units are convertible into the issuer's common stock and payable upon the occurence of certain events, including the reporting person's retirement from the issuer.

Remarks:

<u>Duane E. Adams, Attorney-in-</u> <u>Fact for Margaret Myers</u>

03/16/2010

** 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.