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	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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* Minuk Jack H					2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [JWN]											k all appli Directo	cable)	ng Person(s) to Issue 10% Own Other (spe		wner	
(Last) (First) (Middle) C/O NORDSTROM, INC. 1617 SIXTH AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 03/01/2007												below)		below)		
(Street) SEATTL	E W	A !	98101		4. If	endmen	t, 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 Person						
(City)	(Si		(Zip)	Davis	-4:			^-		inad F				D.a.		: a II	0	.1			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			action	ar)	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (Ir 8)	tion	4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			ed (A) c	or 5. Amount of Securities Beneficially Owned Following		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	t (A) or (D)		Pric	e:e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock																	2,588		D		
Common Stock														2,895		I		By 401(k) Plan, per Plan statement dated 12/31/06			
	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. Deeme Execution if any (Month/Day	d Date,	4. Transaction Code (Ins		5. Number of				ole and 7. Title Amour Securi Under		. Title and mount of ecurities nderlying erivative Securii nstr. 3 and 4)		8. D S(I)	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e rcisable		piration te	Title		Amour or Number of Shares	er					
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 = (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 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 Jack H. Minuk

** 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.