Instruction 1(b).

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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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HIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(b) of the Investment Company Act of 1940

1. Name and Address of Reporting Person [*] Worzel Ken				2. Issuer Name and Ticker or Trading Symbol <u>NORDSTROM INC</u> [JWN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
worzei	Ken											Directo			10% Ow				
						3. Date of Earliest Transaction (Month/Day/Year)								X Officer below)	(give title		Other (s below)	pecify	
(Last)	`	,	(Middle)		03/27/2024								C	hief Custo	omer	Officer			
C/O NORDSTROM, INC.																			
1617 SIXTH AVENUE				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. li Line	Individual or Joint/Group Filing (Check Applicable ne)						
(Chro of)					-									X Form fi	iled by One	Repo	rting Persor	1	
(Street) SEATTL	E W	ΥA	98101								Form filed by More than One Reporting Person				ting				
(City)	(S	tate)	(Zip)		Rule 10b5-1(c) Transaction Indication														
	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								to satisfy										
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) Date (Month/D				/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		Disposed	ities Acquired (A) or d Of (D) (Instr. 3, 4 aı		Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Dwnership		
								Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	tion(s)			Instr. 4)		
	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. Conversio or Exercis Price of Derivative Security		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, Trans Code			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisat		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)				
Stock Units	(1)	03/27/2024			J	v	62.25 ⁽²⁾		(3)		(3)	Common Stock	62.25	\$19.92	6,588.6	55	D		

Explanation of Responses:

1.1 for 1

2. Stock unit dividend credited with respect to performance share units that were deferred at the election of the reporting person under the Nordstrom Deferred Compensation Plan.

3. The stock units are convertible into issuer's common stock and payable upon the occurrence of certain events, including the reporting person's retirement from the issuer.

Remarks:

Brian B. DeFoe, Attorney-in-	03/29/2024				
Fact for Ken Worzel	03/29/2024				

Date

** Signature of Reporting Person

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.