FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP							
	STATEMENT	OF C	<b>HANGES</b>	IN BENEF	FICIAL	<b>OWNER</b>	SHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burde	en									
hours per response:	0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

Name and Address of Reporting Person*     Myers Margaret					2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [ JWN ]								(Chec	k all applica Director	,		10% Ow	
(Last) (First) (Middle) C/O NORDSTROM, INC. 1617SIXTH AVENUE				02	3. Date of Earliest Transaction (Month/Day/Year) 02/28/2008								X Officer (give title Other (specify below)  Executive Vice President					
(Street) SEATTLE WA 98101					02/29/2008 Line								Individual or Joint/Group Filing (Check Applicable le)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)															
1. Title of Security (Instr. 3) 2. Trans: Date				sactio				3. Transaction Code (Instr. 8)  4. Securities Acquired (A) (Disposed Of (D) (Instr. 3, 4)		(A) or	5. Amount of		Form:	Direct Indirect E	. Nature of ndirect seneficial ownership nstr. 4)			
								Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)					
Common	Stock													15,400		D		
Common Stock					5,224				24		I I S	By 101(k) Plan, per Plan tatement lated /31/08						
			Table II -	Deriva (e.g., p	ative puts	e Sec s, cal	urities Ad Is, warrar	cqui 1ts,	red, D option	ispo is, c	sed of, o	r Benefi e securi	cially O	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da r) if any (Month/Day/Y	Co	ansad		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Dat (Month/Day/Ye		te of Securities		es J Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Co	ode	v	(A) (D)		Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		Transacti (Instr. 4)	ion(s)		
Employee Stock Option (right to	\$38.02	02/28/2008		1	A		13,695 <sup>(1)(2)</sup>		(3)		02/28/2018	Common Stock	13,695	\$0	13,69	95	D	

## **Explanation of Responses:**

- 1. 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 was 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.
- 2. This Form 4 is being amended to report the number of options granted, which was unknown at the time of the original filing on February 29, 2008, pursuant to a formula approved by the Compensation Committee.
- 3. Granted under the issuer's 2004 Equity Incentive Plan, exercisable in four equal annual installments commencing on 2/28/09.

## Remarks:

/s/ Duane E. Adams, Attorneyin-Fact for Margaret Myers

03/10/2008

\*\* 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.