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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

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

OWR APPRO	VAL							
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [JWN]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
FINN LINDA T				Director 10% Owner					
(Last) (First) (Middle) C/O NORDSTROM, INC.			2. Data of Earliest Transaction (Manth/Dau/Mast)	X Officer (give title Other (specify below)					
		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/21/2007	Executive Vice President					
1617 SIXTH AVENUE			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable					
(Street)			02/22/2007	Line)					
	98101		X Form filed by One Reporting Person						
·				Form filed by More than One Reporting Person					
(City)	(State)	(Zip)							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Table 1 - Non-Derivative decurries Acquired, Disposed of, of Derienciary owned										
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned 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	02/21/2007		A		5,367(1)	A	\$ <mark>0</mark>	32,639	D	
Common Stock	03/13/2007		F		1,956(2)	D	\$56.68	30,683	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 Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5	ative rities ired osed . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		e and 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) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Settlement of Performance Rights which were awarded by the Board's Compensation Committee on 2/25/04 pursuant to the Nordstrom, Inc. 1997 Stock Option Plan. The Performance Rights vested on 2/21/07, based on the Compensation Committee's determination that the applicable performance criteria had been met as of 2/3/07.

2. Exercise of tax withholding right upon settlement of Performance Shares. The tax withholding right was previously approved by the Board's Compensation Committee at the time of the Performance Share grant.

Remarks:

/s/ Duane E. Adams, Attorney-03/14/2007

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.