FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------|----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | |

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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).

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* | | | | | | 2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [JWN] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| CAMPBELL PHYLLIS J | | | | | 1 | 110112011101111110 [31111] | | | | | | | | | X | Direc | ctor | 10% | Owner | |
| , | | | | | | | | | | | | er (give title | | r (specify | | | | | | |
| (Last) | Last) (First) (Middle) | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/19/2009 | | | | | | | | belov | N) | belo | N) | |
| C/O JPMORGAN CHASE & CO. | | | | | | 03/13/2003 | | | | | | | | | | | | | | |
| 1301 SECOND AVENUE, FLOOR 31 | | | | | \vdash | | | | | | | | | | | | | | | |
| | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) | | | | | | | | | | | | | | - | X Form filed by One Reporting Person | | | | | |
| SEATTL | E W | A 9 | 98101 | | | | | | | | | | | | Form filed by More than One Reporting | | | | | |
| | | | | | | | | | | | | | | | Person | | | | | |
| (City) | (St | ate) (| (Zip) | | | | | | | | | | | | | | | | | |
| | | Tabl | le I - Nor | n-Deriv | ative | Se | curitie | s Acq | uired, | Dis | posed o | f, oı | r Ben | efici | ally (| Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution I | | Date, | 3. Transa Code (8) | action Dispose | | ties Acquired (A) d Of (D) (Instr. 3, | | | | 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Ownership | |
| | | | | | | | | | | v | Amount | | (A) or (D) | Price | , | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | |
| Common Stock 05/19/ | | | | | 5/19/2009 | | | | | | 4,361 | 1) | A \$22 | | 2.93 7,347 | | 7,347 | D | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| | | | (| e.g., pı | uts, c | alls | , warr | ants, | option | ıs, c | onvertib | le s | ecuri | ties) | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | | | 4. Transaction Code (Instr. 8) | | n of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | | vative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | | Date Exercisa | | Expiration Date | Title | or Nur of | ount nber ares | | | | | | |

Explanation of Responses:

1. Annual grant under the 2002 Nonemployee Director Stock Incentive Plan.

Remarks:

<u>Duane E. Adams, Attorney-in-</u> <u>Fact for Phyllis J. Campbell</u> <u>05/20/2009</u>

** 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.