FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

\	D	20540
Washington,	D.C.	20049

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*  Worzel Ken					2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [ JWN ]							ck all applica Director Officer (	,		10% Ov Other (s	vner		
(Last) (First) (Middle) C/O NORDSTROM, INC. 1617 SIXTH AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 03/03/2014								Executive Vice President					
(Street) SEATTL	E W	/A	98101		4. If Amendment, Date of Original Filed (Month/Day/Year) 03/05/2014						Line)	Advividual or Joint/Group Filing (Check Applicable  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	State)	(Zip)		. 3333.													
		Ta	able I - Non	-Deriva	tive S	ecurities A	Acq	uired,	Disp	oosed of,	or Bene	eficially	Owned					
Date			2. Transac Date (Month/Da	Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Ownership					
						Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)			
Common	non Stock									9,844	1.75		D					
Common Stock												1,935.54			I 3	By 401(k) Plan, per Plan statement dated 3/10/2014		
			Table II - E	Derivati e.g., pu	ve Sed ts, ca	curities A	cqui nts,	ired, D optior	ispo is, c	osed of, o	r Benef e securi	icially C ties)	wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Code	action (Instr.	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)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction	ve es ally ng d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)				
Employee Stock Option (right to	\$61.21	03/03/2014		A		24,411 <sup>(1)(2)</sup>		(3)		03/03/2024	Common Stock	24,411	\$0	24,4	11	D		

## **Explanation of Responses:**

- 1. This Form 4 is being amended to report the number of options granted, which was unknown at the time of the original filing on 3/5/2014, pursuant to a formula approved by the Compensation Committee.
- 2. 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.
- $3.\ Granted\ under\ the\ issuer's\ 2010\ Equity\ Incentive\ Plan,\ exercisable\ in\ four\ equal\ installments\ commencing\ on\ 3/3/2015.$

## Remarks:

Paula McGee, Attorney-in-Fact for Ken Worzel 03/27/2014

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\ast}$  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.