FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL	<b>OWNERSHIP</b>
Section 16. Form 4 or Form 5		
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**OMB APPROVAL** OMB Number: 3235-0287 Estimated average burden

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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*     Lionello Gemma						2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [ JWN ]								eck all applica	able)	ting Person(s) to Issuer  10% Owner te Other (specify		wner	
(Last) (First) (Middle) C/O NORDSTROM, INC. 1617 SIXTH AVENUE					03	3. Date of Earliest Transaction (Month/Day/Year) 03/03/2014								Executive Vice President					
(Street) SEATTLE WA 98101					4. If Amendment, Date of Original Filed (Month/Day/Year) 03/05/2014							Line	Individual or Joint/Group Filing (Check Applicable Line)     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	action 2A. Deemed Execution Date,		uired, Disposed of, or Bene  3.			(A) or	or 5. Amount of			Direct	7. Nature of Indirect				
			(WOTHIT	Month/Day/Year)		if any (Month/Day/Year)		8)	Code V Amount		(A) or	Price	Owned Following Reported Transaction(s) (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)		
Common Stock											(D)		4,61	,	]	D			
Common Stock												3,071.53		I		By 401(k) Plan, per Plan statement dated 3/10/2014.			
			Table II -								osed of, convertible			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day	ate, Transac Code (Ir			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Da (Month/Day/Yo		ite	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		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)				
Employee Stock Option	\$61.21	03/03/2014			A		9,858 <sup>(1)(2)</sup>		(3)		03/03/2024	Common Stock	9,858	\$0	9,85	58	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 LT1%) / option fair value.
- 3. Granted under the issuer's 2010 Equity Incentive Plan, exercisable in four equal installments commencing on 3/3/2015.

## Remarks:

/s/ Paula McGee, Attorney-in-Fact for Gemma Lionello

03/27/2014

\*\* 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.