#### NORDSTROM INC

Form 4 June 22, 2015

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

**OMB APPROVAL** 

response...

Check this box if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

Common

Stock

(Print or Type Responses)

(Print or Type B	(esponses)											
1. Name and Address of Reporting Person * SARI ROBERT			2. Issuer Name and Ticker or Trading Symbol NORDSTROM INC [JWN]						5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	iddle) 3. D	3. Date of Earliest Transaction						(Check all applicable)			
, ,	STROM, INC., 17	(Mo	(Month/Day 06/17/201			nsuction			Director 10% Owner _X_ Officer (give title Other (specify below)  Exec. VP and Secretary			
(Street) 4. If Ame			Amen	endment, Date Original					6. Individual or Joint/Group Filing(Check			
SEATTLE, WA 98101				h/Day/Y	ŕ				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person  quired, Disposed of, or Beneficially Owned			
(City)	(State)	<b>∟.</b>	Table	: I - Noi	n-D€	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	illy Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Dat any (Month/Day/Y	ŕ	3. Transa Code (Instr.		4. Securi nAcquired Disposed (Instr. 3,	l (A) o l of (E	<b>)</b> )	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	06/17/2015			G	V	1,500	D	\$0	7,078	D		
Common Stock	06/17/2015			G	V	1,500	A	\$0	1,500	I	By Wife	

By 401(k) Plan, per

statement dated 5/31/15

Plan

1,609.892

I

#### Edgar Filing: NORDSTROM INC - Form 4

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

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 control number.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

<ol> <li>Title of</li> </ol>	2.	3. Transaction Date	3A. Deemed	4.		5.	6. Date Exerc	cisable and	7. Tit	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transa	ction	Number	Expiration D	ate	Amou	ınt of	Derivative
Security	or Exercise		any	Code		of	(Month/Day/	Year)	Unde	rlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr.	8)	Derivative	•		Secur	ities	(Instr. 5)
	Derivative		•			Securities			(Instr	. 3 and 4)	
	Security					Acquired			`		
	Ĭ					(A) or					
						Disposed					
						of (D)					
						(Instr. 3,					
						4, and 5)					
						, ,					
										Amount	
							Date	Expiration		or	
							Exercisable	Date	Title	Number	
							LACICISUOIC Date	of	of		
				Code	V	(A) (D)				Shares	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships
reporting o wher ranne, readies	

Director 10% Owner Officer Other

SARI ROBERT C/O NORDSTROM, INC. 1700 7TH AVENUE SEATTLE, WA 98101

Exec. VP and Secretary

## **Signatures**

Paula McGee, Attorney-in-Fact for Robert

B. Sari 06/22/2015

\*\*Signature of Reporting Person Date

### **Explanation of Responses:**

\* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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