NORDSTROM INC

Form 4

October 08, 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:

5. Relationship of Reporting Person(s) to

January 31, 2005

0.5

Estimated average

response...

burden hours per

**OMB APPROVAL** 

Issuer

subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

if no longer

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

Symbol

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

KOPPEL MICHAEL G

1. Name and Address of Reporting Person \*

See Instruction

			NORDSTROM INC [JWN]						(Check all applicable)			
(Last)  C/O NORD SIXTH AV	3. Date of Earliest Transaction (Month/Day/Year) 10/06/2015						Director 10% Owner X Officer (give title Other (specify below)					
				If Amendment, Date Original ed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _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												
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	r) Execution	med on Date, if Day/Year)	3. Transacti Code (Instr. 8)	onAc Di (It	Securitic Securitics Securities Securitics Securities S	(A) o of (D	)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Stock	10/06/2015			A	56	60	A	\$0	69,013 (1)	D		
Common Stock									6,288.23	I	By 401 (k) Plan, per Plan statement dated 9/30/2015.	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.												
Persons who re information con									SEC 1474 (9-02)			

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Date		Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amaunt		
						Date Exercisable	T	Title Number of			
				Code V	(A) (D)						
				Code V	4, and 5)		•	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

KOPPEL MICHAEL G C/O NORDSTROM, INC. 1617 SIXTH AVENUE SEATTLE, WA 98101

**Executive Vice President** 

## **Signatures**

Paula McGee, Attorney-in-Fact for Michael G. Koppel

10/08/2015

\*\*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).

Represents additional restricted stock units (RSUs) resulting from the adjustment on October 6, 2015 of outstanding unvested RSUs by a factor of 1.0708857 in connection with the special cash dividend approved by the issuer's board of directors on October 1, 2015.

Adjustment of outstanding unvested RSUs was required pursuant to the terms of Nordstrom, Inc. 2010 Equity Incentive Plan. These additional RSUs are subject to the original vesting schedule in place with respect to the RSUs giving rise to the award adjustment.

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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