### Edgar Filing: Meden Scott A - Form 4/A

Meden Scott A Form 4/A November 26, 2010 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).									OMB APPROVAL OMB 3235-0287 Number: January 31, 2005 Estimated average burden hours per response 0.5			
(Print or Type Respon	nses)											
Meden Scott A Symbo			Symbol		nd Ticker or T INC [JWN	-		Relationship of Reporting Person(s) to ssuer				
(Month.			3. Date of (Month/D 11/22/20	ay/Year)	Fransaction		X belo	(Check all applicable) Director 10% Owner Officer (give title Other (specify w) below) Executive Vice President				
Filed(M				nth/Day/Ye	Date Original ar)		App _X_	dividual or Joint/Group Filing(Check cable Line) Form filed by One Reporting Person form filed by More than One Reporting n				
(City) (	(State)	(Zip)	Table	e I - Non-	Derivative Se	ecuriti	es Acquireo	l, Disposed of,	or Beneficially	Owned		
Security (Mont (Instr. 3)			ate, if 7 C /Year) (	3. Fransactio Code (Instr. 8) Code V	4. Securities And Disposed of ( (Instr. 3, 4 and Amount	D)	ed (A) or Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4	Ownership Form: Direct (D) or Indirect (I) ) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock								13,907	D			
Common 11/22 Stock	2/2010		S	S/K	1,899.883	D	\$ 42.6811	6,809.994	Ι	By 401(k) Plan, per Plan statement dated 11/24/10		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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# required to respond unless the form displays a currently valid OMB control number.

# 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		4. T	5.	6. Date Exerc		7. Title a		8. Price of	9. Nu
Derivative Security	Conversion or Exercise	(Month/Day/Year)	· · ·	Transactic Code	of	Expiration Day/		Amount of Underlyin		Derivative Security	Deriv Secu
(Instr. 3)	Price of Derivative Security		any (Month/Day/Year)	(Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	e	i cai)	Securities (Instr. 3 a	s	(Instr. 5)	Secu Bene Owne Follo Repo Trans (Instr
				Code V		Date Exercisable	Expiration Date	or Title Nu of	umber		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>			Relationships			
	Director	10% Owner	Officer	Other		
Meden Scott A C/O NORDSTROM, INC. 1700 SEVENTH AVENUE SEATTLE, WA 98101			Executive Vice President			
Signatures						
/s/ Duane E. Adams, Attorney- Meden	in-Fact fo	or Scott A.	11/26/2010			

<u>\*\*</u>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.