Edgar Filing: NORDSTROM BLAKE W - Form 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue Section 17(a) of th	n 4 ch 08, 2018 DRM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction									
1. Name and Address of Reporting Person <u>*</u> NORDSTROM BLAKE W	5. Relationship of Reporting Person(s) to Issuer									
(Last) (First) (Middle) C/O NORDSTROM, INC., 1617 SIXTH AVENUE	NORDSTROM INC [JWN] 3. Date of Earliest Transaction (Month/Day/Year) 03/06/2018	(Check all applicable) X Director 10% Owner X Officer (give title 0ther (specify below) Co-President								
(Street) SEATTLE, WA 98101	 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 Acc	uired, Disposed of, or Beneficially Ov	vned							
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. De Execut any (Month	1	5. Amount of 6. 7. Nat Securities Ownership Indire Beneficially Form: Direct Benef Owned (D) or Owne Following Indirect (I) (Instr. Reported (Instr. 4) Transaction(s) (Instr. 3 and 4)	ïcial rship							
Common 03/06/2018 Stock	A $\frac{54,233}{(1)}$ A \$0	2,245,514 D								
Common Stock		92,983.77 I dated	ment							
Common Stock		377,626 I By w	vife.							
		32,794 I								

Edgar Filing: NORDSTROM BLAKE W - Form 4

Common Stock									By se truste benef child	e for fit of		
Reminder: Report on a separate line for each class of securities benefic				Person inform require display	tially owned directly or indirectly. Persons who respond to the collection information contained in this form are r required to respond unless the form displays a currently valid OMB control number.				not (9-02)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 3)	Derivative Conversion (Month/Day Security or Exercise		ction Date 3A. Deemed ay/Year) Execution Date, if any (Month/Day/Year)		5. onNumber of Derivatives Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Repor	ting Ov	wners										
Reporting Owner Name / Address Relationsh			ships									
		Direct	tor 10% Owner C	Officer	Othe	er						
C/O NOR 1617 SIX	ROM BLAK DSTROM, I TH AVENUI E, WA 98101	NC. E X		Co-Preside	ent							
Signa	tures											
Koron Du	hy Attornoy	in Fact for Blo	ako W									

Karen Ruby, Attorney-in-Fact for Blake W. 03/08/2018 Nordstrom **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).
- (1) Restricted Stock Award vesting in four equal annual installments commencing 3/10/2019. The number of RSUs awarded is a function of base pay, a long-term incentive (LTI) percentage and the fair value of an RSU. The fair value of an RSU is calculated as the stock price as

Edgar Filing: NORDSTROM BLAKE W - Form 4

of the effective date less the present value of Company stock dividends over the vesting period. This calculation requires the input of certain assumptions, including the risk-free interest rate and the expected Company stock dividends. The formula for determining the number of RSUs granted is: number of RSUs = (base pay x LTI%) / RSU fair value.

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.