SATRE PHILIP G Form 4

# December 18, 2006 **FORM 4**

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

OMB Number: 3235-0287

Check this box if no longer subject to STATEMENT

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Expires: January 31, 2005

0.5

**OMB APPROVAL** 

Section 16.
Form 4 or
Form 5
obligations

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

**SECURITIES** 

Estimated average burden hours per response...

may continue. *See* Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*SATRE PHILIP G

2. Issuer Name **and** Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

NORDSTROM INC [JWN]

(Check all applicable)

(Last) (First) (Middle)

Date of Earliest Transaction (Month/Day/Year)

\_X\_ Director \_\_\_\_\_ 10% Owner \_\_\_\_\_ Officer (give title \_\_\_\_\_ Other (specify below) below)

219 NORTH CENTER STREET

(Street)

12/15/2006

6. Individual or Joint/Group Filing(Check

4. If Amendment, Date Original Filed(Month/Day/Year)

Applicable Line)

\_X\_ Form filed by One Reporting Person \_\_\_ Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

RENO, NV 89501

Security

(Instr. 3)

Stock

(City) (State) (Zip)

1.Title of 2. Transaction Date 2A. Deemed

3. 4. Securities
TransactionAcquired (A) or
Code Disposed of (D)
(Instr. 8) (Instr. 3, 4 and 5)

5. Amount of 6. Owner Securities Form: Di Beneficially (D) or Owned Indirect (Following (Instr. 4)

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A) or Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price Common

(Month/Day/Year)

(Month/Day/Year) Execution Date, if

4,119 D

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.

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

#### Edgar Filing: SATRE PHILIP G - Form 4

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)		4. Transac Code		5. Num nof Derivat		6. Date Exerc Expiration D (Month/Day/	ate	7. Title and A Underlying S (Instr. 3 and A	Securities	8. Price Derivati Security
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Mondubay/ Teal)		(MSt. 5 and 4)		(Instr. 5)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Unit	<u>(1)</u>	12/15/2006		A		4.54 (2)		<u>(3)</u>	(3)	Common Stock	4.54	\$0

### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
SATRE PHILIP G 219 NORTH CENTER STREET RENO, NV 89501	X							

#### **Signatures**

/s/ Duane E. Adams, Attorney-in-Fact for Philip G. Satre 12/18/2006

\*\*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**) 1 for 1
- Stock unit dividend paid on stock units deferred at the election of the reporting person under the Directors' Deferred Compensaton Plan.
- The stock units are convertible into the issuer's common stock and payable upon the occurrence of certain events, including the reporting person's retirement from the issuer's Board of Directors.
- (4) Represents the total number of stock units held by the reporting person under the Directors' Deferred Compensation Plan.

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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