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Meden Scott A	L Contraction of the second se						
Form 4							
March 01, 201	0						
FORM	-	OMB APPROVAL					
Check this box					OMB Number:	3235-0287	
if no longer					Expires:	January 31, 2005	
subject to Section 16. Form 4 or	SIAIEM	ENT OF CHAN	F CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES			ed average hours per e 0.5	
Form 5 obligations may continu <i>See</i> Instruct 1(b).	ue. Section 17(a)) of the Public U	6(a) of the Securities Exchar tility Holding Company Act westment Company Act of 19	of 1935 or Sectio	·		
(Print or Type Rea	sponses)						
1. Name and Address of Reporting Person <u>*</u> Meden Scott A		Symbol	Ligno		lationship of Reporting Person(s) to r		
(T)				(Check all applicable)			
(Last) (First) (Middle) C/O NORDSTROM, INC., 1700 SEVENTH AVENUE		(Month/I	f Earliest Transaction Day/Year) 010	Director 10% Owner X Officer (give title Other (specify below) below)			
					ive Vice Presid		
(Street)			endment, Date Original	6. Individual or Joint/Group Filing(Check			
SEATTLE, W	/A 98101	Filed(Mo	nth/Day/Year)	Applicable Line) _X_ Form filed by 0 Form filed by M Person			
(City)	(State) (Z	Zip) Tab	le I - Non-Derivative Securities A	cquired, Disposed of	f, or Beneficia	lly Owned	
Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock				13,302	D		
Common Stock				8,594.383	I	By 401(k) Plan, per Plan statement dated 1/31/10	

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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date Underlyin (Month/Day/Year) (Instr. 3 an e		7. Title and J Underlying S (Instr. 3 and	Securities	8. Pri Deriv Secu (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (right to buy)	\$ 36.94	02/26/2010		А	0 (1)	<u>(2)</u>	02/26/2020	Common Stock	0 (1)	\$

Reporting Owners

Reporting Owner Name / Address	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-in-Fact for Scott A. Meden

**Signature of Reporting Person

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).

The number of options granted is not known at this time. The number is calculated as a function of base pay, a long-term incentive (LTI) percentage and the fair value of the option. The Binomial Lattice option valuation model will be used to estimate the fair value of the

03/01/2010

Date

(1) option. This model requires the input of certain assumptions, including risk-free interest rate, volatility, dividend yield, and expected life. The formula for determining the number of options granted is: number of options = (base pay x LTI%) / option fair value. This Form 4 will be amended to report the number of options granted when that number has been calculated.

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(2) Granted under the issuer's 2004 Equity Incentive Plan, exercisable in four equal annual installments commencing on 2/26/2011.

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.