Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2021

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan
NORDSTROM 401K PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1953

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
NORDSTROM, INC.

EMPLOYEE BENEFITS

1600 7TH AVE. SUITE 2500
SEATTLE, WA 98101

2b Employer Identification Number (EIN)
91-0515058

2c Plan Sponsor's telephone number
855-667-3947

2d Business code (see instructions)
452200

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	06/14/2022	ASHLEY MOORE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.		
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	Filed with authorized/valid electronic signature.		
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor

NORDSTROM 401K PLAN RETIREMENT COMMITTEE

1600 7TH AVE. SUITE 2500
SEATTLE, WA 98101

3b Administrator's EIN
91-0979776

3c Administrator's telephone number
855-667-3947

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:
a Sponsor's name
c Plan Name

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	98828
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	60608
a(2) Total number of active participants at the end of the plan year	**6a(2)**	69744
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	46699
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	116443
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	247
f Total. Add lines **6d** and **6e**	**6f**	116690
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	105901
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	17910
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

2F 2G 2J 2K 2R 2S 2T 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)

(1)	☐	Insurance
(2)	☐	Code section 412(e)(3) insurance contracts
(3)	☒	Trust
(4)	☐	General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)	☐	Insurance
(2)	☐	Code section 412(e)(3) insurance contracts
(3)	☒	Trust
(4)	☐	General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

(1)	☒	**R** (Retirement Plan Information)
(2)	☐	**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
(3)	☐	**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1)	☒		**H** (Financial Information)
(2)	☐		**I** (Financial Information – Small Plan)
(3)	☐	0	**A** (Insurance Information)
(4)	☒		**C** (Service Provider Information)
(5)	☒		**D** (DFE/Participating Plan Information)
(6)	☐		**G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2021** **This Form is Open to Public Inspection.**

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan	**B** Three-digit plan number (PN) ▶
NORDSTROM 401K PLAN	001

C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
NORDSTROM, INC.	91-0515058

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

CAPITAL BANK AND TRUST COMPANY

95-4797716

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

LOOMIS SAYLES TRUST COMPANY, LLC

20-8080381

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

NEUBERGER BERMAN INVSTMNT ADVISERS

02-0654486

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

PUTNAM FIDUCIARY TRUST CO., LLC

04-2777224

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

SEI TRUST COMPANY

06-1271230

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

STATE STREET GLOBAL ADVISORS

81-4017137

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

THE VANGUARD GROUP, INC.

23-1945930

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

ALIGHT FINANCIAL ADVISORS, LLC

82-1061233

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 50	NONE	2725634	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

ALIGHT SOLUTIONS LLC

82-1061233

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 50	RECORDKEEPER	2654614	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

(a) Enter name and EIN or address (see instructions)

DODGE & COX

94-1441976

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50 51 52 68	NONE	2512219	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

WILLIAM BLAIR INVESTMENT MGMT LLC

47-2614791

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50 51 52 68	NONE	1947757	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

(a) Enter name and EIN or address (see instructions)

VOYA INVESTMENT MANAGEMENT COMPANY

06-1440627

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50 51 52	NONE	1266626	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

BANK OF NEW YORK MELLON

13-5160382

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 25 28 50 51 52	NONE	818033	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

CALLAN ASSOCIATES

94-2192581

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	CONSULTANT	311433	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

MOSS ADAMS

91-0189318

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	AUDITOR	51300	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

PERSHING LLC

13-2741729

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
59 61 71 99	NONE	0	Yes [X] No [ ]	Yes [ ] No [X]	47922	Yes [ ] No [X]

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

JACKSON LEWIS

43-3862389

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	ERISA COUNSEL (FORMER)	32114	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

THOMPSON HINE

34-0575300

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	ERISA COUNSEL (CURRENT)	28790	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

QDRO CONSULTANTS CO LLC

34-1820650

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	CONSULTANT	6650	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

ALIGHT FINANCIAL SOLUTIONS, LLC

82-1061233

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 50 61 63	NONE	0	Yes [X] No [ ]	Yes [X] No [ ]	1463	Yes [ ] No [X]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PERSHING LLC	99	2532

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ALIGHT FINANCIAL SOLUTIONS 82-1061233	OTHER FEES RELATED TO CLEARING AGENT SERVICES PROVIDED TO ALIGHT FINANCIAL SOLUTIONS, LLC FOR THE SELF-DIRECTED BROKERAGE WINDOW

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ALIGHT FINANCIAL SOLUTIONS, LLC	63	674

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MULTIPLE MUTUAL FUND COMPANIES 82-1061233	AGGREGATED INVESTMENT MANAGER FUND FEES

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
ALIGHT FINANCIAL SOLUTIONS, LLC	61	789

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PERSHING LLC 13-2741729	FINDER'S FEES

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PERSHING LLC	71	39813

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ALIGHT FINANCIAL SOLUTIONS 82-1061233	CLEARING AGENT SERVICES PROVIDED TO ALIGHT FINANCIAL SOLUTIONS, LLC FOR THE SELF-DIRECTED BROKERAGE WINDOW

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PERSHING LLC	59	256

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MULTIPLE MUTUAL FUND COMPANIES 13-2741729	SHAREHOLDER SERVICING FEES

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
PERSHING LLC	61	5320

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MULTIPLE MUTUAL FUND COMPANIES 13-2741729	FINDER'S FEES

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

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(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III	**Termination Information on Accountants and Enrolled Actuaries (see instructions)** (complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2021

This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan
NORDSTROM 401K PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
NORDSTROM, INC.

D Employer Identification Number (EIN)
91-0515058

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM STABLE VALUE FUND

b Name of sponsor of entity listed in (a): PUTNAM FIDUCIARY TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
04-3159710-202	C	308861874

a Name of MTIA, CCT, PSA, or 103-12 IE: EB TEMPORARY INVESTMENT

b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
25-6078093-023	C	45444733

a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA TIPS INDEX

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-0337987-168	C	74615075

a Name of MTIA, CCT, PSA, or 103-12 IE: LOOMIS SAYLES CORE PLUS FIXED INCOM

b Name of sponsor of entity listed in (a): LOOMIS SAYLES TRUST COMPANY, LLC

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
84-6391546-010	C	462455106

a Name of MTIA, CCT, PSA, or 103-12 IE: SCHRODER INT'L MULTI-CAP EQTY TRUST

b Name of sponsor of entity listed in (a): SEI TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
46-4869591-011	C	256605623

a Name of MTIA, CCT, PSA, or 103-12 IE: EUROPACIFIC GROWTH FUND

b Name of sponsor of entity listed in (a): THE CAPITAL GROUP EUROPACIFIC GROWTH TRUST

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
95-6597294-661	C	594316772

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II **Information on Participating Plans (to be completed by DFEs)**
(Complete as many entries as needed to report all participating plans)

a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2021

This Form is Open to Public Inspection

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan
NORDSTROM 401K PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
NORDSTROM, INC.

D Employer Identification Number (EIN)
91-0515058

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	4118821	186603085
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	103402	270000
(2) U.S. Government securities	1c(2)	90594798	119409159
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	28760593	25342614
(B) All other	1c(3)(B)	59124188	55952818
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	2557719	2237172
(B) Common	1c(4)(B)	948417498	877603217
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	80363896	68623231
(9) Value of interest in common/collective trusts	1c(9)	1641868087	1742299184
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	831404027	985223742
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	41827248	55985225

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)	113519259	71681151
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	3842659536	4191230598
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h	1503653	3033419
i	Acquisition indebtedness	1i		
j	Other liabilities	1j	6993014	41316723
k	Total liabilities (add all amounts in lines 1g through1j)	1k	8496667	44350142
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	3834162869	4146880456

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		**(a)** Amount	**(b)** Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	64122641	
	(B) Participants	2a(1)(B)	156156946	
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		220279587
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	39566	
	(B) U.S. Government securities	2b(1)(B)	1728561	
	(C) Corporate debt instruments	2b(1)(C)	3382316	
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	3509394	
	(F) Other	2b(1)(F)	252447	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		8912284
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)	49377	
	(B) Common stock	2b(2)(B)	11794743	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	9765749	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		21609869
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	873856844	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	806089500	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		67767344
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)	92812224	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		92812224

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		47298010
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		210958820
c Other income	2c		-4737295
d Total income. Add all **income** amounts in column (b) and enter total	2d		664900843
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	338314093	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		338314093
f Corrective distributions (see instructions)	2f		1117627
g Certain deemed distributions of participant loans (see instructions)	2g		395565
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)	431088	
(2) Contract administrator fees	2i(2)	2654614	
(3) Investment advisory and management fees	2i(3)	6544635	
(4) Other	2i(4)	2725634	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		12355971
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		352183256
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		312717587
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) [ ] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [X] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: MOSS ADAMS LLP **(2)** EIN: 91-0189318

d The opinion of an independent qualified public accountant is **not attached** because:

(1) [ ] This form is filed for a CCT, PSA, or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a	X		3184

			Yes	No	Amount
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e	Was this plan covered by a fidelity bond?	**4e**	X		10000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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OMB No. 1210-0110

2021

This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan
NORDSTROM 401K PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
NORDSTROM, INC.

D Employer Identification Number (EIN)
91-0515058

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 25-1926855

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

20 **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation _____

MOSSADAMS

Report of Independent Auditors

The Retirement Committee and Participants of
Nordstrom 401(k) Plan

Report on the Audit of the Financial Statements

Opinion

We have audited the financial statements of Nordstrom 401(k) Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2021 and 2020, and the related statement of changes in net assets available for benefits for the year ended December 31, 2021, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of Nordstrom 401(k) Plan as of December 31, 2021 and 2020, and the changes in its net assets available for benefits for the year ended December 31, 2021, in accordance with accounting principles generally accepted in the United States of America (GAAP).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Nordstrom 401(k) Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Nordstrom 401(k) Plan's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the plan, and determining that the plan's transactions that are presented and disclosed in the financial statements are in conformity with the plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for purpose of expressing an opinion on the effectiveness of Nordstrom 401(k) Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Nordstrom 401(k) Plan's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matter

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of the Schedule H, line 4(i) – schedule of assets (held at end of year) as of December 31, 2021, and the Schedule H, line 4(a) – schedule of delinquent participant contributions for the year ended December 31, 2021, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedules is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Moss Adams LLP

San Francisco, California
June 9, 2022

Nordstrom 401(k) Plan

Employer ID No: 91-0515058

Plan Number: 001

Report of Independent Auditors and
Financial Statements as of December 31, 2021 and 2020
and for the Year Ended December 31, 2021,
with Supplementary Information

NORDSTROM 401(k) PLAN
PLAN YEAR ENDED December 31, 2021
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All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

DEFINITIONS OF COMMONLY USED TERMS

Term	Definition
BNYM	Bank of New York Mellon
Board	Nordstrom, Inc.'s Board of Directors
CARES Act	Coronavirus Aid, Relief and Economic Security Act
Company	Nordstrom, Inc. and its participating subsidiaries
CCT	Common collective trust
DOL	Department of Labor
ERISA	Employee Retirement Income Security Act of 1974
GAAP	U.S. generally accepted accounting principles
IRA	Individual Retirement Account
IRC	Internal Revenue Code
IRS	Internal Revenue Service
NAV	Net asset value
Plan	Nordstrom 401(k) Plan
Plan Administrator	Nordstrom Retirement Committee appointed by the Board
PTE	Prohibited Transaction Exemption
QACA	Qualified Automatic Contribution Arrangement
VFCP	Voluntary Fiduciary Correction Program

Report of Independent Auditors

The Retirement Committee and Participants of
Nordstrom 401(k) Plan

Report on the Audit of the Financial Statements

Opinion

We have audited the financial statements of Nordstrom 401(k) Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2021 and 2020, and the related statement of changes in net assets available for benefits for the year ended December 31, 2021, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of Nordstrom 401(k) Plan as of December 31, 2021 and 2020, and the changes in its net assets available for benefits for the year ended December 31, 2021, in accordance with accounting principles generally accepted in the United States of America (GAAP).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Nordstrom 401(k) Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Nordstrom 401(k) Plan's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the plan, and determining that the plan's transactions that are presented and disclosed in the financial statements are in conformity with the plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for purpose of expressing an opinion on the effectiveness of Nordstrom 401(k) Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Nordstrom 401(k) Plan's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matter

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of the Schedule H, line 4(i) – schedule of assets (held at end of year) as of December 31, 2021, and the Schedule H, line 4(a) – schedule of delinquent participant contributions for the year ended December 31, 2021, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedules is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

/s/ Moss Adams LLP
San Francisco, California
June 9, 2022

NORDSTROM 401(k) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
(Amounts in thousands)

	December 31,	
	2021	**2020**
Assets		
Participant-directed investments at fair value (see Note 3: Fair Value Measurements)	**$3,936,004**	$3,769,501
Notes receivable from participants	**68,623**	80,364
Accrued income and broker receivable	**186,603**	16,635
Total assets	**4,191,230**	3,866,500
Liabilities		
Administrative expenses and other payables	**3,033**	1,504
Excess contributions payable to participants	**—**	1,098
Due to broker for securities purchased	**41,317**	29,736
Total liabilities	**44,350**	32,338
Net assets available for benefits	**$4,146,880**	$3,834,162

The accompanying Notes to Financial Statements are an integral part of these financial statements.

NORDSTROM 401(k) PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
(Amounts in thousands)

Plan year ended	December 31, 2021
Additions	
Contributions	
Company contributions	**$64,123**
Employee contributions	**156,157**
Total contributions	**220,280**
Investment income	
Net appreciation in fair value of investments	**403,171**
Interest and dividends	**41,450**
Total investment income	**444,621**
Total additions	**664,901**
Deductions	
Benefit payments to participants	**339,827**
Administrative expenses and other	**12,356**
Total deductions	**352,183**
Net increase in net assets	**312,718**
Net assets available for benefits at beginning of year	**3,834,162**
Net assets available for benefits at end of year	**$4,146,880**

The accompanying Notes to Financial Statements are an integral part of these financial statements.

NORDSTROM 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS

(Dollar and share amounts in thousands)

NOTE 1: DESCRIPTION OF THE PLAN

The Nordstrom 401(k) Plan, as amended and restated, was originally established on January 1, 1953 and is a defined contribution plan. In 2021, the Board approved an amendment to the Plan adopting certain QACA safe harbor provisions effective January 1, 2021. The Plan was restated in 2021 to incorporate these provisions, as well as provisions of the CARES Act. The Plan was further amended in 2021 to adopt provisions of the Bipartisan Budget Act of 2018 as well as other technical and administrative changes. The following description of the Plan's provisions is for informational purposes only and does not bind the Plan. Participants should refer to the Plan documents for a more complete description of the Plan's provisions.

General

The Plan covers substantially all employees of the Company and is subject to the provisions of ERISA. Employees are eligible to make elective salary deferrals and receive Company matching contributions upon hire. The Plan contains eligibility provisions to ensure that all eligible employees enter the Plan by the latest participation date required under the applicable provisions of the IRC.

Beginning January 1, 2021, Company contributions are paid each pay period that an eligible participant contributes to the Plan.

Plan Year

The Plan operates on a calendar year ending on December 31. References to 2021 and 2020 relate to the Plan years ended December 31, 2021 and December 31, 2020.

Trustee and Administrator of the Plan

BNYM is the asset trustee of the Plan and Alight Solutions provides recordkeeping services for the Plan.

The Plan is administered by the Company in conjunction with the Plan Administrator.

Plan Contributions

Contributions to the Plan are made through employee contributions, including catch-up contributions, Company contributions and participant rollover contributions. Contributions are subject to certain limitations of the IRC.

Employee Contributions — Eligible employees may elect to defer up to 50% of eligible compensation on a pre-tax basis, after-tax basis ("Roth") or a combination of both. Employees age 50 and over are allowed a catch-up contribution on a pre-tax basis, Roth or a combination of both, beginning in the year they turn age 50. Eligible employees who neither make an affirmative salary deferral election nor affirmatively opt out of the Plan are automatically enrolled in the Plan with a deferral contribution equal to 3% of eligible compensation. This deferral percentage is automatically increased by 1% annually, up to 10%, unless the participant elects otherwise. Employees have the option to opt out of deferring or to change their deferral percentage at any time in accordance with the Plan.

Company Contributions — The Company matches employee contributions dollar for dollar on the first 1% of eligible compensation, and 50 cents per dollar on the next 6% of eligible compensation, up to a total of 4% of eligible compensation.

Participant Rollover Contributions — Participants eligible for a withdrawal from another eligible retirement plan or traditional IRA may roll over all or part of that amount into the Plan. Participants may not roll over amounts from a Roth IRA into the Plan.

Investments

Participants can direct the investment of their accounts (including employee and Company contributions) among various funds, debt securities and Company common stock. The funds as of December 31, 2021 and 2020 include a variety of mutual funds, CCT funds, separately managed funds and custom target retirement date funds. The available funds are regularly reviewed by the Plan Administrator and are subject to change at any time.

Participation in Investment Activity

Individual accounts are credited daily with a pro-rata share of investment income or loss experienced by the respective funds into which their account balances have been directed. This income or loss is included in net appreciation or depreciation in fair value of investments on the Statement of Changes in Net Assets Available for Benefits.

NORDSTROM 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
(Dollar and share amounts in thousands)

Vesting in the Plan
Employees who terminate employment due to retirement, disability or death are 100% vested in their Plan accounts, regardless of years of service. The Plan defines "retirement" as age 60 or older for the purposes of vesting. On termination of employment for reasons other than retirement, disability or death, the amounts credited to the accounts of participants are vested as follows:

Employee Contributions — Employee contributions (salary deferral, catch-up and rollover contributions) are always 100% vested.

Company Matching Contributions — Company matching contributions made on or after January 1, 2021 are 100% vested after completion of two years of service. A year of service is any year in which an employee works at least 1,000 hours. Company matching contributions made prior to January 1, 2021 vest as follows:

Years of Service	Vesting Percentage
Less than one	0%
One	33%
Two	67%
Three or more	100%

Forfeitures
Forfeitures of unvested Company matching contributions from terminated participant accounts can be used to offset Company matching contributions or to pay Plan administrative expenses, as determined by the Plan Administrator. At December 31, 2021 and 2020, forfeited unvested accounts were $1,152 and $1,286. In 2021, the Plan used forfeitures of $3,700 to offset Company matching contributions.

Benefit Payments
On termination of service, a participant (or participant's beneficiary in the case of death) may elect to roll over the value of the vested interest in his or her account to another qualified plan, to receive the value as a lump-sum distribution or elect to remain in the Plan, if the vested account balance exceeds $1 (subject to required distributions under Section 401(a)(9) of the IRC). When an active participant reaches age 59½ and continues to work for the Company, the participant is eligible to receive a partial or full distribution of their account. The Plan also allows distributions to active participants for financial hardship, if certain criteria are met.

Participant Loans (Notes Receivable from Participants)
Participants may borrow a minimum of $1 from their account up to a maximum that is equal to the lesser of:

- 50% of their vested account balance, less the balance of any other outstanding loans from the Plan as of the loan request date, or
- $50 less the highest outstanding principal balance of any loans, from this Plan or any other qualified Plan of the employer or a related employer, during the one-year period immediately preceding the loan request date

Loan terms are a maximum of five years or, if for the purchase of a principal residence, up to 20 years. The loans are secured by the balance in the participant's account. The interest rate for a loan is determined at the time it is approved. The rate will be the prime rate as reported by the Wall Street Journal on the 15th day of the prior month, plus 1%. Interest rates for participant loans outstanding at December 31, 2021 range from 4.25% to 9.25% with various maturities through December 2041. Principal and interest is paid through payroll deductions, following the participant's bi-weekly payroll cycle. A participant may have a maximum of two loans outstanding at any one time.

Participants may make monthly loan repayments during approved leaves of absence. Alternatively, payment obligations may be suspended during approved leaves of absence not longer than one year and during periods of qualified military service. Participants may continue to make loan repayments after termination of employment under procedures established by the Plan Administrator. Loan balances that become delinquent will be deemed distributed and become taxable income to the participant.

NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting
The accompanying financial statements have been prepared in accordance with GAAP.

Use of Estimates
The preparation of financial statements in conformity with GAAP requires Company management to make estimates, judgments and assumptions that affect the reported amounts of assets, liabilities, and changes therein and disclosure of contingent assets and liabilities during the reporting period. Uncertainties regarding such estimates and assumptions are inherent in the preparation of financial statements and actual results may differ from these estimates and assumptions.

NORDSTROM 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
(Dollar and share amounts in thousands)

Risks and Uncertainties
The Plan holds various investment instruments, including, but not limited to, common stock, debt securities, mutual funds and CCTs. Investment securities, in general, are exposed to various risks, such as interest rate risk, credit risk and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and such changes could materially affect participants' account balances and the amounts reported in the financial statements.

Investment Valuation and Income Recognition
The Plan's investments are held by the trustee and are recorded at fair value as follows:

- Common stock is valued at quoted market prices as of the last trading day of the Plan year.
- Shares of mutual funds are valued at quoted market prices as of the last trading day of the Plan year.
- CCTs are measured using the NAV practical expedient of the CCT as reported by the CCT managers. The NAV practical expedient is based on the fair value of the underlying assets owned by the CCT, less its liabilities, and divided by the number of units outstanding.
- Investments in debt securities are valued using the market approach and observable inputs, such as observable trade prices, multiple broker/dealer quotes, related yield curves and other assumptions about the securities.
- Self-directed brokerage accounts allow participants to invest all or a portion of their account in investments of their choice. The fair value is based on the underlying investments, which may include common stock, mutual funds and debt securities.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on an accrual basis. Dividends are recorded when earned.

Net realized gains or losses on investment sales represent the difference between the sale proceeds and cost of the investments, or the adjusted market price. Net unrealized appreciation or depreciation on investments held at the end of the Plan year represents the net change in the fair value of investments during the year. The Statement of Changes in Net Assets Available for Benefits presents the net appreciation or depreciation in fair value of investments, which consists of realized and unrealized gains and losses.

Notes Receivable from Participants
Participant loans are included in notes receivable from participants on the Statements of Net Assets Available for Benefits and are measured at their unpaid principal balance plus any accrued unpaid interest. Delinquent participant loans are recorded as distributions based on the terms of the Plan document.

Benefit Payments
Benefits are recorded when paid. Amounts allocated to former participants who have withdrawn from the Plan, but have not yet been paid as of December 31, 2021 and 2020, were $7,736 and $907.

Administrative Expenses
Substantially all of the administrative expenses, including recordkeeping, trustee and other fees, incurred in connection with the Plan are paid by the Plan through an allocation to participant accounts.

NOTE 3: FAIR VALUE MEASUREMENTS
The Plan discloses its assets that are measured at fair value in the Statements of Net Assets Available for Benefits by level within the fair value hierarchy as defined by applicable accounting standards:

Level 1: Quoted market prices in active markets for identical assets or liabilities
Level 2: Other observable market-based inputs or unobservable inputs that are corroborated by market data
Level 3: Unobservable inputs that cannot be corroborated by market data that reflect the reporting entity's own assumptions

NORDSTROM 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
(Dollar and share amounts in thousands)

The following tables set forth, by level within the fair value hierarchy, a summary of the Plan's investments that were measured at fair value on a recurring basis as of December 31, 2021 and 2020. There have been no changes in the methodologies used at December 31, 2021 and 2020.

	December 31, 2021		
	Level 1	**Level 2**	**Total**
Fair value hierarchy:			
Common stock	**$949,284**	**$—**	**$949,284**
Debt securities	**44,372**	**162,161**	**206,533**
Mutual funds	**985,224**	**—**	**985,224**
Brokerage securities	**47,538**	**4,856**	**52,394**
Other[1]	**270**	**—**	**270**
Total assets in fair value hierarchy	**$2,026,688**	**$167,017**	**$2,193,705**
Investments measured at NAV practical expedient			**1,742,299**
Total participant-directed investments at fair value			**$3,936,004**

[1] Other primarily includes interest-bearing cash securities.

	December 31, 2020		
	Level 1	**Level 2**	**Total**
Fair value hierarchy:			
Common stock	$1,060,718	$—	$1,060,718
Debt securities	18,841	179,762	198,603
Mutual funds	831,404	—	831,404
Brokerage securities	37,325	4,911	42,236
Other[1]	(5,328)	—	(5,328)
Total assets in fair value hierarchy	$1,942,960	$184,673	$2,127,633
Investments measured at NAV practical expedient			1,641,868
Total participant-directed investments at fair value			$3,769,501

[1] Other primarily includes pending receivable transactions for dividends and interest.

The Plan's NAV practical expedient funds are primarily composed of CCT's, which are measured daily and may be redeemed daily with no restrictions related to the redemption notice period.

The Plan did not have any Level 3 measurements as of December 31, 2021 and 2020. During 2021, there were no transfers in or out of Levels 1, 2 or 3.

NOTE 4: PARTY-IN-INTEREST TRANSACTIONS

Parties-in-interest include fiduciaries or employees of the Plan, any person who provides services to the Plan, an employer whose employees are covered by the Plan, an employee organization whose members are covered by the Plan, a person who owns 50% or more of such an employer or employee organization or relatives of such persons. As of December 31, 2021 and 2020, Plan investments included units held in a collective trust managed by BNYM, BNYM common stock and interest-bearing cash managed by BNYM. As of December 31, 2021 and 2020, the Plan held 3,169 and 3,637 shares of Nordstrom, Inc. common stock, with a cost basis of $117,402 and $137,781. The Plan recorded no dividend income from Nordstrom, Inc. common stock during 2021, as the Company temporarily suspended quarterly dividend payments beginning in the second fiscal quarter of 2020. The Company resumed payment of dividends in the first fiscal quarter of 2022. In addition, the Plan holds notes receivable from participants and paid certain expenses related to plan operations and investment activities to various service providers. Transactions with these entities qualify as exempt party-in-interest transactions.

NORDSTROM 401(k) PLAN
NOTES TO FINANCIAL STATEMENTS
(Dollar and share amounts in thousands)

NOTE 5: FEDERAL INCOME TAX STATUS

The Plan as restated as of January 1, 2021 is an individually designed plan. While the restated Plan document does not have a determination letter from the IRS, the Company and Plan management believe that the Plan is currently designed and operated in compliance with the applicable requirements of the IRC, and the Plan and related trust continue to be tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan Administrator has concluded that as of December 31, 2021 and 2020, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements.

NOTE 6: PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. Under the Plan, the Company may also temporarily suspend contributions, which does not constitute or require termination of the Plan.

In the event the Plan is terminated, the respective accounts of the participants under the Plan shall become fully vested and nonforfeitable. After payment of expenses properly chargeable against the Plan, the trustee shall distribute all Plan assets to the participants in the proportions determined by their respective accounts.

NOTE 7: EXCESS CONTRIBUTIONS PAYABLE TO PARTICIPANTS

The Plan is subject to certain non-discrimination rules under ERISA and the IRC. For 2021, the Plan passed all applicable non-discrimination tests. For 2020, the Plan failed certain non-discrimination tests under the IRC due to lower deferral percentages by non-highly compensated eligible employees relative to the deferral percentages of highly compensated eligible employees. In order to meet the requirements of the non-discrimination rules, the Plan refunded a portion of the contributions made by highly compensated participants, in accordance with applicable provisions of the IRC. Additionally, the Plan is required to return contributions received from participants during the Plan year in excess of the IRC limits. Refunds are accrued within excess contributions payable to participants in the Statements of Net Assets Available for Benefits and reduce participant contributions on the Statement of Changes in Net Assets Available for Benefits. There was no refund for 2021. The net refund for 2020, paid in 2021, totaled $1,098 and included approximately $163 of investment earnings.

NORDSTROM 401(k) PLAN
SCHEDULE H, LINE 4(a) — SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
FOR THE YEAR ENDED December 31, 2021
EIN: 91-0515058
Plan #: 001

(Dollars in ones)

	Total That Constitutes Nonexempt Prohibited Transactions			
Participant Contributions Transferred Late to the Plan **Check here if late participant loan contributions are included:**	**Contributions Not Corrected***	**Contributions Corrected Outside of VFCP**	**Contributions Pending Correction in VFCP**	**Total Fully Corrected Under VFCP and PTE 2002-51**
2021	$327	$2,857	—	—

* The late contributions were deposited in March 2022.

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2021

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A This return/report is for:
- ☐ a multiemployer plan
- ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- ☒ a single-employer plan
- ☐ a DFE (specify) ___

B This return/report is:
- ☐ the first return/report
- ☐ the final return/report
- ☐ an amended return/report
- ☐ a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. ▶ ☐

D Check box if filing under:
- ☒ Form 5558
- ☐ automatic extension
- ☐ the DFVC program
- ☐ special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II Basic Plan Information—enter all requested information

1a Name of plan
NORDSTROM 401K PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1953

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)

NORDSTROM, INC.

EMPLOYEE BENEFITS
1600 7TH AVE. SUITE 2500

SEATTLE WA 98101

2b Employer Identification Number (EIN)
91-0515058

2c Plan Sponsor's telephone number
855-667-3947

2d Business code (see instructions)
452200

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Ashley Moore Signature of plan administrator	6/14/2022 Date	ASHLEY MOORE Enter name of individual signing as plan administrator
SIGN HERE	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor

NORDSTROM 401K PLAN RETIREMENT COMMITTEE

1600 7TH AVE. SUITE 2500

SEATTLE WA 98101

3b Administrator's EIN 91-0979776

3c Administrator's telephone number 855-667-3947

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name

c Plan Name

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	98,828
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1)**, **6a(2)**, **6b**, **6c**, and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	60,608
a(2) Total number of active participants at the end of the plan year	**6a(2)**	69,744
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	46,699
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	116,443
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	247
f Total. Add lines **6d** and **6e**.	**6f**	116,690
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	105,901
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	17,910
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

2F 2G 2J 2K 2R 2S 2T 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)

- (1) ☐ Insurance
- (2) ☐ Code section 412(e)(3) insurance contracts
- (3) ☒ Trust
- (4) ☐ General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- (1) ☐ Insurance
- (2) ☐ Code section 412(e)(3) insurance contracts
- (3) ☒ Trust
- (4) ☐ General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ ___ **A** (Insurance Information)
- (4) ☒ **C** (Service Provider Information)
- (5) ☒ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

NORDSTROM 401(k) PLAN
SCHEDULE H, LINE 4(i) — SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF December 31, 2021
EIN: 91-0515058
Plan #: 001

(Dollars in thousands)

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value ($)
	Capital Group EuroPacific Fund	CCT	**	$594,317
*	EB Temporary Investment Fund	CCT - due 12/31/2049 - 1.147%	**	45,445
	Loomis Core Plus Fixed Income Fund	CCT	**	462,455
	Putnam Stable Value Fund	CCT	**	308,862
	Schroder Collective International Multi-Cap Equity Trust	CCT	**	256,605
	SSGA TIPS Index	CCT	**	74,615
	10x Genomics, Inc.	Common stock	**	3,024
	Abiomed, Inc.	Common stock	**	5,214
	Acadia Healthcare Co., Inc.	Common stock	**	3,992
	Adobe Inc.	Common stock	**	8,284
	Advanced Micro Devices, Inc.	Common stock	**	6,219
	Aegon N.V.	Common stock	**	1,517
	Alarm.com Holdings, Inc.	Common stock	**	3,880
	Alnylam Pharmaceuticals, Inc.	Common stock	**	1,950
	Alphabet Inc. Class A	Common stock	**	14,682
	Alphabet Inc. Class C	Common stock	**	12,442
	Amazon.com, Inc.	Common stock	**	16,962
	Amedisys, Inc.	Common stock	**	2,403
	American Express Co.	Common stock	**	3,436
	AMETEK, Inc.	Common stock	**	2,302
	Anheuser-Busch InBev SA/NV	Common stock	**	2,531
	Apple Inc.	Common stock	**	20,002
	Ares Management Corp.	Common stock	**	4,299
	Avalara, Inc.	Common stock	**	3,761
	Axon Enterprise, Inc.	Common stock	**	5,068
	Azenta, Inc.	Common stock	**	6,054
	Baker Hughes Co.	Common stock	**	2,803
	Bank of America Corp.	Common stock	**	7,141
	Bill.com Holdings, Inc.	Common stock	**	1,839
	BioMarin Pharmaceutical, Inc.	Common stock	**	2,916
	Bio-Techne Corp.	Common stock	**	5,776
	Blueprint Medicines Corp.	Common stock	**	3,199
	Booking Holdings Inc.	Common stock	**	3,359
	Bright Horizons Family Solutions Inc.	Common stock	**	4,271
	Brighthouse Financial, Inc.	Common stock	**	1,476
	Bristol-Myers Squibb Co.	Common stock	**	4,053
	Builders FirstSource, Inc.	Common stock	**	9,860
	Burlington Stores, Inc.	Common stock	**	5,108
	BWX Technologies, Inc.	Common stock	**	5,202
	Cable One, Inc.	Common stock	**	3,425
	Cameco Corp.	Common stock	**	4,454
	Capital One Financial Corp.	Common stock	**	11,332
	Carrier Global Corp.	Common stock	**	2,446
	CDW Corp.	Common stock	**	2,526

*Party-in-interest

**Cost information is not required for participant-directed investments and therefore is not included.

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value ($)
	Celanese Corp.	Common stock	**	2,353
	Celsius Holdings, Inc.	Common stock	**	2,201
	Certara, Inc.	Common stock	**	2,191
	Charles River Laboratories International, Inc.	Common stock	**	6,179
	Chart Industries, Inc.	Common stock	**	1,905
	Charter Communications, Inc.	Common stock	**	7,367
	Chemed Corp.	Common stock	**	4,110
	Chipotle Mexican Grill, Inc.	Common stock	**	3,030
	Cigna Corp.	Common stock	**	9,530
	Cisco Systems, Inc.	Common stock	**	7,066
	Cognizant Technology Solutions	Common stock	**	6,210
	Comcast Corp.	Common stock	**	9,125
	ConocoPhillips	Common stock	**	3,883
	Constellation Brands, Inc.	Common stock	**	5,465
	CoStar Group, Inc.	Common stock	**	2,890
	Crown Holdings, Inc.	Common stock	**	9,382
	CVS Health Corp.	Common stock	**	3,507
	Danaher Corp.	Common stock	**	4,383
	Darden Restaurants, Inc.	Common stock	**	3,326
	Datadog, Inc.	Common stock	**	1,804
	Dell Technologies, Inc.	Common stock	**	4,977
	Denbury, Inc.	Common stock	**	4,074
	DexCom, Inc.	Common stock	**	4,373
	Diamondback Energy, Inc.	Common stock	**	1,580
	Dish Network Corp.	Common stock	**	2,838
	Dynatrace, Inc.	Common stock	**	6,043
	Eaton Corp. PLC	Common stock	**	3,928
	Elanco Animal Health, Inc.	Common stock	**	1,618
	Eli Lilly & Company	Common stock	**	7,454
	Entegris, Inc.	Common stock	**	6,128
	Euronet Worldwide, Inc.	Common stock	**	5,328
	Expedia Group, Inc.	Common stock	**	2,929
	FedEx Corp.	Common stock	**	9,699
	FirstService Corp.	Common stock	**	3,278
	Fiserv, Inc.	Common stock	**	8,563
	Fox Corp.	Common stock	**	5,098
	Fox Factory Holding Corp.	Common stock	**	4,853
	Gartner, Inc.	Common stock	**	2,681
	Gilead Sciences, Inc.	Common stock	**	6,825
	GlaxoSmithKline PLC	Common stock	**	10,055
	Guidewire Software, Inc.	Common stock	**	3,618
	Halliburton Co.	Common stock	**	526
	Halozyme Therapeutics, Inc.	Common stock	**	3,496
	HealthEquity, Inc.	Common stock	**	2,753
	HEICO Corp.	Common stock	**	2,287
	Helen of Troy Ltd.	Common stock	**	2,174
	Hess Corp.	Common stock	**	2,132
	Hewlett Packard Enterprise Co.	Common stock	**	4,176
	Honda Motor Co. Ltd.	Common stock	**	3,092
	Horizon Therapeutics PLC	Common stock	**	7,569
	HP, Inc.	Common stock	**	9,380

*Party-in-interest

**Cost information is not required for participant-directed investments and therefore is not included.

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value ($)
	II-VI, Inc.	Common stock	**	553
	Incyte Corp.	Common stock	**	2,569
	Insmed, Inc.	Common stock	**	2,185
	Inspire Medical Systems, Inc.	Common stock	**	3,415
	Intuit, Inc.	Common stock	**	7,856
	Johnson Controls International PLC	Common stock	**	9,513
	Juniper Networks, Inc.	Common stock	**	3,785
	Kornit Digital Ltd.	Common stock	**	2,135
	Leslie's, Inc.	Common stock	**	4,742
	Ligand Pharmaceuticals, Inc.	Common stock	**	3,229
	Lincoln Electric Holdings, Inc.	Common stock	**	2,420
	Lincoln National Corp.	Common stock	**	727
	Live Nation Entertainment, Inc.	Common stock	**	3,095
	LKQ Corp.	Common stock	**	2,546
	LPL Financial Holdings, Inc.	Common stock	**	682
	LyondellBasell Industries N.V.	Common stock	**	498
	Martin Marietta Materials, Inc.	Common stock	**	5,475
	Marvell Technology, Inc.	Common stock	**	5,928
	Medtronic PLC	Common stock	**	1,138
	Mercury Systems, Inc.	Common stock	**	3,106
	Merit Medical Systems, Inc.	Common stock	**	2,818
	Meta Platforms, Inc.	Common stock	**	5,348
	MetLife, Inc.	Common stock	**	9,092
	Micro Focus International PLC	Common stock	**	558
	Microchip Technology, Inc.	Common stock	**	6,051
	Microsoft Corp.	Common stock	**	31,841
	MKS Instruments, Inc.	Common stock	**	2,090
	Molson Coors Beverage Co.	Common stock	**	3,476
	Motorola Solutions, Inc.	Common stock	**	2,132
	MSCI Inc.	Common stock	**	4,489
	National Instruments Corp.	Common stock	**	3,599
	National Vision Holdings, Inc.	Common stock	**	3,585
	Netflix, Inc.	Common stock	**	4,442
	New Fortress Energy, Inc.	Common stock	**	1,713
	News Corp.	Common stock	**	620
	Nice Ltd.	Common stock	**	5,795
	Nike, Inc.	Common stock	**	4,625
*	Nordstrom, Inc.	Common stock	**	71,681
	Novanta, Inc.	Common stock	**	3,135
	Novartis AG	Common stock	**	6,210
	Nvidia Corp.	Common stock	**	8,728
	Occidental Petroleum Corp.	Common stock	**	8,041
	O'Reilly Automotive, Inc.	Common stock	**	4,271
	Otis Worldwide Corp.	Common stock	**	1,262
	Overstock.com, Inc.	Common stock	**	2,608
	Pacific Biosciences of California, Inc.	Common stock	**	1,874
	Palo Alto Networks, Inc.	Common stock	**	3,106
	Paycom Software, Inc.	Common stock	**	3,367
	Pegasystems, Inc.	Common stock	**	2,432
	Penumbra, Inc.	Common stock	**	5,773
	Performance Food Group Co.	Common stock	**	3,993

*Party-in-interest

**Cost information is not required for participant-directed investments and therefore is not included.

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value ($)
	Philip Morris International Inc.	Common stock	**	4,006
	Pure Storage, Inc.	Common stock	**	7,295
	Qualcomm, Inc.	Common stock	**	4,627
	Quanta Services, Inc.	Common stock	**	2,960
	Qurate Retail, Inc.	Common stock	**	1,028
	Raytheon Technologies Corp.	Common stock	**	7,918
	Regeneron Pharmaceuticals, Inc.	Common stock	**	316
	Revolve Group, Inc.	Common stock	**	3,511
	Ritchie Bros Auctioneers, Inc.	Common stock	**	3,339
	Roblox Corp.	Common stock	**	1,403
	Roche Holding AG	Common stock	**	4,549
	Ross Stores, Inc.	Common stock	**	3,682
	Royal Caribbean Cruises Ltd.	Common stock	**	2,181
	Sanofi	Common stock	**	11,974
	SBA Communications Corp.	Common stock	**	3,681
	Schlumberger Ltd.	Common stock	**	3,399
	ServiceNow, Inc.	Common stock	**	4,713
	Snap, Inc.	Common stock	**	1,161
	SolarEdge Technologies, Inc.	Common stock	**	4,456
	State Street Corp.	Common stock	**	5,236
	Stem, Inc.	Common stock	**	1,514
	Take-Two Interactive Software, Inc.	Common stock	**	2,616
	TE Connectivity Ltd.	Common stock	**	4,840
	Teleflex, Inc.	Common stock	**	461
*	The Bank of New York Mellon Corp.	Common stock	**	7,957
	The Beauty Health Co.	Common stock	**	2,085
	The Brink's Co.	Common stock	**	4,983
	The Charles Schwab Corp.	Common stock	**	14,802
	The Gap, Inc.	Common stock	**	1,077
	The Goldman Sachs Group, Inc.	Common stock	**	6,771
	The Williams Cos., Inc.	Common stock	**	4,685
	Tesla, Inc.	Common stock	**	3,431
	T-Mobile US, Inc.	Common stock	**	4,465
	TransDigm Group, Inc.	Common stock	**	2,541
	Trex Co., Inc.	Common stock	**	7,643
	Truist Financial Corp.	Common stock	**	2,342
	Twist Bioscience Corp.	Common stock	**	2,139
	UnitedHealth Group, Inc.	Common stock	**	4,519
	Varonis Systems, Inc.	Common stock	**	2,956
	Veracyte, Inc.	Common stock	**	2,801
	VIRTU Financial, Inc.	Common stock	**	4,895
	VMware, Inc.	Common stock	**	6,754
	Waste Connections, Inc.	Common stock	**	1,819
	Wells Fargo & Co.	Common stock	**	14,922
	Western Alliance Bancorp	Common stock	**	4,302
	Wolfspeed, Inc.	Common stock	**	2,243
	Workiva, Inc.	Common stock	**	3,345
	Wyndham Hotels & Resorts, Inc.	Common stock	**	6,368
	Zebra Technologies Corp.	Common stock	**	2,377
	Zynga, Inc.	Common stock	**	3,204
	Abbvie, Inc.	Corporate Debt - due 11/21/2039 - 4.050%	**	484

*Party-in-interest

**Cost information is not required for participant-directed investments and therefore is not included.

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value ($)
	Anheuser-Busch Cos. LLC	Corporate Debt - due 02/01/2046 - 4.900%	**	222
	Anheuser-Busch InBev Worldwide	Corporate Debt - due 06/01/2060 - 4.600%	**	249
	AT&T Inc.	Corporate Debt - due 03/09/2048 - 4.500%	**	325
	AT&T Inc.	Corporate Debt - due 11/15/2031 - Variable	**	136
	AT&T Inc.	Corporate Debt - due 09/15/2053 - 3.500%	**	522
	AT&T Inc.	Corporate Debt - due 09/15/2055 - 3.550%	**	208
	AT&T Inc.	Corporate Debt - due 09/15/2059 - 3.650%	**	1,458
	Bank of America Corp.	Corporate Debt - due 08/26/2024 - 4.200%	**	482
	Bank of America Corp.	Corporate Debt - due 03/03/2026 - 4.450%	**	165
	Bank of America Corp.	Corporate Debt - due 11/25/2027 - 4.183%	**	246
	Bank of America Corp.	Corporate Debt - due 12/20/2023 - Variable	**	990
	Bank of America Corp.	Corporate Debt - due 03/20/2051 - Variable	**	211
	Barclays PLC	Corporate Debt - due 09/11/2024 - 4.375%	**	321
	Barclays PLC	Corporate Debt - due 05/09/2028 - 4.836%	**	634
	B.A.T. Capital Corp.	Corporate Debt - due 08/15/2047 - 4.540%	**	210
	B.A.T. Capital Corp.	Corporate Debt - due 03/25/2028 - 2.259%	**	146
	B.A.T. Capital Corp.	Corporate Debt - due 03/25/2031 - 2.726%	**	364
	B.A.T. Capital Corp.	Corporate Debt - due 09/25/2040 - 3.734%	**	48
	B.A.T. Capital Corp.	Corporate Debt - due 09/25/2050 - 3.984%	**	72
	Bayer US Finance II LLC 144A	Corporate Debt - due 12/15/2028 - 4.375%	**	978
	BNP Paribas S.A.	Corporate Debt - due 10/15/2024 - 4.250%	**	890
	BNP Paribas S.A. 144A	Corporate Debt - due 09/28/2025 - 4.375%	**	786
	BNP Paribas S.A. 144A	Corporate Debt - due 03/13/2027 - 4.625%	**	1,026
	BNSF Railway Co 2007-1 Pass Through Trust	Corporate Debt - due 04/01/2024 - 5.996%	**	79
	Boston Properties LP	Corporate Debt - due 02/01/2026 - 3.650%	**	241
	Boston Properties LP	Corporate Debt - due 01/15/2025 - 3.200%	**	183
	Boston Properties LP	Corporate Debt - due 03/15/2030 - 2.900%	**	306
	Boston Properties LP	Corporate Debt - due 01/30/2031 - 3.250%	**	314
	Capital One Financial Corp.	Corporate Debt - due 02/05/2025 - 3.200%	**	445
	Capital One Financial Corp.	Corporate Debt - due 10/29/2025 - 4.200%	**	517
	CCO Holdings LLC / CCO Holdings Capital Corp. 144A	Corporate Debt - due 06/01/2033 - 4.500%	**	510
	CCO Holdings LLC / CCO Holdings Capital Corp. 144A	Corporate Debt - due 01/15/2034 - 4.250%	**	418
	CEMEX S.A.B. de C.V. 144A	Corporate Debt - due 11/19/2029 - 5.450%	**	214
	CEMEX S.A.B. de C.V. 144A	Corporate Debt - due 09/17/2030 - 5.200%	**	1,289
	Charter Communications Operating LLC	Corporate Debt - due 10/23/2045 - 6.484%	**	2,054
	Charter Communications Operating LLC	Corporate Debt - due 05/01/2047 - 5.375%	**	389
	Charter Communications Operating LLC	Corporate Debt - due 04/01/2048 - 5.750%	**	782
	Cigna Corp.	Corporate Debt - due 07/15/2023 - 3.750%	**	102
	Cigna Corp.	Corporate Debt - due 05/15/2027 - 7.875%	**	246
	Citigroup, Inc.	Corporate Debt - due 06/15/2032 - 6.625%	**	332
	Citigroup, Inc.	Corporate Debt - due 05/15/2023 - 3.500%	**	103
	Citigroup, Inc.	Corporate Debt - due 08/05/2024 - 4.000%	**	773
	Cox Communications, Inc. 144A	Corporate Debt - due 02/01/2025 - 3.850%	**	436
	Cox Communications, Inc. 144A	Corporate Debt - due 08/15/2027 - 3.500%	**	322
	CSX Transportation, Inc.	Corporate Debt - due 01/15/2023 - 6.251%	**	134
	CVS Health Corp.	Corporate Debt - due 03/25/2038 - 4.780%	**	764
	CVS Health Corp.	Corporate Debt - due 04/01/2040 - 4.125%	**	201
	Dillard's, Inc.	Corporate Debt - due 05/15/2027 - 7.750%	**	504
	Dominion Energy, Inc.	Corporate Debt - due 10/01/2054 - Variable	**	747
	Dominion Energy, Inc.	Corporate Debt - due 04/15/2026 - 1.450%	**	198
	Elanco Animal Health, Inc.	Corporate Debt - due 08/28/2023 - Variable	**	106

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	Elanco Animal Health, Inc.	Corporate Debt - due 08/28/2028 - Variable	**	435
	Enel Finance International N.V. 144A	Corporate Debt - due 09/15/2037 - 6.800%	**	357
	Enel Finance International N.V. 144A	Corporate Debt - due 10/07/2039 - 6.000%	**	666
	Exxon Mobil Corp.	Corporate Debt - due 03/19/2040 - 4.227%	**	207
	Exxon Mobil Corp.	Corporate Debt - due 10/15/2030 - 2.610%	**	285
	Federal Express Corp. 1998 Pass	Corporate Debt - due 07/15/2023 - 6.720%	**	5
	FedEx Corp.	Corporate Debt - due 05/15/2030 - 4.250%	**	199
	FedEx Corp.	Corporate Debt - due 05/15/2050 - 5.250%	**	235
	Ford Motor Credit Co. LLC	Corporate Debt - due 06/16/2025 - 5.125%	**	489
	Ford Motor Credit Co. LLC	Corporate Debt - due 11/13/2025 - 3.375%	**	208
	Ford Motor Credit Co. LLC	Corporate Debt - due 08/10/2026 - 2.700%	**	731
	Ford Motor Credit Co. LLC	Corporate Debt - due 08/06/2023 - 4.375%	**	676
	Ford Motor Credit Co. LLC	Corporate Debt - due 01/09/2024 - 3.810%	**	233
	Ford Motor Credit Co. LLC	Corporate Debt - due 01/07/2022 - 5.596%	**	325
	Ford Motor Credit Co. LLC	Corporate Debt - due 11/01/2024 - 4.063%	**	526
	HCA, Inc.	Corporate Debt - due 06/15/2039 - 5.125%	**	309
	HSBC Holding plc	Corporate Debt - due 05/02/2036 - 6.500%	**	1,190
	HSBC Holding plc	Corporate Debt - due 09/15/2037 - 6.500%	**	624
	HSBC Holding plc	Corporate Debt - due 03/08/2026 - 4.300%	**	219
	HSBC Holding plc	Corporate Debt - due 03/31/2030 - 4.950%	**	793
	HSBC Holding plc	Corporate Debt - due 08/18/2031 - Variable	**	489
	HSBC Holding plc	Corporate Debt - due 05/24/2025 - Variable	**	519
	Imperial Brands Finance PLC 144A	Corporate Debt - due 07/26/2029 - 3.875%	**	822
	Imperial Brands Finance PLC 144A	Corporate Debt - due 07/21/2025 - 4.250%	**	1,799
	JPMorgan Chase & Co.	Corporate Debt - due 12/15/2026 - 4.125%	**	497
	JPMorgan Chase & Co.	Corporate Debt - due 10/01/2027 - 4.250%	**	196
	JPMorgan Chase & Co.	Corporate Debt - due 07/23/2024 - Variable	**	860
	JPMorgan Chase & Co.	Corporate Debt - due 04/22/2031 - Variable	**	329
	JPMorgan Chase & Co.	Corporate Debt - due 05/13/2031 - Variable	**	415
	Kinder Morgan Energy Partners	Corporate Debt - due 09/01/2039 - 6.500%	**	334
	Kinder Morgan Energy Partners	Corporate Debt - due 08/15/2042 - 5.000%	**	901
	Kinder Morgan Energy Partners	Corporate Debt - due 09/01/2044 - 5.400%	**	823
	Lloyds Banking Group plc	Corporate Debt - due 11/04/2024 - 4.500%	**	620
	Lloyds Banking Group plc	Corporate Debt - due 03/24/2026 - 4.650%	**	578
	Microchip Technology, Inc. 144A	Corporate Debt - due 09/01/2024 - 0.983%	**	491
	NatWest Group PLC	Corporate Debt - due 06/14/2027 - Variable	**	715
	NatWest Group PLC	Corporate Debt - due 12/19/2023 - 6.000%	**	598
	NatWest Group PLC	Corporate Debt - due 12/15/2022 - 6.125%	**	1,203
*	Nordstrom, Inc.	Corporate Debt - due 03/15/2028 - 6.950%	**	301
	Occidental Petroleum Corp.	Corporate Debt - due 08/15/2026 - 3.200%	**	103
	Occidental Petroleum Corp.	Corporate Debt - due 08/15/2024 - 2.900%	**	1,097
	Oracle Corp.	Corporate Debt - due 04/01/2030 - 2.950%	**	177
	Oracle Corp.	Corporate Debt - due 04/01/2040 - 3.600%	**	227
	Petrobras Global Finance B.V.	Corporate Debt - due 03/17/2044 - 7.250%	**	222
	Petrobras Global Finance B.V.	Corporate Debt - due 03/19/2049 - 6.900%	**	559
	Petrobras Global Finance B.V.	Corporate Debt - due 01/15/2030 - 5.093%	**	573
	Petroleos Mexicanos	Corporate Debt - due 06/15/2035 - 6.625%	**	673
	Petroleos Mexicanos	Corporate Debt - due 01/23/2045 - 6.375%	**	434
	Petroleos Mexicanos	Corporate Debt - due 01/23/2050 - 7.690%	**	1,689
	Petroleos Mexicanos 144A	Corporate Debt - due 02/16/2032 - 6.700%	**	941
	Prosus N.V. 144A	Corporate Debt - due 07/06/2027 - 4.850%	**	725

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	Prosus N.V. 144A	Corporate Debt - due 01/21/2030 - 3.680%	**	721
	Prosus N.V. 144A	Corporate Debt - due 07/13/2031 - 3.061%	**	1,195
	RELX Capital, Inc.	Corporate Debt - due 03/18/2029 - 4.000%	**	278
	Rio Oil Finance Trust Series 144A	Corporate Debt - due 07/06/2024 - 9.250%	**	801
	Rio Oil Finance Trust Series 144A	Corporate Debt - due 01/06/2027 - 9.750%	**	657
	Rio Oil Finance Trust Series 144A	Corporate Debt - due 04/06/2028 - 8.200%	**	840
	SLM Student Loan Trust 20 3 A6	Corporate Debt - due 04/25/2040 - Variable	**	3,603
	SLM Student Loan Trust 20 8 A6	Corporate Debt - due 01/25/2041 - Variable	**	4,433
	Telecom Italia Capital S.A.	Corporate Debt - due 07/18/2036 - 7.200%	**	143
	Telecom Italia Capital S.A.	Corporate Debt - due 06/04/2038 - 7.721%	**	646
	Telecom Italia Spa/Milano 144A	Corporate Debt - due 05/30/2024 - 5.303%	**	1,079
	Time Warner Cable LLC	Corporate Debt - due 07/01/2038 - 7.300%	**	461
	The Coca-Cola Co.	Corporate Debt - due 03/25/2030 - 3.450%	**	194
	The Coca-Cola Co.	Corporate Debt - due 06/01/2030 - 1.650%	**	338
	The Dow Chemical Co.	Corporate Debt - due 05/15/2039 - 9.400%	**	365
	The Dow Chemical Co.	Corporate Debt - due 11/30/2048 - 5.550%	**	211
	The Southern Co.	Corporate Debt - due 01/15/2051 - Variable	**	767
	The Southern Co.	Corporate Debt - due 09/15/2051 - Variable	**	575
	The Walt Disney Co.	Corporate Debt - due 11/15/2037 - 6.650%	**	668
	T-Mobile USA, Inc.	Corporate Debt - due 04/15/2040 - 4.375%	**	172
	T-Mobile USA, Inc.	Corporate Debt - due 04/15/2050 - 4.500%	**	117
	T-Mobile USA, Inc.	Corporate Debt - due 04/15/2030 - 3.875%	**	465
	T-Mobile USA, Inc. 144A	Corporate Debt - due 02/15/2026 - 2.250%	**	326
	T-Mobile USA, Inc. 144A	Corporate Debt - due 04/15/2029 - 3.375%	**	331
	T-Mobile USA, Inc. 144A	Corporate Debt - due 04/15/2031 - 3.500%	**	338
	T-Mobile USA, Inc. 144A	Corporate Debt - due 10/15/2052 - 3.400%	**	300
	TransCanada Trust	Corporate Debt - due 05/20/2075 - Variable	**	604
	TransCanada Trust	Corporate Debt - due 08/15/2076 - Variable	**	546
	TransCanada Trust	Corporate Debt - due 03/15/2077 - Variable	**	930
	TransCanada Trust	Corporate Debt - due 09/15/2079 - Variable	**	641
	Ultrapar International S.A. 144A	Corporate Debt - due 10/06/2026 - 5.250%	**	370
	Ultrapar International S.A. 144A	Corporate Debt - due 06/06/2029 - 5.250%	**	749
	UniCredit S.p.A 144A	Corporate Debt - due 04/02/2034 - Variable	**	1,020
	UniCredit S.p.A 144A	Corporate Debt - due 06/30/2035 - Variable	**	382
	Union Pacific Railroad Co. 2006	Corporate Debt - due 07/02/2030 - 5.866%	**	562
	Verizon Communications, Inc.	Corporate Debt - due 01/15/2036 - 4.272%	**	558
	VMware, Inc.	Corporate Debt - due 08/15/2023 - 0.600%	**	199
	VMware, Inc.	Corporate Debt - due 08/15/2026 - 1.400%	**	246
	Wells Fargo & Co.	Corporate Debt - due 06/03/2026 - 4.100%	**	273
	Wells Fargo & Co.	Corporate Debt - due 07/22/2027 - 4.300%	**	864
	Wells Fargo & Co.	Corporate Debt - due 04/04/2051 - Variable	**	822
	TBA Collateral with Credit Suisse	Interest-Bearing Cash	**	270
	California State	Municipal Debt - due 10/01/2039 - 7.300%	**	902
	Illinois State	Municipal Debt - due 06/01/2033 - 5.100%	**	1,156
	Los Angeles CA Unified School District	Municipal Debt - due 07/01/2034 - 6.758%	**	592
	New Jersey State Turnpike Authority	Municipal Debt - due 01/01/2041 - 7.102%	**	941
	Neuberger Berman Genesis Fund Class R-6	Mutual Fund	**	223,254
	Vanguard Institutional Index Fund	Mutual Fund	**	761,970
	SDB Money Market Fund	Self-directed Brokerage Money Market Fund	**	4,856
	Brokerage Securities	Self-directed Brokerage Securities	**	47,538

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*	Participant Loans	Loan interest rates range from 4.25% to 9.25% with various maturities through December 2041	**	68,623
	Citigroup Capital XIII	Preferred Stock - due 10/30/2040 - 6.687%	**	831
	JPMorgan Chase & Co.	Preferred Stock - due 09/01/2030 - 8.750%	**	680
	Vodafone Group PLC	Preferred Stock - due 04/04/2079 - Variable	**	726
	Commitment to purchase FNMA SF Mtg	U.S. Government Securities - due 02/01/2052 - 2.500%	**	16,264
	FHLMC Pool #1H-2592	U.S. Government Securities - due 01/01/2036 - Variable	**	59
	FHLMC Pool #78-1274	U.S. Government Securities - due 02/01/2034 - Variable	**	41
	FHLMC Pool #84-0286	U.S. Government Securities - due 05/01/2046 - Variable	**	114
	FHLMC Pool #84-9254	U.S. Government Securities - due 01/01/2042 - Variable	**	45
	FHLMC Pool #84-9327	U.S. Government Securities - due 05/01/2044 - Variable	**	200
	FHLMC Pool #84-9505	U.S. Government Securities - due 10/01/2044 - Variable	**	59
	FHLMC Pool #84-9544	U.S. Government Securities - due 12/01/2044 - Variable	**	112
	FHLMC Pool #84-9625	U.S. Government Securities - due 01/01/2045 - Variable	**	81
	FHLMC Pool #84-9626	U.S. Government Securities - due 08/01/2044 - Variable	**	131
	FHLMC Pool #84-9849	U.S. Government Securities - due 10/01/2045 - Variable	**	37
	FHLMC Pool #C9-0981	U.S. Government Securities - due 07/01/2026 - 6.500%	**	67
	FHLMC Pool #C9-1013	U.S. Government Securities - due 01/01/2027 - 6.500%	**	47
	FHLMC Pool #G0-7600	U.S. Government Securities - due 03/01/2042 - 4.500%	**	160
	FHLMC Pool #G0-8723	U.S. Government Securities - due 08/01/2046 - 4.000%	**	1,052
	FHLMC Pool #G6-0153	U.S. Government Securities - due 10/01/2044 - 4.500%	**	106
	FHLMC Pool #G6-0764	U.S. Government Securities - due 10/01/2042 - 4.500%	**	164
	FHLMC Pool #G6-1080	U.S. Government Securities - due 03/01/2047 - 4.500%	**	1,127
	FHLMC Pool #H0-1774	U.S. Government Securities - due 09/01/2037 - 6.500%	**	12
	FHLMC Pool #H0-9197	U.S. Government Securities - due 10/01/2038 - 6.500%	**	11
	FHLMC Pool #H0-9212	U.S. Government Securities - due 05/01/2038 - 5.500%	**	9
	FHLMC Pool #Q0-3517	U.S. Government Securities - due 09/01/2041 - 4.500%	**	150
	FHLMC Pool #RA-2958	U.S. Government Securities - due 07/01/2050 - 2.000%	**	1,750
	FHLMC Pool #RA-3053	U.S. Government Securities - due 07/01/2050 - 2.000%	**	747
	FHLMC Pool #RA-3167	U.S. Government Securities - due 07/01/2050 - 2.000%	**	2,760
	FHLMC Pool #Sd-0752	U.S. Government Securities - due 11/01/2051 - 2.500%	**	1,594
	FHLMC Pool #SD-7525	U.S. Government Securities - due 10/01/2050 - 2.500%	**	3,565
	FHLMC Pool #SD-7530	U.S. Government Securities - due 11/01/2050 - 2.500%	**	1,857
	FHLMC Pool #SD-7536	U.S. Government Securities - due 02/01/2051 - 2.500%	**	998
	FHLMC Multiclass Mtg 2957 VZ	U.S. Government Securities - due 02/15/2035 - 5.000%	**	318
	FHLMC Multiclass Mtg 4283 EW	U.S. Government Securities - due 12/15/2043 - Variable	**	104
	FHLMC Multiclass Mtg 4319 MA	U.S. Government Securities - due 03/15/2044 - Variable	**	188
	FNMA Pool #0256851	U.S. Government Securities - due 08/01/2037 - 7.000%	**	17
	FNMA Pool #0735503	U.S. Government Securities - due 04/01/2035 - 6.000%	**	59
	FNMA Pool #0735608	U.S. Government Securities - due 03/01/2035 - Variable	**	87
	FNMA Pool #0745329	U.S. Government Securities - due 07/01/2035 - 6.000%	**	92
	FNMA Pool #0884704	U.S. Government Securities - due 06/01/2036 - Variable	**	17
	FNMA Pool #0888154	U.S. Government Securities - due 11/01/2036 - Variable	**	68
	FNMA Pool #0888367	U.S. Government Securities - due 03/01/2037 - 7.000%	**	185
	FNMA Pool #0889634	U.S. Government Securities - due 02/01/2023 - 6.000%	**	6
	FNMA Pool #0889984	U.S. Government Securities - due 10/01/2038 - 6.500%	**	67
	FNMA Pool #0976853	U.S. Government Securities - due 11/01/2029 - 5.500%	**	57
	FNMA Pool #0995487	U.S. Government Securities - due 08/01/2037 - 6.000%	**	114
	FNMA Pool #0AB1763	U.S. Government Securities - due 11/01/2030 - 4.000%	**	43
	FNMA Pool #0AB8086	U.S. Government Securities - due 10/01/2037 - 6.000%	**	21
	FNMA Pool #0AD0121	U.S. Government Securities - due 09/01/2029 - 4.500%	**	152

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	FNMA Pool #0AD0130	U.S. Government Securities - due 08/01/2039 - 6.500%	**	17
	FNMA Pool #0AD0198	U.S. Government Securities - due 09/01/2038 - 5.500%	**	44
	FNMA Pool #0AD0217	U.S. Government Securities - due 08/01/2037 - 6.000%	**	105
	FNMA Pool #0AD0218	U.S. Government Securities - due 09/01/2036 - 6.000%	**	110
	FNMA Pool #0AD0964	U.S. Government Securities - due 11/01/2039 - 5.500%	**	207
	FNMA Pool #0AL1845	U.S. Government Securities - due 06/01/2039 - Variable	**	19
	FNMA Pool #0AL1900	U.S. Government Securities - due 08/01/2026 - 4.500%	**	58
	FNMA Pool #0AL4577	U.S. Government Securities - due 01/01/2034 - 4.500%	**	150
	FNMA Pool #0AL5145	U.S. Government Securities - due 10/01/2033 - 4.000%	**	231
	FNMA Pool #0AL5749	U.S. Government Securities - due 07/01/2042 - 4.500%	**	156
	FNMA Pool #0AL6120	U.S. Government Securities - due 11/01/2044 - Variable	**	374
	FNMA Pool #0AL6132	U.S. Government Securities - due 03/01/2029 - 4.500%	**	60
	FNMA Pool #0AL6245	U.S. Government Securities - due 01/01/2045 - Variable	**	123
	FNMA Pool #0AL7205	U.S. Government Securities - due 12/01/2029 - 3.500%	**	177
	FNMA Pool #0AL7384	U.S. Government Securities - due 09/01/2045 - 4.500%	**	135
	FNMA Pool #0AL8556	U.S. Government Securities - due 08/01/2044 - 4.500%	**	746
	FNMA Pool #0AL8816	U.S. Government Securities - due 09/01/2045 - 4.500%	**	178
	FNMA Pool #0AL8919	U.S. Government Securities - due 07/01/2046 - Variable	**	61
	FNMA Pool #0AL9407	U.S. Government Securities - due 09/01/2042 - 4.500%	**	79
	FNMA Pool #0AL9781	U.S. Government Securities - due 02/01/2046 - 4.500%	**	279
	FNMA Pool #0AO4105	U.S. Government Securities - due 06/01/2042 - Variable	**	80
	FNMA Pool #0AO8469	U.S. Government Securities - due 05/01/2042 - Variable	**	39
	FNMA Pool #0AP7562	U.S. Government Securities - due 09/01/2042 - Variable	**	268
	FNMA Pool #0AW4697	U.S. Government Securities - due 05/01/2044 - Variable	**	64
	FNMA Pool #0BF0118	U.S. Government Securities - due 06/01/2056 - 4.500%	**	401
	FNMA Pool #0BH7071	U.S. Government Securities - due 12/01/2047 - 4.500%	**	267
	FNMA Pool #0BM1357	U.S. Government Securities - due 01/01/2043 - 4.500%	**	390
	FNMA Pool #0BM6149	U.S. Government Securities - due 10/01/2049 - Variable	**	276
	FNMA Pool #0CA6271	U.S. Government Securities - due 07/01/2050 - 2.500%	**	3,876
	FNMA Pool #0CA6329	U.S. Government Securities - due 07/01/2050 - 2.500%	**	4,730
	FNMA Pool #0CA6398	U.S. Government Securities - due 07/01/2050 - 2.500%	**	1,421
	FNMA Pool #0CA6662	U.S. Government Securities - due 08/01/2050 - 2.000%	**	2,900
	FNMA Pool #0CA6925	U.S. Government Securities - due 09/01/2050 - 2.000%	**	1,469
	FNMA Pool #0CA8099	U.S. Government Securities - due 12/01/2050 - 2.000%	**	2,329
	FNMA Pool #0CA8847	U.S. Government Securities - due 02/01/2051 - 2.000%	**	2,312
	FNMA Pool #0FM4714	U.S. Government Securities - due 10/01/2050 - 2.500%	**	2,975
	FNMA Pool #0FM8206	U.S. Government Securities - due 08/01/2051 - 2.500%	**	493
	FNMA Pool #0FM8768	U.S. Government Securities - due 02/01/2051 - 2.500%	**	407
	FNMA Pool #0MA0232	U.S. Government Securities - due 11/01/2029 - 4.500%	**	183
	FNMA Pool #0MA2366	U.S. Government Securities - due 08/01/2035 - 4.000%	**	165
	FNMA Pool #0MA2455	U.S. Government Securities - due 11/01/2035 - 4.000%	**	353
	FNMA Pool #0MA2480	U.S. Government Securities - due 12/01/2035 - 4.000%	**	185
	FNMA Pool #0MA2880	U.S. Government Securities - due 01/01/2037 - 4.000%	**	878
	FNMA Pool #0MA2923	U.S. Government Securities - due 03/01/2037 - 3.500%	**	394
	FNMA GTD Remic P/T 01-79 BA	U.S. Government Securities - due 03/25/2045 - 7.000%	**	18
	FNMA GTD Remic P/T 01-T10 A1	U.S. Government Securities - due 12/25/2041 - 7.000%	**	130
	FNMA GTD Remic P/T 04-W2 5A	U.S. Government Securities - due 03/25/2044 - 7.500%	**	124
	FNMA GTD Remic P/T 07-50 DZ	U.S. Government Securities - due 06/25/2037 - 5.500%	**	249
	FNMA GTD Remic P/T 07-W10 2A	U.S. Government Securities - due 08/25/2047 - Variable	**	86
	FNMA GTD Remic P/T 12-46 BA	U.S. Government Securities - due 05/25/2042 - 6.000%	**	220
	FNMA GTD Remic P/T 13-128 CF	U.S. Government Securities - due 12/25/2043 - Variable	**	446

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	GNMA GTD Remic P/T 15-H23 FA	U.S. Government Securities - due 09/20/2065 - Variable	**	566
	GNMA GTD Remic P/T 16-H24 FD	U.S. Government Securities - due 11/20/2066 - Variable	**	1,067
	GNMA GTD Remic P/T 17-H24 FQ	U.S. Government Securities - due 11/20/2067 - Variable	**	1,650
	GNMA GTD Remic P/T 19-H02 FG	U.S. Government Securities - due 12/20/2068 - Variable	**	405
	GNMA GTD Remic P/T 19-H17 FA	U.S. Government Securities - due 11/20/2069 - Variable	**	590
	GNMA GTD Remic P/T 20-H01 FV	U.S. Government Securities - due 01/20/2070 - Variable	**	3,327
	GNMA GTD Remic P/T 21-H19 FM	U.S. Government Securities - due 12/20/2071 - Variable	**	977
	SBA GTD Partn Ctfs 2006-20E 1	U.S. Government Securities - due 05/01/2026 - 5.870%	**	36
	SBA GTD Partn Ctfs 2007-20B 1	U.S. Government Securities - due 02/01/2027 - 5.490%	**	43
	SBA GTD Partn Ctfs 2007-20D 1	U.S. Government Securities - due 04/01/2027 - 5.320%	**	28
	U.S. Treasury Bond	U.S. Government Securities - due 11/15/2050 - 1.625%	**	865
	U.S. Treasury Bond	U.S. Government Securities - due 11/15/2041 - 2.000%	**	1,471
	U.S. Treasury Note	U.S. Government Securities - due 08/15/2030 - 0.625%	**	558
	U.S. Treasury Note	U.S. Government Securities - due 10/31/2025 - 0.250%	**	3,384
	U.S. Treasury Note	U.S. Government Securities - due 11/15/2030 - 0.875%	**	8,979
	U.S. Treasury Note	U.S. Government Securities - due 12/31/2025 - 0.375%	**	4,912
	U.S. Treasury Note	U.S. Government Securities - due 01/15/2024 - 0.125%	**	1,841
	U.S. Treasury Note	U.S. Government Securities - due 02/15/2031 - 1.125%	**	2,832
	U.S. Treasury Note	U.S. Government Securities - due 04/30/2026 - 0.750%	**	6,226
	U.S. Treasury Note	U.S. Government Securities - due 06/15/2024 - 0.250%	**	2,685
	U.S. Treasury Note	U.S. Government Securities - due 07/31/2026 - 0.625%	**	2,481
	U.S. Treasury Note	U.S. Government Securities - due 09/30/2028 - 1.250%	**	4,065
	U.S. Treasury Note	U.S. Government Securities - due 10/31/2023 - 0.375%	**	1,443
	U.S. Treasury Note	U.S. Government Securities - due 10/31/2026 - 1.125%	**	2,629
	Total assets held for investment			**$ 4,004,627**

*Party-in-interest

**Cost information is not required for participant-directed investments and therefore is not included.