

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

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

- A This return/report is for: [] a multiemployer plan [] a multiple-employer plan (Filers checking this box must provide 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): 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.

Table with 4 columns: SIGN HERE, Signature of plan administrator, Date, Enter name of individual signing as plan administrator. Includes rows for employer/plan sponsor and DFE.

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

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 2024 Form M-1 annual report. If the plan was not required to file the 2024 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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider 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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

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 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)... 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

THE VANGUARD GROUP, INC.

23-1945930

(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

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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 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	3473678	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

(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	2910679	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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	2679203	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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)

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	1021122	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

(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	447894	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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	234201	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

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	215319	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

(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	70000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

STATE STREET GLOBAL ADVISORS

81-4017137

(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?
19 49 50 51	NONE	46798	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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)

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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	30998	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

(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	6550	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 61 63	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	2044	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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	24337
(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	61	3993
(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	
(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	2361
(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	

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
ALIGHT FINANCIAL SOLUTIONS, LLC	63	1137
(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	907
(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	
(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	307
(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	

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

(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

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

a Name: MOSS ADAMS LLP	b EIN: 91-0189318
c Position: AUDITOR	
d Address: 101 SECOND STREET SUITE 900 SAN FRANCISCO, CA 94105	e Telephone: 415-956-1500

Explanation: REDUCE 11-K CLIENT LOAD

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 <hr/> 2024 <hr/> This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning <u>01/01/2024</u> and ending <u>12/31/2024</u>	
A Name of plan <u>NORDSTROM 401K PLAN</u>	B Three-digit plan number (PN) <u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>NORDSTROM, INC.</u>	D Employer Identification Number (EIN) <u>91-0515058</u>

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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>PUTNAM STABLE VALUE FUND</u>		
b Name of sponsor of entity listed in (a): <u>PUTNAM FIDUCIARY TRUST COMPANY</u>		
c EIN-PN <u>04-3159710-202</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>297850833</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>EB TEMPORARY INVESTMENT</u>		
b Name of sponsor of entity listed in (a): <u>THE BANK OF NEW YORK MELLON</u>		
c EIN-PN <u>25-6078093-023</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>13598325</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>SSGA TIPS INDEX</u>		
b Name of sponsor of entity listed in (a): <u>STATE STREET BANK AND TRUST COMPANY</u>		
c EIN-PN <u>90-0337987-168</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>48225958</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LOOMIS SAYLES CORE PLUS FIXED INCOM</u>		
b Name of sponsor of entity listed in (a): <u>LOOMIS SAYLES TRUST COMPANY, LLC</u>		
c EIN-PN <u>84-6391546-010</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>436964496</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>SCHRODER INT'L MULTI-CAP EQTY TRUST</u>		
b Name of sponsor of entity listed in (a): <u>SEI TRUST COMPANY</u>		
c EIN-PN <u>46-4679164-072</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>273701424</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>EUROPACIFIC GROWTH FUND</u>		
b Name of sponsor of entity listed in (a): <u>THE CAPITAL GROUP EUROPACIFIC GROWTH TRUST</u>		
c EIN-PN <u>95-6597294-661</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>572670751</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>PGIM RETIREMENT REAL ESTATE FUND II</u>		
b Name of sponsor of entity listed in (a): <u>PGIM INC.</u>		
c EIN-PN <u>83-1921274-001</u>	d Entity code <u>E</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>101768993</u>

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
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
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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.

	(a) Beginning of Year	(b) End of Year
Assets		
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)	
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0
(2) U.S. Government securities	1c(2)	113711694
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	22078232
(B) All other	1c(3)(B)	40148705
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	2035297
(B) Common	1c(4)(B)	519252705
(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)	77131875
(9) Value of interest in common/collective trusts	1c(9)	2705369690
(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)	101768993
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	588213908
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	
(15) Other.....	1c(15)	56894690

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	59602928	68481575
(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	3919870165	4295087364
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	1364635	1565176
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	3226231	2998738
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	4590866	4563914
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	3915279299	4290523450

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)	74921489	
(B) Participants.....	2a(1)(B)	184391976	
(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)		259313465
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	-2161	
(B) U.S. Government securities.....	2b(1)(B)	3855798	
(C) Corporate debt instruments.....	2b(1)(C)	3616893	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)	5067138	
(F) Other.....	2b(1)(F)	250800	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		12788468
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	90547	
(B) Common stock.....	2b(2)(B)	4984608	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	5992019	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)		11067174
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....	2b(4)(A)	360169650	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	325547932	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	65311756	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		65760288
(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)		288929317
c Other income	2c		11664899
d Total income. Add all income amounts in column (b) and enter total	2d		749457085

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	363147820	
(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)		363147820
f Corrective distributions (see instructions)	2f		7793
g Certain deemed distributions of participant loans (see instructions)	2g		-33523
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)	3473678	
(4) IQPA audit fees	2i(4)	70000	
(5) Investment advisory and investment management fees	2i(5)	6299893	
(6) Bank or trust company trustee/custodial fees	2i(6)	1021122	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)	234201	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	-8050	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		11090844
j Total expenses. Add all expense amounts in column (b) and enter total	2j		374212934

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		375244151
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) 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) 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: **BDO USA, P.C.**

(2) EIN: **13-5381590**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

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.)		X	
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.)		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.)		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.)		X	
e Was this plan covered by a fidelity bond?	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?		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?		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?		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.)	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.)		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?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		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.			

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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

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 (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (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: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	14a	
b The plan year immediately preceding the current plan year. <input type="checkbox"/> 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. <input type="checkbox"/> 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) and (b):

a Enter the percentage of plan assets held as:
 Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%
 High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
 0-5 years 5-10 years 10-15 years 15 years or more

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: _____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? Yes No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).
 Design-based safe harbor method
 "Prior year" ADP test
 "Current year" ADP test
 N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q703906A.

Nordstrom 401(k) Plan

Employer ID No: 91-0515058

Plan Number: 001

*Report of Independent Auditors and
Financial Statements as of December 31, 2024 and 2023
and for the Year Ended December 31, 2024,
with Supplementary Information*

**NORDSTROM 401(k) PLAN
PLAN YEAR ENDED DECEMBER 31, 2024
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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
BNY	Bank of New York Mellon
Board	Nordstrom, Inc.’s Board of Directors
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
VFCP	Voluntary Fiduciary Correction Program

Independent Auditor's Report

To the Retirement Committee
Nordstrom 401(k) Plan
Seattle, WA

Opinion on the 2024 Financial Statements

We have audited the financial statements of Nordstrom 401(k) Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA). The financial statements comprise the statement of net assets available for benefits as of December 31, 2024, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements (2024 financial statements).

In our opinion, the accompanying 2024 financial statements present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2024, and the changes in its net assets available for benefits for the year then ended, in accordance with accounting principles generally accepted in the United States of America (GAAP).

Basis for Opinion

We conducted our audit 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 2024 Financial Statements* section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. 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 the 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 responsible for maintaining a current plan instrument, including all plan amendments. Management is also responsible for 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 2024 Financial Statements

Our objectives are to obtain reasonable assurance about whether the 2024 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 2024 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 2024 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 the purpose of expressing an opinion on the effectiveness of the 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 2024 financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the 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.

Supplemental Schedule Required by ERISA

Our audit was conducted for the purpose of forming an opinion on the 2024 financial statements as a whole. The supplemental schedule of the Schedule H, line 4(i) – Schedule of Assets Held at End of Year as of December 31, 2024 is presented for purposes of additional analysis and is not a required part of the 2024 financial statements but is 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 2024 financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statement and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the 2024 financial statements or to the 2024 financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, including its form and content, is 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 supplemental schedule is fairly stated, in all material respects, in relation to the 2024 financial statements as a whole, and the form and content is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Other Matter — Report on the 2023 Financial Statements

The Plan's financial statements as of December 31, 2023 (2023 financial statements) were audited by predecessor auditors. Their audit report dated June 13, 2024, indicated that (a) the amounts and disclosures in the 2023 financial statements were presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

/s/ BDO USA, P.C.
Costa Mesa, CA
July 29, 2025

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

	December 31,	
	2024	2023
Assets		
Participant-directed investments at fair value (see Note 3: Fair Value Measurements)	\$4,217,955	\$3,849,678
Notes receivable from participants	77,132	70,192
Total assets	4,295,087	3,919,870
Liabilities		
Administrative expenses and other payables	1,565	1,365
Due to broker for securities purchased	2,999	3,226
Total liabilities	4,564	4,591
Net assets available for benefits	\$4,290,523	\$3,915,279

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, 2024
Additions	
Contributions	
Company contributions	\$74,922
Employee contributions	184,392
Total contributions	259,314
Investment income	
Net appreciation in fair value of investments	448,454
Interest and dividends	41,689
Total investment income	490,143
Total contributions and investment income	749,457
Deductions	
Benefit payments to participants	363,122
Administrative expenses and other	11,091
Total deductions	374,213
Net increase in net assets	375,244
Net assets available for benefits at beginning of year	3,915,279
Net assets available for benefits at end of year	\$4,290,523

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 December 31, 1952 and is a defined contribution plan. 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.

Plan Year

The Plan operates on a calendar year ending on December 31. References to 2024 and 2023 relate to the Plan years ended December 31, 2024 and December 31, 2023.

Trustee and Administrator of the Plan

BNY 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 aged 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. Company contributions are funded each pay period that an eligible participant contributes to the Plan.

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.

Contributions are recognized in the period the Company makes payroll deductions from participant compensation.

Investments

Participants can direct the investment of their accounts (including employee and Company contributions) among various funds and Company common stock. The funds as of December 31, 2024 and 2023 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. For more information on a subsequent event impacting Company common stock, see Note 2: Summary of Significant Accounting Policies.

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 in fair value of investments on the Statement of Changes in Net Assets Available for Benefits.

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.

NORDSTROM 401(k) PLAN NOTES TO FINANCIAL STATEMENTS

(Dollar and share amounts in thousands)

Company contributions — Company matching contributions 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.

Forfeitures

Forfeitures of unvested Company matching contributions from terminated participant accounts are used to offset Company matching contributions. As of December 31, 2024 and 2023, forfeited unvested amounts were \$1,073 and \$1,401. In 2024, the Plan used forfeitures of \$4,559 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 59 months or, if for the purchase of a principal residence, up to 239 months. 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 on December 31, 2024 range from 4.25% to 9.50%. 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 plan 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.

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.

NORDSTROM 401(k) PLAN NOTES TO FINANCIAL STATEMENTS

(Dollar and share amounts in thousands)

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 and 103-12 investment entities are measured using the NAV practical expedient of each fund, as reported by the fund managers. The NAV practical expedient is based on the fair value of the underlying assets owned by the CCT or investment entity, 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, 2024 and 2023, were \$5,555 and \$4,793.

Administrative Expenses

Substantially all 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.

Subsequent Events

On May 20, 2025, subsequent to year end and pursuant to the terms of that certain Agreement and Plan of Merger, dated December 22, 2024 (the "Merger Agreement"), by and among Nordstrom, Inc., a Washington corporation (the "Company"), Nordstrom Holdings, Inc., a Delaware corporation (formerly Norse Holdings, Inc.) ("Parent"), and Navy Acquisition Co. Inc., a Washington corporation and a direct, wholly owned subsidiary of Parent ("Acquisition Sub"), Acquisition Sub merged with and into the Company (the "Merger"), with the Company surviving the Merger as a wholly owned subsidiary of Parent. Nordstrom, Inc. common stock ceased trading prior to the opening of the NYSE and was delisted on May 21, 2025. Upon the closing of the transaction, shares of Nordstrom common stock held in the Plan were purchased by the Parent in exchange for the per-share sale transaction price and the Nordstrom Stock Fund ceased to be an investment option. Any interests held by participants in the Nordstrom Stock Fund immediately prior to May 20, 2025 were automatically cancelled, converted to cash and invested in the Putnam Stable Value fund, effective May 23, 2025.

Management has evaluated subsequent events through July 29, 2025, which is the date the financial statements were available to be issued, and have determined that there are no subsequent events that require disclosure, except as described above.

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, 2024 and 2023. There have been no changes in the methodologies used as of December 31, 2024 and 2023.

	December 31, 2024		
	Level 1	Level 2	Total
Fair value hierarchy:			
Common stock	\$587,734	\$—	\$587,734
Debt securities	33,153	147,950	181,103
Mutual funds	588,213	—	588,213
Brokerage securities	48,523	5,244	53,767
Total assets in fair value hierarchy	\$1,257,623	\$153,194	\$1,410,817
Investments measured at NAV practical expedient ¹			2,807,138
Total participant-directed investments at fair value			\$4,217,955

¹ Includes CCTs and a 103-12 investment entity.

	December 31, 2023		
	Level 1	Level 2	Total
Fair value hierarchy:			
Common stock	\$524,175	\$—	\$524,175
Debt securities	21,740	143,278	165,018
Mutual funds	545,813	—	545,813
Brokerage securities	36,848	5,902	42,750
Interest-bearing cash securities	95	—	95
Total assets in fair value hierarchy	\$1,128,671	\$149,180	\$1,277,851
Investments measured at NAV practical expedient ¹			2,571,827
Total participant-directed investments at fair value			\$3,849,678

¹ Includes CCTs and a 103-12 investment entity.

Certain investments are measured at NAV as a practical expedient 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, 2024 and 2023. During 2024, 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, 2024 and 2023, Plan investments included units held in a collective trust managed by BNY, BNY common stock and interest-bearing cash managed by BNY. As of December 31, 2024 and 2023, the Plan held 2,836 and 3,231 shares of Nordstrom, Inc. common stock, with a cost basis of \$86,583 and \$101,520. The Plan recorded \$2,256 of dividend income from Nordstrom, Inc. common stock during 2024. 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. For more information on a subsequent event impacting Company common stock, see Note 2: Summary of Significant Accounting Policies.

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, 2024, uses a pre-approved plan document sponsored by Plan Document Systems LLC. Plan Document Systems LLC received an opinion letter from the IRS, dated June 30, 2020, which states that the pre-approved plan document, as then designed, satisfies the applicable provisions of the IRC. 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, 2024 and 2023, 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 2024 and 2023, the Plan passed all applicable non-discrimination tests. Additionally, the Plan is required to return contributions received from participants during the Plan year in excess of the IRC limits. There were no refunds for 2024 and 2023.

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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.

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

- A This return/report is for: [] a multiemployer plan [] a multiple-employer plan... [x] a single-employer plan [] a DFE... B This return/report is: [] the first return/report [] the final return/report... C If the plan is a collectively-bargained plan, check here... D Check box if filing under: [x] Form 5558 [] automatic extension... 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): 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.

Table with 4 columns: SIGN HERE, Signature, Date, and Name. Row 1: Terry Lodes, 8-1-25, TERRY LODES. Row 2: Signature of employer/plan sponsor, Date, Enter name of individual signing as employer or plan sponsor. Row 3: Signature of DFE, Date, Enter name of individual signing as DFE.

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

3a Plan administrator's name and address <input type="checkbox"/> 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
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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
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5 Total number of participants at the beginning of the plan year	5	108,781
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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)	58,225
a(2) Total number of active participants at the end of the plan year	6a(2)	58,257
b Retired or separated participants receiving benefits	6b	0
c Other retired or separated participants entitled to future benefits	6c	50,782
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d	109,039
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	363
f Total. Add lines 6d and 6e	6f	109,402
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	6g(1)	103,450
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g(2)	102,382
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	17,318

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7	
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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) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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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
- (4) **DCG** (Individual Plan Information) – Number Attached _____
- (5) **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) **H** (Financial Information)
- (2) **I** (Financial Information – Small Plan)
- (3) **A** (Insurance Information) – Number Attached _____
- (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 2024 Form M-1 annual report. If the plan was not required to file the 2024 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, 2024
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	**	\$572,671
* EB Temporary Investment Fund	CCT - due 12/31/2049 - 1.147%	**	13,598
Loomis Core Plus Fixed Income Fund	CCT	**	436,964
PGIM Retirement Real Estate Fund II LP	103-12 investment entity	**	101,769
Putnam Stable Value Fund	CCT	**	297,851
Schroder Collective International Multi-Cap Equity Trust	CCT	**	273,701
SSGA TIPS Index	CCT	**	48,226
Vanguard Fiduciary Trust Company	CCT	**	1,062,358
			2,807,138
Acadia Healthcare Co, Inc.	Common stock	**	2,318
Accenture PLC	Common stock	**	3,535
Acv Auctions, Inc.	Common stock	**	3,593
Advanced Drainage Systems, Inc.	Common stock	**	2,602
Advanced Micro Devices, Inc.	Common stock	**	4,029
Agilent Technologies, Inc.	Common stock	**	3,973
Amazon.com, Inc.	Common stock	**	24,528
Amicus Therapeutics, Inc.	Common stock	**	2,801
Apollo Global Management, Inc.	Common stock	**	4,256
Apple, Inc.	Common stock	**	23,307
Avantor, Inc.	Common stock	**	1,898
The Azek Co, Inc.	Common stock	**	3,351
The Baldwin Insurance Group, Inc.	Common stock	**	2,523
Bio-Techne Corp.	Common stock	**	1,888
Blueprint Medicines Corp.	Common stock	**	3,381
Bright Horizons Family Solutions	Common stock	**	4,880
The Brink's Co.	Common stock	**	3,451
Broadcom, Inc.	Common stock	**	1,581
Burlington Stores, Inc.	Common stock	**	2,444
BWX Technologies, Inc.	Common stock	**	2,605
Cameco Corp.	Common stock	**	2,829
The Carlyle Group, Inc.	Common stock	**	11,895
Casella Waste Systems, Inc.	Common stock	**	3,860
CF Industries Holdings, Inc.	Common stock	**	3,903
Chart Industries, Inc.	Common stock	**	3,054
Chemed Corp.	Common stock	**	4,877
Chipotle Mexican Grill, Inc.	Common stock	**	6,051
Churchill Downs, Inc.	Common stock	**	3,441
Clearwater Analytics Holdings	Common stock	**	4,479
Cognex Corp.	Common stock	**	4,004
Confluent, Inc.	Common stock	**	5,235
Copart, Inc.	Common stock	**	5,957
Costco Wholesale Corp.	Common stock	**	5,670

Credo Technology Group Holding	Common stock	**	2,111
Curtiss-Wright Corp.	Common stock	**	2,705
Datadog, Inc.	Common stock	**	3,001
Doximity, Inc.	Common stock	**	5,455
Dynatrace, Inc.	Common stock	**	5,379
Eagle Materials, Inc.	Common stock	**	2,085
Elf Beauty, Inc.	Common stock	**	5,677
Encompass Health Corp.	Common stock	**	2,957
EPAM Systems, Inc.	Common stock	**	3,350
Everest Group Ltd.	Common stock	**	4,137
Evolent Health, Inc.	Common stock	**	1,311
Exact Sciences Corp.	Common stock	**	3,672
Exlservice Holdings, Inc.	Common stock	**	4,589
Firstservice Corp.	Common stock	**	2,184
Flywire Corp.	Common stock	**	4,126
Fox Factory Holding Corp.	Common stock	**	1,369
Freshpet, Inc.	Common stock	**	3,207
FTAI Aviation Ltd.	Common stock	**	3,182
Glaukos Corp.	Common stock	**	2,958
Globus Medical, Inc.	Common stock	**	1,699
Guidewire Software, Inc.	Common stock	**	2,579
Idexx Laboratories, Inc.	Common stock	**	3,238
Insmmed, Inc.	Common stock	**	3,100
Inspire Medical Systems, Inc.	Common stock	**	3,203
Insulet Corp.	Common stock	**	3,759
Intuit, Inc.	Common stock	**	6,057
Kosmos Energy Ltd.	Common stock	**	1,565
Lam Research Corp.	Common stock	**	4,450
Lancaster Colony Corp.	Common stock	**	2,736
Lattice Semiconductor Corp.	Common stock	**	1,875
Linde PLC	Common stock	**	3,302
Live Nation Entertainment, Inc.	Common stock	**	4,376
Louisiana-Pacific Corp.	Common stock	**	2,112
Madrigal Pharmaceuticals, Inc.	Common stock	**	2,156
Manhattan Associates, Inc.	Common stock	**	4,494
Martin Marietta Materials, Inc.	Common stock	**	4,200
Mastercard, Inc.	Common stock	**	12,039
Mercury Systems, Inc.	Common stock	**	4,417
Merit Medical Systems, Inc.	Common stock	**	435
Meta Platforms, Inc.	Common stock	**	16,690
Microsoft Corp.	Common stock	**	31,612
Monster Beverage Corp.	Common stock	**	3,300
Mueller Industries, Inc.	Common stock	**	4,326
Neogen Corp.	Common stock	**	3,064
New Fortress Energy, Inc.	Common stock	**	4,063
Nice Ltd.	Common stock	**	3,198
* Nordstrom, Inc.	Common stock	**	68,482
Novanta, Inc.	Common stock	**	2,662
Nvent Electric PLC	Common stock	**	3,802
Nvidia Corp.	Common stock	**	30,803
O'Reilly Automotive, Inc.	Common stock	**	4,644
Palo Alto Networks, Inc.	Common stock	**	3,543
Parsons Corp.	Common stock	**	1,506
Penumbra, Inc.	Common stock	**	3,447
Planet Fitness, Inc.	Common stock	**	3,825

Pool Corp.	Common stock	**	3,836
Primo Brands Corp.	Common stock	**	6,136
Pure Storage, Inc.	Common stock	**	3,524
Q2 Holdings, Inc.	Common stock	**	3,940
Range Resources Corp.	Common stock	**	1,412
Regal Rexnord Corp.	Common stock	**	3,214
Revolve Group, Inc.	Common stock	**	2,046
Salesforce, Inc.	Common stock	**	7,132
ServiceNow, Inc.	Common stock	**	6,531
SharkNinja, Inc.	Common stock	**	5,176
Stride, Inc.	Common stock	**	4,790
Talen Energy Corp.	Common stock	**	5,320
Tenable Holdings, Inc.	Common stock	**	2,538
Texas Instruments, Inc.	Common stock	**	2,803
TPG, Inc.	Common stock	**	2,953
Transunion	Common stock	**	4,762
Twist Bioscience Corp.	Common stock	**	2,394
Uber Technologies, Inc.	Common stock	**	3,984
UnitedHealth Group, Inc.	Common stock	**	6,053
Varonis Systems, Inc.	Common stock	**	1,660
Veeva Systems, Inc.	Common stock	**	3,074
West Pharmaceutical Services, Inc.	Common stock	**	3,283
Western Alliance Bancorp	Common stock	**	2,882
Whitecap Resources, Inc.	Common stock	**	2,980
Willscot Holdings Corp.	Common stock	**	2,898
			587,734

American Electric Power Co, Inc.	Corporate Debt - due 08/15/2025 - 5.699%	**	201
Bank of America Corp.	Corporate Debt - due 03/03/2026 - 4.450%	**	149
Bank of America Corp.	Corporate Debt - due 11/25/2027 - 4.183%	**	221
Bank of America Corp.	Corporate Debt - due 10/20/2032 - Variable	**	169
Bank of America Corp.	Corporate Debt - due 03/08/2037 - Variable	**	842
Bank of America Corp.	Corporate Debt - due 07/22/2033 - Variable	**	147
Bank of America Corp.	Corporate Debt - due 11/10/2028 - Variable	**	207
Barclays PLC	Corporate Debt - due 05/09/2028 - 4.836%	**	565
Barclays PLC	Corporate Debt - due 06/20/2030 - Variable	**	195
Barclays PLC	Corporate Debt - due 08/09/2028 - Variable	**	253
Barclays PLC	Corporate Debt - due 05/09/2027 - Variable	**	303
Bat Capital Corp.	Corporate Debt - due 08/02/2033 - 6.421%	**	555
Bat Capital Corp.	Corporate Debt - due 03/25/2031 - 2.726%	**	324
Bat Capital Corp.	Corporate Debt - due 03/16/2032 - 4.742%	**	385
Bayer US Finance II LLC 144A	Corporate Debt - due 12/15/2028 - 4.375%	**	841
Bayer US Finance LLC 144A	Corporate Debt - due 01/21/2029 - 6.250%	**	204
BNP Paribas S.A. 144A	Corporate Debt - due 09/28/2025 - 4.375%	**	720
BNP Paribas S.A. 144A	Corporate Debt - due 03/13/2027 - 4.625%	**	910
BNP Paribas S.A. 144A	Corporate Debt - due 08/12/2035 - Variable	**	167
Boston Properties LP	Corporate Debt - due 02/01/2026 - 3.650%	**	222
Boston Properties LP	Corporate Debt - due 01/15/2025 - 3.200%	**	175
Boston Properties LP	Corporate Debt - due 03/15/2030 - 2.900%	**	265
Boston Properties LP	Corporate Debt - due 01/30/2031 - 3.250%	**	264
Boston Properties LP	Corporate Debt - due 01/15/2034 - 6.500%	**	419
Capital One Financial Corp.	Corporate Debt - due 02/05/2025 - 3.200%	**	425
Capital One Financial Corp.	Corporate Debt - due 10/29/2025 - 4.200%	**	472
Capital One Financial Corp.	Corporate Debt - due 05/10/2028 - Variable	**	174

Capital One Financial Corp.	Corporate Debt - due 10/30/2031 - Variable	**	304
CCO Holdings LLC / CCO Holdings Capital Corp. 144A	Corporate Debt - due 06/01/2033 - 4.500%	**	421
CCO Holdings LLC / CCO Holdings Capital Corp. 144A	Corporate Debt - due 01/15/2034 - 4.250%	**	345
CCO Holdings LLC / CCO Holdings Capital Corp.	Corporate Debt - due 05/01/2032 - 4.500%	**	194
CEMEX S.A.B. de C.V. 144A	Corporate Debt - due 11/19/2029 - 5.450%	**	197
CEMEX S.A.B. de C.V. 144A	Corporate Debt - due 09/17/2030 - 5.200%	**	526
The Charles Schwab Corp.	Corporate Debt - due 05/19/2029 - Variable	**	357
The Charles Schwab Corp.	Corporate Debt - due 05/19/2034 - Variable	**	77
The Charles Schwab Corp.	Corporate Debt - due 08/24/2034 - Variable	**	105
The Charles Schwab Corp.	Corporate Debt - due 11/17/2029 - Variable	**	365
Charter Communications Operating LLC	Corporate Debt - due 10/23/2045 - 6.484%	**	1,088
Charter Communications Operating LLC	Corporate Debt - due 05/01/2047 - 5.375%	**	267
Charter Communications Operating LLC	Corporate Debt - due 04/01/2048 - 5.750%	**	342
Charter Communications Operating LLC	Corporate Debt - due 04/01/2033 - 4.400%	**	89
The Cigna Group	Corporate Debt - due 10/15/2028 - 4.375%	**	147
The Cigna Group	Corporate Debt - due 05/15/2027 - 7.875%	**	202
Citigroup, Inc.	Corporate Debt - due 03/17/2033 - Variable	**	382
Citigroup, Inc.	Corporate Debt - due 05/25/2034 - Variable	**	153
Cox Communications, Inc. 144A	Corporate Debt - due 02/01/2025 - 3.850%	**	410
Cox Communications, Inc. 144A	Corporate Debt - due 09/15/2026 - 3.350%	**	488
Cox Communications, Inc. 144A	Corporate Debt - due 08/15/2027 - 3.500%	**	145
Cox Communications, Inc. 144A	Corporate Debt - due 10/01/2030 - 1.800%	**	165
CVS Health Corp.	Corporate Debt - due 03/25/2038 - 4.780%	**	238
CVS Health Corp.	Corporate Debt - due 06/01/2031 - 5.550%	**	199
CVS Health Corp.	Corporate Debt - due 03/10/2055 - Variable	**	451
Dillard's, Inc.	Corporate Debt - due 05/15/2027 - 7.750%	**	445
Dominion Energy, Inc.	Corporate Debt - due 04/15/2026 - 1.450%	**	192
Elanco Animal Health, Inc.	Corporate Debt - due 08/28/2028 - Variable	**	380
Elevance Health, Inc.	Corporate Debt - due 05/15/2030 - 2.250%	**	239
Enel Finance International N.V. 144A	Corporate Debt - due 10/07/2039 - 6.000%	**	501
Fibercop Spa 144A	Corporate Debt - due 06/04/2038 - 7.721%	**	389
Ford Credit Auto Owner Trust B A3	Corporate Debt - due 04/15/2029 - 5.100%	**	449
Ford Motor Credit Co. LLC	Corporate Debt - due 06/16/2025 - 5.125%	**	450
Ford Motor Credit Co. LLC	Corporate Debt - due 11/13/2025 - 3.375%	**	221
Ford Motor Credit Co. LLC	Corporate Debt - due 08/10/2026 - 2.700%	**	696
Ford Motor Credit Co. LLC	Corporate Debt - due 03/06/2026 - 6.950%	**	204
Ford Motor Credit Co. LLC	Corporate Debt - due 05/12/2028 - 6.800%	**	723
GE Healthcare Technologies, Inc.	Corporate Debt - due 11/22/2032 - 5.905%	**	338
The Goldman Sachs Group, Inc.	Corporate Debt - due 03/15/2028 - Variable	**	827
HCA, Inc.	Corporate Debt - due 03/15/2032 - 3.625%	**	176
Honda Auto Receivables 20 3 A3	Corporate Debt - due 03/21/2029 - 4.570%	**	461
HSBC Holdings PLC	Corporate Debt - due 05/02/2036 - 6.500%	**	909
HSBC Holdings PLC	Corporate Debt - due 09/15/2037 - 6.500%	**	154
HSBC Holdings PLC	Corporate Debt - due 03/31/2030 - 4.950%	**	198
HSBC Holdings PLC	Corporate Debt - due 08/18/2031 - Variable	**	426
HSBC Holdings PLC	Corporate Debt - due 06/09/2028 - Variable	**	199
HSBC Holdings PLC	Corporate Debt - due 11/03/2033 - Variable	**	225
Hyundai Auto Receivables C A3	Corporate Debt - due 05/15/2029 - 4.410%	**	479
Imperial Brands Finance PLC 144A	Corporate Debt - due 07/26/2026 - 3.500%	**	294
Imperial Brands Finance PLC 144A	Corporate Debt - due 07/26/2029 - 3.875%	**	732
Imperial Brands Finance PLC 144A	Corporate Debt - due 07/27/2027 - 6.125%	**	205
Imperial Brands Finance PLC 144A	Corporate Debt - due 02/01/2030 - 5.500%	**	202
Imperial Brands Finance PLC 144A	Corporate Debt - due 07/21/2025 - 4.250%	**	1,268
JPMorgan Chase & Co.	Corporate Debt - due 04/22/2031 - Variable	**	286
JPMorgan Chase & Co.	Corporate Debt - due 05/13/2031 - Variable	**	1,610

Kinder Morgan Energy Partners	Corporate Debt - due 09/01/2039 - 6.500%	**	261
Kinder Morgan Energy Partners	Corporate Debt - due 08/15/2042 - 5.000%	**	458
Lloyds Banking Group PLC	Corporate Debt - due 12/10/2025 - 4.582%	**	324
Lloyds Banking Group PLC	Corporate Debt - due 11/15/2033 - Variable	**	530
Lloyds Banking Group PLC	Corporate Debt - due 03/24/2026 - 4.650%	**	522
NatWest Group PLC	Corporate Debt - due 06/14/2027 - Variable	**	405
NatWest Group PLC	Corporate Debt - due 03/02/2034 - Variable	**	359
NatWest Group PLC	Corporate Debt - due 09/13/2029 - Variable	**	204
NatWest Group PLC	Corporate Debt - due 06/01/2034 - Variable	**	205
NatWest Group PLC	Corporate Debt - due 05/18/2029 - Variable	**	198
Nextera Energy Capital Holding	Corporate Debt - due 03/01/2025 - 6.051%	**	100
Nextera Energy Capital Holding	Corporate Debt - due 09/01/2025 - 5.749%	**	126
Nextera Energy Capital Holding	Corporate Debt - due 07/15/2027 - 4.625%	**	349
Nextera Energy Capital Holding	Corporate Debt - due 03/15/2029 - 4.900%	**	424
Nissan Auto Receivables 2 B A3	Corporate Debt - due 03/15/2029 - 4.340%	**	467
* Nordstrom, Inc.	Corporate Debt - due 03/15/2028 - 6.950%	**	274
Petroleos Mexicanos	Corporate Debt - due 06/15/2035 - 6.625%	**	551
Petroleos Mexicanos	Corporate Debt - due 02/16/2032 - 6.700%	**	1,049
Petroleos Mexicanos	Corporate Debt - due 01/23/2050 - 7.690%	**	1,905
Philip Morris International Inc.	Corporate Debt - due 11/17/2029 - 5.625%	**	77
Philip Morris International Inc.	Corporate Debt - due 11/17/2032 - 5.750%	**	88
Philip Morris International Inc.	Corporate Debt - due 02/15/2033 - 5.375%	**	200
Philip Morris International Inc.	Corporate Debt - due 02/13/2029 - 4.875%	**	100
Philip Morris International Inc.	Corporate Debt - due 02/13/2031 - 5.125%	**	75
Prosus N.V. 144A	Corporate Debt - due 07/06/2027 - 4.850%	**	637
Prosus N.V. 144A	Corporate Debt - due 01/21/2030 - 3.680%	**	632
Prosus N.V. 144A	Corporate Debt - due 07/13/2031 - 3.061%	**	1,029
Prosus N.V. 144A	Corporate Debt - due 01/19/2052 - 4.987%	**	488
Rio Oil Finance Trust Series 144A	Corporate Debt - due 01/06/2027 - 9.750%	**	286
Rio Oil Finance Trust Series 144A	Corporate Debt - due 04/06/2028 - 8.200%	**	511
RTX Corp.	Corporate Debt - due 03/15/2031 - 6.000%	**	157
RTX Corp.	Corporate Debt - due 03/15/2034 - 6.100%	**	158
SLM Student Loan Trust 20 3 A6	Corporate Debt - due 04/25/2040 - Variable	**	1,903
SLM Student Loan Trust 20 3 A6	Corporate Debt - due 01/25/2041 - Variable	**	2,562
SMB Private Education C A1A 144A	Corporate Debt - due 06/17/2052 - 5.500%	**	1,812
The Southern Co.	Corporate Debt - due 08/01/2027 - Variable	**	429
The Southern Co.	Corporate Debt - due 01/15/2051 - Variable	**	735
The Southern Co.	Corporate Debt - due 09/15/2051 - Variable	**	551
The Southern Co.	Corporate Debt - due 06/15/2028 - 4.850%	**	175
Telecom Italia Capital S.A.	Corporate Debt - due 06/04/2038 - 7.721%	**	186
Time Warner Cable LLC	Corporate Debt - due 07/01/2038 - 7.300%	**	331
T-Mobile USA, Inc.	Corporate Debt - due 04/15/2030 - 3.875%	**	400
T-Mobile USA, Inc.	Corporate Debt - due 02/15/2026 - 2.250%	**	316
T-Mobile USA, Inc.	Corporate Debt - due 04/15/2031 - 3.500%	**	681
Transcanada Trust	Corporate Debt - due 05/20/2075 - Variable	**	570
Transcanada Trust	Corporate Debt - due 08/15/2076 - Variable	**	493
Transcanada Trust	Corporate Debt - due 03/15/2077 - Variable	**	1,032
Transcanada Trust	Corporate Debt - due 09/15/2079 - Variable	**	577
UBS Group Ag 144A	Corporate Debt - due 09/22/2034 - Variable	**	471
UBS Group Ag 144A	Corporate Debt - due 01/12/2034 - Variable	**	767
Ultrapar International S.A. 144A	Corporate Debt - due 10/06/2026 - 5.250%	**	345
Unicredit S.P.A. 144A	Corporate Debt - due 04/02/2034 - Variable	**	888
Unicredit S.P.A. 144A	Corporate Debt - due 06/30/2035 - Variable	**	338
Union Pacific Railroad Co. 2006	Corporate Debt - due 07/02/2030 - 5.866%	**	194
VMware LLC	Corporate Debt - due 08/15/2026 - 1.400%	**	237

Wells Fargo & Co.	Corporate Debt - due 06/03/2026 - 4.100%	**	247
Wells Fargo & Co.	Corporate Debt - due 07/22/2027 - 4.300%	**	419
Wells Fargo & Co.	Corporate Debt - due 03/02/2033 - Variable	**	241
Wells Fargo & Co.	Corporate Debt - due 07/25/2033 - Variable	**	145
Wells Fargo & Co.	Corporate Debt - due 04/24/2034 - Variable	**	223
Wells Fargo & Co.	Corporate Debt - due 01/23/2030 - Variable	**	501
California State	Municipal Debt - due 10/01/2039 - 7.300%	**	655
Colombia Government International	Municipal Debt - due 02/26/2044 - 5.625%	**	386
Colombia Government International	Municipal Debt - due 11/07/2036 - 7.750%	**	513
Illinois State	Municipal Debt - due 06/01/2033 - 5.100%	**	905
New Jersey State Turnpike Authority	Municipal Debt - due 01/01/2041 - 7.102%	**	670
Citigroup Capital XIII	Preferred Stock - due 10/30/2040 - 10.919%	**	893
JPMorgan Chase & Co.	Preferred Stock - due 09/01/2030 - 8.750%	**	528
Vodafone Group PLC	Preferred Stock - due 04/04/2079 - Variable	**	614
FHLMC Multiclass Mtg 2957 VZ	U.S. Government Securities - due 02/15/2035 - 5.000%	**	168
FHLMC Multiclass Mtg 4283 EW	U.S. Government Securities - due 12/15/2043 - Variable	**	58
FHLMC Multiclass Mtg 4315 JZ	U.S. Government Securities - due 03/15/2044 - 3.500%	**	1,108
FHLMC Multiclass Mtg 4319 MA	U.S. Government Securities - due 03/15/2044 - Variable	**	107
FHLMC Multiclass Mtg 4440 ZD	U.S. Government Securities - due 02/15/2045 - 2.500%	**	2,131
FHLMC Pool #1H-2592	U.S. Government Securities - due 01/01/2036 - Variable	**	24
FHLMC Pool #78-1274	U.S. Government Securities - due 02/01/2034 - Variable	**	23
FHLMC Pool #84-0286	U.S. Government Securities - due 05/01/2046 - Variable	**	37
FHLMC Pool #84-1463	U.S. Government Securities - due 07/01/2052 - Variable	**	884
FHLMC Pool #84-9254	U.S. Government Securities - due 01/01/2042 - Variable	**	26
FHLMC Pool #84-9327	U.S. Government Securities - due 05/01/2044 - Variable	**	102
FHLMC Pool #84-9505	U.S. Government Securities - due 10/01/2044 - Variable	**	29
FHLMC Pool #84-9544	U.S. Government Securities - due 12/01/2044 - Variable	**	64
FHLMC Pool #84-9625	U.S. Government Securities - due 01/01/2045 - Variable	**	34
FHLMC Pool #84-9626	U.S. Government Securities - due 08/01/2044 - Variable	**	46
FHLMC Pool #84-9849	U.S. Government Securities - due 10/01/2045 - Variable	**	15
FHLMC Pool #C9-0981	U.S. Government Securities - due 07/01/2026 - 6.500%	**	11
FHLMC Pool #C9-1013	U.S. Government Securities - due 01/01/2027 - 6.500%	**	5
FHLMC Pool #G0-7600	U.S. Government Securities - due 03/01/2042 - 4.500%	**	92
FHLMC Pool #G0-8723	U.S. Government Securities - due 08/01/2046 - 4.000%	**	588
FHLMC Pool #G6-0153	U.S. Government Securities - due 10/01/2044 - 4.500%	**	57
FHLMC Pool #G6-0764	U.S. Government Securities - due 10/01/2042 - 4.500%	**	96
FHLMC Pool #G6-1080	U.S. Government Securities - due 03/01/2047 - 4.500%	**	590
FHLMC Pool #H0-1774	U.S. Government Securities - due 09/01/2037 - 6.500%	**	3
FHLMC Pool #H0-9197	U.S. Government Securities - due 10/01/2038 - 6.500%	**	6
FHLMC Pool #H0-9212	U.S. Government Securities - due 05/01/2038 - 5.500%	**	6
FHLMC Pool #Q0-3517	U.S. Government Securities - due 09/01/2041 - 4.500%	**	82
FHLMC Pool #QE-0768	U.S. Government Securities - due 04/01/2052 - 3.500%	**	511
FHLMC Pool #QE-7330	U.S. Government Securities - due 07/01/2052 - 3.500%	**	3,353
FHLMC Pool #RA-2958	U.S. Government Securities - due 07/01/2050 - 2.000%	**	1,064
FHLMC Pool #RA-3167	U.S. Government Securities - due 07/01/2050 - 2.000%	**	1,652
FHLMC Pool #RA-7063	U.S. Government Securities - due 04/01/2052 - 3.500%	**	1,737
FHLMC Pool #RA-7656	U.S. Government Securities - due 07/01/2052 - 3.500%	**	3,432
FHLMC Pool #RB-5141	U.S. Government Securities - due 01/01/2042 - 2.000%	**	758
FHLMC Pool #SD-0752	U.S. Government Securities - due 11/01/2051 - 2.500%	**	998
FHLMC Pool #SD-2253	U.S. Government Securities - due 12/01/2052 - 3.500%	**	470
FHLMC Pool #SD-7530	U.S. Government Securities - due 11/01/2050 - 2.500%	**	1,102
FHLMC Pool #SD-7536	U.S. Government Securities - due 02/01/2051 - 2.500%	**	595
FHLMC Pool #SD-8194	U.S. Government Securities - due 01/01/2052 - 2.500%	**	2,659
FHLMC Pool #SD-8214	U.S. Government Securities - due 05/01/2052 - 3.500%	**	2,126
FHLMC Pool #SD-8244	U.S. Government Securities - due 08/01/2052 - 4.000%	**	8,550

FHLMC Pool #SD-8255	U.S. Government Securities - due 10/01/2052 - 3.500%	**	3,134
FHLMC Pool #SD-8256	U.S. Government Securities - due 10/01/2052 - 4.000%	**	823
FHLMC Pool #SD-8275	U.S. Government Securities - due 12/01/2052 - 4.500%	**	653
FHLMC Pool #SI-2106	U.S. Government Securities - due 05/01/2051 - 2.500%	**	903
FNMA GTD Remic P/T 01-79 BA	U.S. Government Securities - due 03/25/2045 - 7.000%	**	8
FNMA GTD Remic P/T 01-T10 A1	U.S. Government Securities - due 12/25/2041 - 7.000%	**	67
FNMA GTD Remic P/T 04-W2 5A	U.S. Government Securities - due 03/25/2044 - 7.500%	**	48
FNMA GTD Remic P/T 07-50 DZ	U.S. Government Securities - due 06/25/2037 - 5.500%	**	135
FNMA GTD Remic P/T 07-W10 2A	U.S. Government Securities - due 08/25/2047 - Variable	**	44
FNMA GTD Remic P/T 12-46 BA	U.S. Government Securities - due 05/25/2042 - 6.000%	**	115
FNMA GTD Remic P/T 13-128 CF	U.S. Government Securities - due 12/25/2043 - Variable	**	271
FNMA GTD Remic P/T 14-61 ZV	U.S. Government Securities - due 10/25/2044 - 3.000%	**	1,159
FNMA Pool #0256851	U.S. Government Securities - due 08/01/2037 - 7.000%	**	10
FNMA Pool #0735503	U.S. Government Securities - due 04/01/2035 - 6.000%	**	31
FNMA Pool #0735608	U.S. Government Securities - due 03/01/2035 - Variable	**	29
FNMA Pool #0745329	U.S. Government Securities - due 07/01/2035 - 6.000%	**	46
FNMA Pool #0884704	U.S. Government Securities - due 06/01/2036 - Variable	**	11
FNMA Pool #0888154	U.S. Government Securities - due 11/01/2036 - Variable	**	43
FNMA Pool #0888367	U.S. Government Securities - due 03/01/2037 - 7.000%	**	83
FNMA Pool #0889984	U.S. Government Securities - due 10/01/2038 - 6.500%	**	35
FNMA Pool #0976853	U.S. Government Securities - due 11/01/2029 - 5.500%	**	17
FNMA Pool #0995487	U.S. Government Securities - due 08/01/2037 - 6.000%	**	56
FNMA Pool #0AB1763	U.S. Government Securities - due 11/01/2030 - 4.000%	**	20
FNMA Pool #0AB8086	U.S. Government Securities - due 10/01/2037 - 6.000%	**	12
FNMA Pool #0AD0121	U.S. Government Securities - due 09/01/2029 - 4.500%	**	58
FNMA Pool #0AD0130	U.S. Government Securities - due 08/01/2039 - 6.500%	**	9
FNMA Pool #0AD0198	U.S. Government Securities - due 09/01/2038 - 5.500%	**	24
FNMA Pool #0AD0217	U.S. Government Securities - due 08/01/2037 - 6.000%	**	53
FNMA Pool #0AD0218	U.S. Government Securities - due 09/01/2036 - 6.000%	**	48
FNMA Pool #0AD0964	U.S. Government Securities - due 11/01/2039 - 5.500%	**	116
FNMA Pool #0AL1845	U.S. Government Securities - due 06/01/2039 - Variable	**	10
FNMA Pool #0AL1900	U.S. Government Securities - due 08/01/2026 - 4.500%	**	6
FNMA Pool #0AL4577	U.S. Government Securities - due 01/01/2034 - 4.500%	**	70
FNMA Pool #0AL5145	U.S. Government Securities - due 10/01/2033 - 4.000%	**	121
FNMA Pool #0AL5749	U.S. Government Securities - due 07/01/2042 - 4.500%	**	91
FNMA Pool #0AL6120	U.S. Government Securities - due 11/01/2044 - Variable	**	168
FNMA Pool #0AL6132	U.S. Government Securities - due 03/01/2029 - 4.500%	**	4
FNMA Pool #0AL6245	U.S. Government Securities - due 01/01/2045 - Variable	**	70
FNMA Pool #0AL7205	U.S. Government Securities - due 12/01/2029 - 3.500%	**	68
FNMA Pool #0AL7384	U.S. Government Securities - due 09/01/2045 - 4.500%	**	77
FNMA Pool #0AL8556	U.S. Government Securities - due 08/01/2044 - 4.500%	**	408
FNMA Pool #0AL8816	U.S. Government Securities - due 09/01/2045 - 4.500%	**	104
FNMA Pool #0AL8919	U.S. Government Securities - due 07/01/2046 - Variable	**	19
FNMA Pool #0AL9407	U.S. Government Securities - due 09/01/2042 - 4.500%	**	44
FNMA Pool #0AL9781	U.S. Government Securities - due 02/01/2046 - 4.500%	**	153
FNMA Pool #0AO4105	U.S. Government Securities - due 06/01/2042 - Variable	**	15
FNMA Pool #0AO8469	U.S. Government Securities - due 05/01/2042 - Variable	**	4
FNMA Pool #0AP7562	U.S. Government Securities - due 09/01/2042 - Variable	**	29
FNMA Pool #0AW4697	U.S. Government Securities - due 05/01/2044 - Variable	**	12
FNMA Pool #0BF0118	U.S. Government Securities - due 06/01/2056 - 4.500%	**	229
FNMA Pool #0BH7071	U.S. Government Securities - due 12/01/2047 - 4.500%	**	138
FNMA Pool #0BM1357	U.S. Government Securities - due 01/01/2043 - 4.500%	**	210
FNMA Pool #0BM6149	U.S. Government Securities - due 10/01/2049 - Variable	**	138
FNMA Pool #0BM6908	U.S. Government Securities - due 04/01/2052 - Variable	**	765
FNMA Pool #0BM6921	U.S. Government Securities - due 05/01/2052 - Variable	**	1,285

FNMA Pool #0CA6271	U.S. Government Securities - due 07/01/2050 - 2.500%	**	2,278
FNMA Pool #0CA6398	U.S. Government Securities - due 07/01/2050 - 2.500%	**	861
FNMA Pool #0CA6662	U.S. Government Securities - due 08/01/2050 - 2.000%	**	1,804
FNMA Pool #0CA6925	U.S. Government Securities - due 09/01/2050 - 2.000%	**	892
FNMA Pool #0CA8099	U.S. Government Securities - due 12/01/2050 - 2.000%	**	1,451
FNMA Pool #0CA8847	U.S. Government Securities - due 02/01/2051 - 2.000%	**	1,457
FNMA Pool #0CB3576	U.S. Government Securities - due 05/01/2052 - 3.000%	**	2,687
FNMA Pool #0CB3841	U.S. Government Securities - due 06/01/2052 - 3.500%	**	1,519
FNMA Pool #0FM7599	U.S. Government Securities - due 01/01/2051 - 3.500%	**	1,607
FNMA Pool #0FM8206	U.S. Government Securities - due 08/01/2051 - 2.500%	**	294
FNMA Pool #0FM8768	U.S. Government Securities - due 02/01/2051 - 2.500%	**	240
FNMA Pool #0FS1453	U.S. Government Securities - due 04/01/2052 - 3.500%	**	2,496
FNMA Pool #0FS7754	U.S. Government Securities - due 07/01/2053 - 4.000%	**	356
FNMA Pool #0FS9506	U.S. Government Securities - due 12/01/2053 - 4.500%	**	1,691
FNMA Pool #0MA0232	U.S. Government Securities - due 11/01/2029 - 4.500%	**	69
FNMA Pool #0MA2366	U.S. Government Securities - due 08/01/2035 - 4.000%	**	89
FNMA Pool #0MA2455	U.S. Government Securities - due 11/01/2035 - 4.000%	**	173
FNMA Pool #0MA2480	U.S. Government Securities - due 12/01/2035 - 4.000%	**	99
FNMA Pool #0MA2880	U.S. Government Securities - due 01/01/2037 - 4.000%	**	490
FNMA Pool #0MA2923	U.S. Government Securities - due 03/01/2037 - 3.500%	**	220
FNMA Pool #0MA4492	U.S. Government Securities - due 11/01/2051 - 2.000%	**	680
FNMA Pool #0MA4600	U.S. Government Securities - due 03/01/2052 - 3.500%	**	601
FNMA Pool #0MA4654	U.S. Government Securities - due 06/01/2052 - 3.500%	**	1,379
FNMA Pool #0MA4700	U.S. Government Securities - due 07/01/2052 - 4.000%	**	399
FNMA Pool #0MA4933	U.S. Government Securities - due 01/01/2053 - 3.500%	**	538
GNMA GTD Remic P/T 15-H23 FA	U.S. Government Securities - due 09/20/2065 - Variable	**	312
GNMA GTD Remic P/T 16-H24 FD	U.S. Government Securities - due 11/20/2066 - Variable	**	561
GNMA GTD Remic P/T 17-H24 FQ	U.S. Government Securities - due 11/20/2067 - Variable	**	989
GNMA GTD Remic P/T 19-H02 FG	U.S. Government Securities - due 12/20/2068 - Variable	**	240
GNMA GTD Remic P/T 19-H17 FA	U.S. Government Securities - due 11/20/2069 - Variable	**	401
GNMA GTD Remic P/T 20-H01 FV	U.S. Government Securities - due 01/20/2070 - Variable	**	2,433
GNMA GTD Remic P/T 21-H19 FM	U.S. Government Securities - due 12/20/2071 - Variable	**	734
GNMA GTD Remic P/T 22-H08 FE	U.S. Government Securities - due 03/20/2072 - Variable	**	757
GNMA GTD Remic P/T 22-H09 FA	U.S. Government Securities - due 04/20/2072 - Variable	**	1,091
GNMA GTD Remic P/T 23-H04 FC	U.S. Government Securities - due 01/20/2073 - Variable	**	949
SBA GTD Partn Cfts 2006-20E 1	U.S. Government Securities - due 05/01/2026 - 5.870%	**	7
SBA GTD Partn Cfts 2007-20B 1	U.S. Government Securities - due 02/01/2027 - 5.490%	**	12
SBA GTD Partn Cfts 2007-20D 1	U.S. Government Securities - due 04/01/2027 - 5.320%	**	7
U.S. Treasury Bond	U.S. Government Securities - due 05/15/2052 - 2.875%	**	876
U.S. Treasury Bond	U.S. Government Securities - due 08/15/2052 - 3.000%	**	1,441
U.S. Treasury Bond	U.S. Government Securities - due 08/15/2042 - 3.375%	**	1,514
U.S. Treasury Bond	U.S. Government Securities - due 02/15/2053 - 3.625%	**	362
U.S. Treasury Bond	U.S. Government Securities - due 05/15/2053 - 3.625%	**	756
U.S. Treasury Bond	U.S. Government Securities - due 08/15/2053 - 4.125%	**	6,817
U.S. Treasury Bond	U.S. Government Securities - due 11/15/2053 - 4.750%	**	765
U.S. Treasury Bond	U.S. Government Securities - due 02/15/2054 - 4.250%	**	7,102
U.S. Treasury Bond	U.S. Government Securities - due 02/15/2044 - 4.500%	**	1,433
U.S. Treasury Bond	U.S. Government Securities - due 08/15/2044 - 4.125%	**	2,636
U.S. Treasury Bond	U.S. Government Securities - due 11/15/2054 - 4.500%	**	1,224
U.S. Treasury Bond	U.S. Government Securities - due 11/15/2044 - 4.625%	**	2,760
U.S. Treasury Note	U.S. Government Securities - due 08/31/2029 - 3.625%	**	892
U.S. Treasury Note	U.S. Government Securities - due 10/31/2031 - 4.125%	**	1,957
U.S. Treasury Note	U.S. Government Securities - due 12/31/2026 - 4.250%	**	1,763
U.S. Treasury Note - CPI Inflation	U.S. Government Securities - due 02/15/2053 - 1.500%	**	853

181,103

Dodge & Cox Stock Fund Class X	Mutual fund	**	384,070
Neuberger Berman Genesis Fund Class R-6	Mutual fund	**	204,143
			588,213
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Brokerage accounts	Self-directed brokerage accounts	**	53,767
			53,767
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			4,217,955
* Loans To Participants	Loan interest rates range from 4.25% to 9.5%		77,132
			\$4,295,087

* Party-in-interest

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