FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| Check this box if no longer subject | S |
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| to Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| ı | nd Address of Michael | Reporting Person* F | | | AB | ВОТ | T L | ABC | | ORI | ES [AB | Γ] | | | Relationship neck all app X Direc | , | ng Perso | on(s) to Is 10% Ov | |
|---|--|--|------------|---|--|--------------------------------------|--|-----------------|--|--------------------|---|---|-----------------------|---|--|--|------------------------------|---|-----------|
| (Last) | (Fir | est) (N | /liddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 04/28/2023 | | | | | | | | Office below | er (give title v) | | Other (s below) | specify | | |
| 100 ABI | BOTT PARI | X ROAD | | | 4. If A | Amend | ment, | Date o | f Origina | al Filed | d (Month/Da | ıy/Year | -) | 6. I Lin | | Joint/Grou | p Filing | (Check A | pplicable |
| (Street) | | | | | | | | | | | | | | | X Form | filed by On | e Repor | rting Perso | on |
| ABBOT PARK | T IL | 6 | 0064 | | | | | | | | | | | | Form Perso | filed by Mo on | re than | One Repo | orting |
| - | | | | | Rul | ule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | |
| (City) | (St | ate) (Z | Zip) | | Check this box to indicate that a transaction was made pursuant to a cosatisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruc | | | | | | | | | uction or writt | en plan | that is inter | nded to | | |
| | | Table | I - Non-De | eriva | tive S | Secu | rities | Acq | uired, | Dis | posed of | , or I | 3en | eficia | ally Own | ed | | | |
| Da | | | | е | th/Day/Year) if ar | | a. Deemed secution Date, any onth/Day/Year) | | Transaction Disposed C Code (Instr. 5) | | es Acquired (A) Of (D) (Instr. 3, 4 | | (A) or 3, 4 ar | nd Securit Benefic Owned | ties cially Following | 6. Own Form: (D) or I (I) (Inst | Direct Indirect tr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | Code | v | Amount | (A) (D) | or | Price | | ted action(s) 3 and 4) | | | (Instr. 4) | | |
| Common shares without par value 04/28 | | | | | 2023 | | | Α | | 1,816(1) | A \$0 | | 4,977(2) | |] | D | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date Exercise (Month/Day/Year) Outline of the control of the contr | | rative rities pired r osed) | Expiration Date (Month/Day/Year) Amor Secu Unde Deriv | | | | unt of rities rlying (I ative rity (Instr. | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | y O Fo O (I) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | Date Exercis | able | Expiration Date | | | nber | | | | | | |

Explanation of Responses:

- 1. These are restricted stock units awarded under the Abbott Laboratories 2017 Incentive Stock Program (the "Program"). They will be paid, on a one-to-one basis, in Abbott common shares on the earlier of the date of the director's separation from service, death, or the occurrence of a change in control (as defined in the Program).
- 2. Includes 60 shares that were acquired before Mr. Roman became an Abbott director and were not previously reported.

/s/ Michael F. Roman by

Jessica H. Paik, Attorney-in-05/02/2023

Fact

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.