FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
- 1	hours nor roomanas:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

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

1. Name and Address of Reporting Person*  Boudreau Philip P  (Last) (First) (Middle)  100 ABBOTT PARK ROAD  (Street)  ABBOTT PARK IL 60064						2. Issuer Name and Ticker or Trading Symbol ABBOTT LABORATORIES [ ABT ]  3. Date of Earliest Transaction (Month/Day/Year) 02/17/2023  4. If Amendment, Date of Original Filed (Month/Day/Year)								(Chec	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  VICE PRESIDENT  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
(City) (State) (Zip)																				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					saction	ction 2A. Deemed Execution Date,			3. Transa Code (	ction	4. Securit	ties Acquir I Of (D) (In:	ed (A)	or 5. Amou 4 and Securitie Benefici Owned F		nt of s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A) (D)	r Pr	rice	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)				
Common	7/202	2023		A		4,855	4,855 <sup>(1)</sup> A		\$ <mark>0</mark>	24,	24,924		D							
Common shares without par value														346(2)			I	Profit Sharing Trust		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	Date,	4. Transa Code ( 8)				6. Date Exercis: Expiration Date (Month/Day/Yea		)	7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		rity	. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e O S Fe Illy O O (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	Code	e V	(A)	(D)	Date Exercisab		Expiration Date	Title	Amo or Num of Shar	nber						
Option (right to buy) <sup>(3)</sup>	\$106.24	02/17/2023			A		19,149		02/17/202	24 0	02/16/2033	Common Shares	19,	149	\$0	19,149	9	D		

## **Explanation of Responses:**

- 1. These shares represent a performance-based restricted stock award under the Abbott Laboratories 2017 Incentive Stock Program. The award has a 3-year term, with no more than 1/3 of the award vesting in any one year upon Abbott reaching a minimum return on equity target. The award includes the right to have shares withheld for tax purposes.
- 2. Balance in the Abbott Laboratories Stock Retirement Trust as of February 17, 2023.
- 3. Employee stock option granted pursuant to the Abbott Laboratories 2017 Incentive Stock Program in a transaction exempt from Section 16 under Rule 16b-3. The option becomes exercisable in annual increments of 6,383 on February 17, 2024, 6,383 on February 17, 2025, and 6,383 on February 17, 2026.

/s/ Philip P. Boudreau, by

Jessica H. Paik, Attorney-in-

Fact

\*\* Signature of Reporting Person Date

02/22/2023

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

- $^{\star}$  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.