FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL											
l	OMB Number:	3235-0287										
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l	hours per response:	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*							2. Issuer Name and Ticker or Trading Symbol ABBOTT LABORATORIES [ABT]								of Reporting able) r	g Person	10% Ow	ner	
(Last) (First) (Middle) 100 ABBOTT PARK ROAD						3. Date of Earliest Transaction (Month/Day/Year) 10/26/2009								X Officer (give title Other (specify below) Senior Vice President					
(Street) ABBOTT PARK IL 60064-6400					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City) (State) (Zip)														Person					
			ole I - No						_	l, Dis	sposed of								
Date					nsaction h/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			Benefici Owned F	es ally Following	6. Owne Form: D (D) or In (I) (Instr	irect Ir direct B . 4) C	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			(1	nstr. 4)	
Common shares without par value 10/26/2						2009			M		1,594	A	\$41.031	.7 84,	84,201				
Common shares without par value 10/26/2					5/2009	:009		F		1,416	D	\$51.31	. 82,	82,785					
Common shares without par value												13,629(1)		I	S	Profit Sharing Trust			
			Table II								osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	Code (Ins				6. Date Exerci Expiration Dat (Month/Day/Ye		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	Of For Direction (I)	o. wnership orm: irect (D) r Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		Transaction (Instr. 4)	on(s)			
Option (right to buy) ⁽²⁾	\$41.0317	10/26/2009			M			1,594	02/20/2	2007	02/19/2014	Common Shares	1,594	\$0	0		D		
Option (right to buy) ⁽³⁾	\$51.31	10/26/2009			A		1,416		04/27/2	2010	02/19/2014	Common Shares	1,416	\$0	1,416		D		

Explanation of Responses:

- 1. Balance in the Abbott Laboratories Stock Retirement Trust as of October 26, 2009.
- 2. Employee stock option granted pursuant to the Abbott Laboratories 1996 Incentive Stock Program, including a replacement option feature, in a transaction exempt from Section 16 under Rule 16b-3.
- 3. Employee stock option granted pursuant to the Abbott Laboratories 2009 Incentive Stock Program, including a replacement option feature, in a transaction exempt from Section 16 under Rule 16b-3.

Remarks:

 $These \ transactions \ were \ made \ pursuant \ to \ a \ previously \ adopted \ plan \ complying \ with \ Rule \ 10b5-1(c).$

John A. Berry, by power of attorney for Donald V. Patton
Jr.

** Signature of Reporting Person

10/28/2009

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.