FORM 4

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | DC | 205/19 |
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| vvasiliilytuii, | D.C. | 20049 |

| Check this box if no longer subject to Section 16. Form 4 or Form 5 | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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| | |

OMB APPROVAL

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

| Name and Address of Reporting Person* Ford Robert B | | | | | 2. Issuer Name and Ticker or Trading Symbol ABBOTT LABORATORIES [ABT] | | | | | | | | | | Check a | II app Direct | ship of Reporting applicable) irector fficer (give title | | Person(s) to Issuer 10% Owner Other (specify | |
|---|---|----|---------------|--|--|---|---|--------------------------------------|--------|--|---|------------------------|---|--|---|---|---|---|--|--|
| (Last) 100 ABE | Last) (First) (Middle) .00 ABBOTT PARK ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/27/2015 | | | | | | | | | | below) | | ce Pre | below) e President | |
| (Street) ABBOT | ΓPARK IL | | 50064 Zip) | | 4. If | | | | | | | . Individ ine) X | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (0.9) | | | | n-Deriv | ative | Se | curitie | s Acc | uired. | Dis | posed o | of. OI | . Ben | eficia | ally O | wne | d | | | |
| | | | 0.1.101 | | | | | | 1 | | - | | | | | | | | | |
| I | | | Date | Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) Of (D) (Instr. 3, 4 | | | and Se Be Ov | | Amount of curities eneficially vned Following eported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | v | Amount | | (A) or (D) | Price | , т | ransa | ransaction(s) nstr. 3 and 4) | | | (1130.1.4) | |
| Common shares without par value | | | 02/27 | 7/2015 | | | | F | F 3,68 | | D \$4 | | \$47 | 7.61 83,567 | | 3,567 | | D | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | | ned | | | | |
| 1. Title of Derivative Security (Instr. 3) | tive Conversion Date Execution Date, ty or Exercise (Month/Day/Year) if any | | Date, | Transaction Code (Instr. 8) Se Ad (A) Di of (In an | | | ative rities ired osed . 3, 4 | 6. Date E Expiratio (Month/D | n Date | е | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Number of Shares | | ount | 8. Pric Deriva Securi (Instr. | tive ty 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ov Fo Di or (I) |). wnership orm: irect (D) i Indirect (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

John A. Berry, by power of attorney for Robert B. Ford

03/03/2015

** 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.