FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| | | |

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

| 1. Name and Address of Reporting Person* <u>Landgraf John C</u> | | | | 2. Issuer Name and Ticker or Trading Symbol ABBOTT LABORATORIES [ABT] | | | | | | | | | | | | all app | olicable) ctor | g Person(s) to I | Owner | |
|--|---|--------------------------------------|------------|---|---|--------|---|---|-----------------------|---|--------------|--|-------|---|--|---|--|---|--|----------------------------|
| (Last) 100 ABB | ISD (EIISD (MIGGIE) I | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/01/2005 | | | | | | | | | | X | Officer (give title Other (sp below) Senior Vice President | | | | |
| (Street) ABBOTT PARK IL 60064-6400 | | | 4. If | 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) | (St | ate) (| Zip) | | | | | | | | | | | | | | Pers | on | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | , Tra | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | | 4 and Se Be Ov | | ount of ties cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Cod | le V | A | Amount (A | | (A) or (D) | Price | . 11 | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | | |
| Common Shares without par value | | | | 11/01/2005 | | 5 | | | F | | 3,4 | | | D | \$43 | | 61,465 | | D | |
| Common Shares without par value | | | | | | | | | | | | | | | | 20 |),000(1) | I | Anne Marie Landgraf Living Trust | |
| Common Shares without par value | | | | | | | | | | | | | | | | | 14,661(2) | | I | Profit Sharing Trust |
| Common Shares without par value | | | | | | | | | | | | | | | | 847(3) | | 47 ⁽³⁾⁽⁴⁾ | I | By self for son |
| | | Та | ble II - C | erivati | | | | | | | | | | | | y Ow | ned | | | |
| 1. Title of Derivative Security (Instr. 3) | Title of 2. 3. Transaction 3A. Deemed 4. Execution Date Execution Date, If any Code | | | | Transa Code (8) | (Instr | n of Der Sec Acc (A) Dis of (| oosed D) tr. 3, 4 | 6. Date Expira (Monti | tion Da h/Day/\ | ate Year) | the and 7. Title and Amount of Securities Underlying Derivative Security (Instiand 4) Amount of Amount of Amount of Numb of | | ount nber | 8. Price Derive Secur (Instr. | ative ity | 9. Number o derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

- 1. Held in the Anne Marie Landgraf Living Trust. The reporting person and his spouse are co-trustees of the trust. The trust is revocable by his spouse
- 2. Balance in the Abbott Laboratories Stock Retirement Trust as of November 1, 2005.
- 3. Includes shares acquired under the Abbott Laboratories Dividend Reinvestment and Stock Purchase Plan in transactions exempt from Section 16 under Rule 16(a)-11.
- 4. Reporting person disclaims beneficial ownership of all securities held by son.

John A. Berry, by power of attorney for John C. Landgraf

11/03/2005

** 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.