FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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

1. Name and Address of Reporting Person* <u>LIEPMANN HOLGER A</u>						2. Issuer Name and Ticker or Trading Symbol ABBOTT LABORATORIES [ABT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last)	(F BOTT PARI	irst) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/30/2006								X Officer (give title below) Other (specify below) Executive Vice President				
(Street) ABBOTT PARK IL 60064-6400				400	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	X Form filed by One Rep Form filed by More tha			rting Person	
(City) (State) (Zip)				ip)		Person												
		Та	ble I - N	on-De	rivati	ve S	ecuriti	es Ac	quire	d, Dis	sposed of	, or Ben	eficially	Owned				
1. Title of Security (Instr. 3)				Date	2. Transaction Date (Month/Day/Ye		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5. Amour Securitie Beneficia Owned F Reported	s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) or (D)	Price	Transacti	Transaction(s) (Instr. 3 and 4)			Instr. 4)	
Common shares without par value				06/30/2006		6			M		20,459	A	\$33.231	4 124	124,537		D	
Common shares without par value				06/30/2006					F		17,395	D	\$42.9	107	,142		D	
Common shares without par value													13,3	13,352(1)		I s	Profit sharing rust	
Common shares without par value													295(2)			I f	By wife for laughter	
Common shares without par value													296(2)			I f	By wife for laughter	
			Table II								oosed of, o			Owned		,		Α.
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	ed Date,	4. Transa Code (5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day)		cisable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Followin Reported	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares		Transact (Instr. 4)			
Option (right to buy) ⁽³⁾	\$33.2314	06/30/2006			M			17,409	02/14	4/2006	02/13/2013	Common shares	17,409	\$0	822	2	D	
Option (right to buy) ⁽³⁾	\$42.9	06/30/2006					15,033 12/31/2006 02/13/2013 Common shares 15,033 \$0 1		15,03	33	D							
Option (right to buy) ⁽³⁾	\$33.2314	06/30/2006			M		3,050		02/14/2006		02/13/2013	Common shares	3,050	\$0	0		D	
Option (right to buy) ⁽³⁾	\$42.9	06/30/2006			A		2,362		12/31	1/2006	02/13/2013	Common shares	2,362	\$0	2,36	2	D	

Explanation of Responses:

- 1. Balance in the Abbott Laboratories Stock Retirement Trust as of July 3, 2006
- 2. Reporting person disclaims beneficial ownership of shares held by his daughters.
- 3. Employee stock options granted pursuant to the Abbott Laboratories 1996 Incentive Stock Program, including a replacement option feature, in a transaction exempt from Section 16(b) under Rule 16b-3.

John A. Berry, Attorney-in-Fact for Holger A. Liepmann

07/05/2006

** 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.