FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## 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*						2. Issuer Name and Ticker or Trading Symbol ABBOTT LABORATORIES [ ABT ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner				
(Last) (First) (Middle) 100 ABBOTT PARK ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/01/2005									below	Officer (give title below)  Senior Vice I		Other ( below) resident	specify
(Street) ABBOTT PARK IL 60064-6400					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)																			
			le I - No			_			_	Dis					-			1	
1. Title of Security (Instr. 3)  2. Transa Date (Month/Date)						ar)   i	Execution if any	A. Deemed xecution Date, any lonth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			5. Amo Securit Benefic Owned Report	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A)	or I	Price	Transa	action(s) 3 and 4)			(Instr. 4)
Common shares without par value 05/01					L/2005	2005		A <sup>(1)</sup>		14,10	00 A		\$48.60	6 60	66,603		D		
Common shares without par value														1,	1,087(2)		I	Profit Sharing Trust	
		Т	able II -						uired, D s, optior						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transactio Code (Insti 8)		n of l		Expiration	6. Date Exercisa Expiration Date (Month/Day/Yea		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		expiration vate	Title	or Nui of	ount mber ares					
Option (right to buy) <sup>(3)</sup>	\$48.66	05/01/2005			A		9,667		05/01/200	06 0	4/30/2015	commo shares	9,	667	\$0	9,667		D	
Option (right to buy) <sup>(3)</sup>	\$48.66	05/01/2005			A		9,667		05/01/200	07 0	4/30/2015	commo shares	9,	667	\$0	9,667		D	
Option (right to	\$48.66	05/01/2005			Λ		0.666		05/01/200	18 0	4/30/2015	commo	1 0	666	<b>\$</b> 0	0.666		D	

## **Explanation of Responses:**

buy)<sup>(3)</sup>

- 1. These shares represent a restricted stock award under the Abbott Laboratories 1996 Incentive Stock Program in a transaction exempt from Section 16(b) under Rule 16b-3. The award includes the right to have stock withheld for tax purposes.
- 2. Balance in the Abbott Laboratories Stock Retirement Trust as of April 29, 2005.
- 3. 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.

John A. Berry, by power of attorney for James L. Tyree

05/03/2005

\*\* 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.