## FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

**OMB APPROVAL** 3235-0287 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 <b>and</b> Ticker or Trading Symbol ABBOTT LABORATORIES [ ABT ]								Relationship Check all app	icable) or	g Pers	10% Ow	vner	
(Last) 100 ABE	(F BOTT PARI	irst) K ROAD	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/09/2009									Officer (give title Othbelow) below  Senior Vice President			r (specify v)
(Street) ABBOTT PARK IL 60064-6400			4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting				.		
(City)	(S	tate)	(Zip)											Perso	on			
		Tal	ole I - No	n-Deriv	vativ	e Se	ecuritie	es Acc	quired	l, Dis	sposed o	f, or Ber	neficia	ally Owne	d			
Da		2. Transaction Date (Month/Day/Year)		r) E	2A. Deemed Execution Date, if any (Month/Day/Year)				s Acquired (A) or Of (D) (Instr. 3, 4 and 5)		5) Securi Benefi	5. Amount of Securities Beneficially Owned Following		: Direct   II	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price	Report Transa (Instr.	ed ction(s) 3 and 4)			Instr. 4)		
Common	mmon shares without par value		02/09/	02/09/2009		19		M		7,198	A	\$45.4	488 8	3,317	317			
Common	shares with	out par value		02/09/	/2009				F		6,057	D	\$57.	15 8	2,260	D		
Common shares without par value											17	17,871(1)		I s	Profit sharing rust			
Common shares without par value												23,798(2)			I I	By wife		
Common shares without par value											610 <sup>(2)</sup>				By laughter			
			Table II								osed of, convertib					•		
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	if any	ecution Date, Tra		sansaction Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		tive ities red (A) posed (Instr.	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price o Derivative Security (Instr. 5)		e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v			Date Exercisable		Expiration Date	Title	Amour or Number of Shares	er	(Instr. 4)	on(s)		
Option (right to buy) <sup>(3)</sup>	\$45.4488	02/09/2009			М			2,200	02/09/2	2004	02/08/2011	Common shares	2,200	\$0	0		D	
Option (right to buy) <sup>(3)</sup>	\$45.4488	02/09/2009			M			4,998	02/09/2	2002	02/08/2011	Common shares	4,998	8 \$0	33,52	6	D	
Option (right to buy) <sup>(3)</sup>	\$57.15	02/09/2009			A		6,057		08/10/2	2009	02/08/2011	Common shares	6,05	7 \$0	6,057	7	D	

## **Explanation of Responses:**

- 1. Balance in the Abbott Laboratories Stock Retirement Trust as of February 9, 2009.
- $2. \ The \ reporting \ person \ disclaims \ beneficial \ ownership \ of \ all \ securities \ held \ by \ his \ wife \ and \ daughter.$
- 3. Employee stock option, including replacement option feature, granted pursuant to the Abbott Laboratories 1996 Incentive Stock Program 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 Thomas F. Chen

02/11/2009

\*\* 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.