## 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).	STAT
Name and Address of Reporting Per	son*

## **EMENT 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>ALLEN HUBERT L</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol ABBOTT LABORATORIES [ ABT ]										Check all D	ship of Reportir applicable) rector fficer (give title	ng Perso	Person(s) to Issuer  10% Owner  Other (specify	
(Last) (First) (Middle) 100 ABBOTT PARK ROAD					3. Date of Earliest Transaction (Month/Day/Year) 02/27/2015										A b	Executive V	Vice Pr	below) ice President	
(Street) ABBOTT PARK IL 60064 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										S. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - Non	-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	eficia	ally Ov	ned			
1. Title of Security (Instr. 3)  2. Trans Date (Month/						2A. Deemed Execution Da if any (Month/Day/Y			, Transaction Disposed Code (Instr. 5)			rities Acquired (A) ed Of (D) (Instr. 3, 4			nd Se Be Ov	Amount of curities neficially ned Following ported	Form: (D) or	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	() (I	A) or O)	Price	Tra	nsaction(s) str. 3 and 4)			(111501.4)
Common shares without par value					02/27/2015				F		7,113	3 D \$		\$47	.61	67,168		D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	cution Date, 19 C nth/Day/Year) 8		ransaction (code (Instr. I		mber rative rities ired rosed ) . 3, 4 5)			е	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amount or Numbe of Title Shares		ount nber	8. Price Derivati Security (Instr. 5)		Ov Fo Dii or (I)	wnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

**Explanation of Responses:** 

John A. Berry, by power of attorney for Hubert L. Allen

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.