FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	vvasimigton, 2.0. 20040	
STATEMENT	OF CHANGES IN BENEFICIAL	OWNERSHIP

l	UNID APPR	UVAL
	OMB Number:	3235-0287
l	Estimated average bure	den

hours per response:

0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Sec	tion 30(h) of the In	vestme	nt Cor	npany Act of	1940							
1. Name and Address of Reporting Person* <u>LINDER GREG W</u>						r Name and Ticke			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
					l				Director			10% Ow	ner				
<i>"</i> "		-·	(0.00.1.11.)		3. Date	of Earliest Transac	av/Year)	− X	Officer (below)	give title		Other (sp below)	pecify				
(Last) (First) (Middle) 100 ABBOTT PARK ROAD						2008	, ,		Vice President								
1001122		1110112															
(Street)						endment, Date of	(Month/Day/`	6. Inc Line)	6. Individual or Joint/Group Filing (Check Applicable Line)								
ABBOT	ΓPARK II	L	60064-6400)							X	X Form filed by One Reporting Person					
												Form filed by More than One Reporting					
(City)	(5	State)	(Zip)			Person											
		Та	ıble I - Non	-Deriva	ative S	ecurities Acq	uired,	Dis	posed of,	or Bene	eficially	Owned					
Date			2. Transa Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Disposed O			and 5) Securities Beneficially Owned Follow		6. Owne Form: D (D) or In (I) (Instr	Direct III Indirect E	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 ar			"	nstr. 4)		
Common	shares witl	hout par value		08/06/	/2008		М		15,473	A	\$46.65	46.65 163,985 D					
Common shares without par value 08/06.					/2008		F		13,548	D	\$58.71	150,	437	Г			
Common shares without par value												12,628(1)		I	5	Profit Sharing Trust	
						curities Acqui						Owned					
				nsaction de (Instr.	5. Number of Derivative Securities Acquired (A) or	6. Date Expirati (Month/	ion Da		7. Title and of Securiti Underlying Derivative	es J	Derivative derivative Security Securities			0. Ownership orm: Direct (D)	11. Nature of Indirect Beneficial Ownership		

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		Derivative Expiration Date (Month/Day/Year) Acquired (A) or		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Option (right to buy) ⁽²⁾	\$46.65	08/06/2008		М			15,473	09/09/2005	02/13/2013	Common Shares	15,473	\$0	0	D	
Option (right to buy) ⁽²⁾	\$58.71	08/06/2008		A		13,548		02/07/2009	02/13/2013	Common Shares	13,548	\$0	13,548	D	

Explanation of Responses:

- 1. Balance in the Abbott Laboratories Stock Retirement Trust as of August 5, 2008.
- 2. 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.

Remarks:

These transactions were made pursuant to a previously adopted plan complying with Rule 10b5-1(c). The plan was adopted on February 8, 2008.

John A. Berry, by power of attorney for Greg W. Linder

08/08/2008

** 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.