

ABBOTT LABORATORIES  
Form 3  
October 19, 2009

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Â ALBAN CARLOS</p> <p>(Last) (First) (Middle)</p> <p>100 ABBOTT PARK ROAD</p> <p>(Street)</p> <p>ABBOTT PARK,Â ILÂ 60064</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>10/15/2009</p>	<p>3. Issuer Name <b>and</b> Ticker or Trading Symbol</p> <p>ABBOTT LABORATORIES [ABT]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner</p> <p><input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other</p> <p>(give title below) (specify below)</p> <p>Senior Vice President</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person</p> <p><input type="checkbox"/> Form filed by More than One Reporting Person</p>
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**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common shares without par value	26,107	D	Â
Common shares without par value	627 <sup>(1)</sup>	I	Profit Sharing Trust (US)
Common shares without par value	128 <sup>(1)</sup>	I	Profit Sharing Trust (Puerto Rico)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**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 control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership
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	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	(Instr. 5)
Option (right to buy) <sup>(2)</sup>	02/20/2010	02/19/2019	Common shares	5,900	\$ 54.14	D	Â
Option (right to buy) <sup>(2)</sup>	02/20/2011	02/19/2019	Common shares	5,900	\$ 54.14	D	Â
Option (right to buy) <sup>(2)</sup>	02/20/2012	02/19/2019	Common shares	5,900	\$ 54.14	D	Â
Option (right to buy) <sup>(2)</sup>	02/16/2008	02/15/2017	Common shares	11,900	\$ 52.54	D	Â
Option (right to buy) <sup>(2)</sup>	02/16/2009	02/15/2017	Common shares	11,900	\$ 52.54	D	Â
Option (right to buy) <sup>(2)</sup>	02/15/2009	02/14/2018	Common shares	11,300	\$ 55.56	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
ALBAN CARLOS 100 ABBOTT PARK ROAD ABBOTT PARK, IL 60064	Â	Â	Â Senior Vice President	Â

## Signatures

John A. Berry, by power of attorney for Carlos Alban  
 10/19/2009  
 \*\*Signature of Reporting Person Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) Balance in the Abbott Laboratories Stock Retirement Trust as of October 14, 2009.
- (2) Employee stock option granted pursuant to the Abbott Laboratories 1996 Incentive Stock Program in a transaction exempt from Section 16 under Rule 16b-3.

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**Remarks:**  
 Form 2 of 2.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.