#### **ABBOTT LABORATORIES**

Form 4 April 26, 2005

#### FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

OMB 3235-0287 Number:

January 31, Expires: 2005

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

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

**SECURITIES** 

1(b).

(Print or Type Responses)

Check this box

if no longer

subject to

Section 16.

Form 4 or

obligations

may continue.

See Instruction

Form 5

(Time of Type I	(Csponses)										
1. Name and Address of Reporting Person * REYNOLDS W ANN			2. Issuer Name and Ticker or Trading Symbol ABBOTT LABORATORIES [ABT]					5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last) (First) (Middle)			3. Date of Earliest Transaction								
(2.65)			(Month/Day/Year)					_X_ Director 10% Owner Officer (give title below) Other (specify below)			
130 WEST 67TH STREET, APT. 21A			04/22/2005								
NEW YORI	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting					
NEW TOKI	X, IVI 10023							Person			
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)	any		emed on Date, if /Day/Year)	if TransactionAcqu Code Dispo		sposed of (D) sstr. 3, 4 and 5)  (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common shares without par value	04/22/2005			A	1,889 (1)	A	\$ 0	34,875	D		
Common shares without par value								1,625 (2) (3)	I	by husband's simplified employee plan	
Common shares without par								693 (2) (3)	I	by husband's IRA	

value

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

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SEC 1474

(9-02)

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)	4. Transactic Code (Instr. 8)		3	ate	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
REYNOLDS W ANN 130 WEST 67TH STREET APT. 21A NEW YORK, NY 10023	X						

### **Signatures**

John A. Berry, by power of attorney for W. Ann Reynolds 04/26/2005

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* 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).
- These are restricted stock units awarded under the Abbott Laboratories 1996 Incentive Stock Program (the "Program"). They will be paid (1) in Abbott common shares, on a one-to-one basis, on the earlier of the date on which the director terminates or retires from the Board, dies, or the occurrence of a change in control (as defined in the Program).
- (2) Includes shares acquired under the Abbott Laboratories Dividend Reinvestment and Stock Purchase Plan. These transactions were exempt from Section 16 under Rule 16a-11.

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(3) The reporting person disclaims beneficial ownership of all securities held by her husband.

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.