#### Edgar Filing: SMITHBURG WILLIAM D - Form 4

SMITHBURG Form 4 April 28, 200		D										
·									OMB A	PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation	er <b>STAT</b> 5. Filed J											
may contin See Instruct 1(b).	nue. Section I		Public Ut of the Inv	•	•			of 1935 or Section 40	on			
(Print or Type R	esponses)											
SMITHBURG WILLIAM D Sy			Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol ABBOTT LABORATORIES [ABT]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Che	eck all applicable)			
(Mc				(Month/Day/Year) 04/24/2009				_X_Director10% Owner Officer (give titleOther (specify below)below)				
Filed(Month				ndment, Date Original th/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
CHICAGO,	IL 60611							Person	viole than one R	eporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	curity (Month/Day/Year) Execution Date, if			3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ip 7. Nature of ct Indirect Beneficial Ownership (Instr. 4)		
Common shares without par value	04/24/2009			A <u>(1)</u>	2,465	A	\$ 0 (1)	51,271 <u>(2)</u>	D			
Common shares without par value								4,309 <u>(2)</u> <u>(3)</u>	I	By Eagle Pines		

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

Persons who respond to the collection of<br/>information contained in this form are not<br/>required to respond unless the formSEC 1474<br/>(9-02)

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# displays a currently valid OMB control number.

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title ( Derivati Security (Instr. 3)	ve Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4	<ul><li>8. Price of Derivative Security (Instr. 5)</li></ul>	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Amoun or Title Numbo of Shares	er	

### **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
SMITHBURG WILLIAM D 676 NORTH MICHIGAN SUITE 3860 CHICAGO, IL 60611	Х							
Signatures								
John A. Berry, by power of attorney for William D. Smithburg								

\*\*Signature of Reporting Person

/28/2009 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 2009 Incentive Stock Program (the "Program"). They will be paid,(1) on a one-to-one basis, in Abbott common shares on the earlier of the date of the director's separation from service, death, or the occurrence of a change in control (as defined in the Program).
- (2) Balances reflect a gift of 1,000 shares to Eagle Pines reported on a Form 5 filed February 26, 2009
- (3) Balance reflects the entire number of shares held by partnership. The reporting person disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest therein.

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.