Edgar Filing: AbbVie Inc. - Form 4

AbbVie Inc. Form 4												
July 02, 2015	1									PPROVA	۸L	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									N OMB Number:	3235	0287	
Check this be if no longer subject to Section 16. Form 4 or Form 5 obligations may continue <i>See</i> Instruction 1(b).	STATEN Filed put e. Section 17(STATEMENT OF CHANGES IN 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									ry 31, 2005 0.5	
(Print or Type Resp	ponses)											
1. Name and Address of Reporting Person <u>*</u> Alpern Robert J			2. Issuer Name and Ticker or Trading Symbol AbbVie Inc. [ABBV]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) ((Middle) 3. Date of Earliest Transaction (Month/Day/Year)						(Check all applicable)				
1 N. WAUKEGAN ROAD			06/30/2015					Officer (give title Other (specify below)				
NORTH CHIC	Amendment, Date Original (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 Person 							
(City)	(State)	(Zip)	Tab	ole I - Non-	Deriva	tive S	Securities A	cquired, Disposed	of, or Beneficia	ally Owne	d	
	Fransaction Date onth/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8) Code V	Dispc (Instr	ired (osed c . 3, 4	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 Indirect Beneficia Ownersh (Instr. 4)	al ip	
Reminder: Report	on a separate line	e for each cl	ass of sec	urities bene	Pe inf red dis	ersor form quire	as who res ation cont ed to respo /s a curre	or indirectly. spond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	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	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	Deriva
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Securi
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securities			(Instr.

	Derivative Security			(A Di of (In	cquired A) or isposed f (D) nstr. 3, 4 nd 5)	ŀ,				
			Code	V (.	(A) (D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Equivalent Units	\$ 0 <u>(1)</u>	06/30/2015	А	1	17	<u>(1)</u>	(1)	Common Stock	117	\$ 67

Reporting Owners

Reporting Owner Name / Address		Relationsh						
	Director	10% Owner	Officer	Other				
Alpern Robert J 1 N. WAUKEGAN ROAD NORTH CHICAGO, IL 60064	Х							
Signatures								
Steven L. Scrogham, attorney-i Alpern	Robert J.		07/02/2015					
<u>**</u> Signature of Reportin			Date					
Explanation of Da	onon	0001						

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).

Director fees credited to stock equivalent unit accounts under grantor trusts established by the director at Abbott Laboratories and AbbVie. The stock equivalent units in the Abbott account will be paid, in cash, generally at age 65 or upon retirement from Abbott's

- Abbvie. The stock equivalent units in the Abbvie account will be paid, in cash, generally at age 05 of upon retirement from Abbvie's board, and the stock equivalent units in the AbbVie account will be paid, in cash, generally at age 65 or upon retirement from AbbVie's board. The stock equivalent units in each account earn the same return as if the fees were invested in AbbVie stock.
- (2) Balance includes stock equivalent units acquired pursuant to a dividend reinvestment feature.

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.