Edgar Filing: AbbVie Inc. - Form 4

AbbVie Inc.												
Form 4 July 02, 2015												
FORM 4	l									PPROVAL		
	UNITED	STATES		RITIES A				E COMMISSIO	N OMB Number:	3235-028	87	
Check this bo if no longer subject to Section 16. Form 4 or Form 5	STATEM	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								Expires:January 3Estimated averageburden hours perresponse0.		
obligations may continue. <i>See</i> Instruction 1(b).	Section 17(a) of the l	Public U		lding	Con	npany Act	of 1935 or Secti				
(Print or Type Respo	onses)											
1. Name and Addre LIDDY EDWA	2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer						
			AbbVie Inc. [ABBV]					(Check all applicable)				
(Last) (First) (Middle) 1 N. WAUKEGAN ROAD			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2015					X_ Director 10% Owner Officer (give title Other (specify below) below)				
	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 						
NORTH CHICA	AGO, IL 600	64						Person	wore than one R	eporting		
(City)	(State)	(Zip)	Tab	le I - Non-l	Deriva	ative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
	ransaction Date nth/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8)	onAcqu Disp (Inst	bosed 6 tr. 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 of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Report o	n a separate line	e for each cl	ass of sec	urities bene		-	-	-	ation of a	NEC 1474		
					ir re d	nform equire	ation con ed to resp ys a curre	spond to the colle tained 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				Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)						
			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		513		(1)	<u>(1)</u>	Common stock	513	\$ 67

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips	
	Director	10% Owner	Officer	Other
LIDDY EDWARD M 1 N. WAUKEGAN ROAD NORTH CHICAGO, IL 60064	Х			
Signatures				
Steven L. Scrogham, attorney-in Liddy		07/02/2015		
<u>**</u> Signature of Reportin		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).

Director fees credited to stock equivalent unit accounts 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 board, and the stock

- (1) equivalent units in the Abbott account will be paid, in cash, generally at age 65 or 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 equivalent 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.