AbbVie Inc. Form 4 May 21, 2015

# FORM 4

### **OMB APPROVAL**

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

OMB 3235-0287 Number:

January 31,

2005

Check this box if no longer subject to Section 16. Form 4 or

Expires:

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#### 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

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

Form 5

obligations

(Print or Type Responses)

1. Name and Address of Reporting Person * HURWICH THOMAS A.			2. Issuer Name <b>and</b> Ticker or Trading Symbol AbbVie Inc. [ABBV]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last) (First) (Middle)		(Middle)	3. Date of Earliest Transaction	(check all applicable)		
1 N. WAUKEGAN ROAD		)	(Month/Day/Year) 05/19/2015	Director 10% OwnerX_ Officer (give title Other (specify below)  VP, Controller		
(Street)			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 Person		
NORTH CHICAGO, IL 60064						

(City)	(State)	(Zip) Tab	le I - Non-	Derivative	e Secu	rities Acqui	red, Disposed of,	or Beneficial	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	(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 stock, \$0.01 par value	05/19/2015		Code V  M	Amount 6,200	(D)	Price \$ 22.9407	74,660	D	
Common stock, \$0.01 par value	05/19/2015		S	6,200	D	\$ 66	68,460	D	
Common stock, \$0.01 par value							419 (1)	I	Profit sharing trust

Common

value

stock, \$0.01 par I By spouse in IRA

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

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.

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	Transaction Derivative Code Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option (right to	\$ 22.9407	05/19/2015		M		6,200	02/17/2006	02/16/2016	Common Stock	6,200

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
LIIDWICH THOMAS A								

HURWICH THOMAS A.

1 N. WAUKEGAN ROAD VP, Controller
NORTH CHICAGO, IL 60064

## **Signatures**

buy)

Steven L. Scrogham, attorney-in-fact for Thomas A.
Hurwich

05/21/2015

\*\*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).
- (1) Balance in the AbbVie Savings Program as of May 18, 2015.

Reporting Owners 2

### Edgar Filing: AbbVie Inc. - Form 4

(2) The reporting person disclaims beneficial ownership of all securities held by his spouse.

#### **Remarks:**

This transaction was made pursuant to a previously adopted plan complying with Rule 10b5-1(c).

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.