AbbVie Inc. Form 4 April 04, 2017

FORM 4

OMB APPROVAL

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

OMB Number: 3235-0287

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

Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

Security

(Instr. 3)

(Print or Type Responses)

1. Name and Address of Reporting Person **
RAPP EDWARD J

2. Issuer Name **and** Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

AbbVie Inc. [ABBV]

(Check all applicable)

(Last) (First) (Middle)

(Street)

3. Date of Earliest Transaction
(Month/Day/Year)

(Month/Day/Year)

X Director _____ 10% Owner ____ Officer (give title _____ Other (specify below)

1 N. WAUKEGAN ROAD 03/31/2017

4. If Amendment, Date Original 6. Ind

 Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person ___ Form filed by More than One Reporting

Person

NORTH CHICAGO, IL 60064

(City) (State) (Zip)

1.Title of 2. Transaction Date 2A.

2. Transaction Date 2A. Deemed 3. 4. Securities
(Month/Day/Year) Execution Date, if TransactionAcquired (A) or any Code Disposed of (D)
(Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

3. 4. Securities 5. Amount of 6. Ownership 7. Nature of if TransactionAcquired (A) or Securities Form: Direct Indirect Code Disposed of (D) Beneficially (D) or Indirect Beneficial (Instr. 8) (Instr. 3, 4 and 5) Owned (I) Ownership Following (Instr. 4)

(A) Reported
or (Instr. 3 and 4)

Code V Amount (D) Price

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	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	Transactionof		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.

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Derivative Acquired
Security (A) or
Disposed
of (D)
(Instr. 3, 4,
and 5)

Code V (A) (D) Date Expiration Title Amount Exercisable Date or

Number of Shares

Stock

Equivalent \$ 0 (1) 03/31/2017 A 502 (1) Common Stock 502 \$ 65

Units

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

RAPP EDWARD J 1 N. WAUKEGAN ROAD X NORTH CHICAGO, IL 60064

Signatures

Steven L. Scrogham, attorney-in-fact for Edward J.
Rapp 04/04/2017

**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) Director fees credited to a stock equivalent unit account under a grantor trust established by the director and paid, in cash, generally at age 65 or upon retirement from the board. The stock equivalent units 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.

Reporting Owners 2