FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DС	20549
rvasiliigion,	D.C.	20040

heck this box if no longer subject
Section 16. Form 4 or Form 5
bligations may continue. See
-4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* FREYMAN THOMAS C				2. Issuer Name and Ticker or Trading Symbol AbbVie Inc. [ABBV]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
FREYMAN THOMAS C					[188]								X Director			10% Owner			
(Last) (First) (Middle) 1 N. WAUKEGAN ROAD				3. Date of Earliest Transaction (Month/Day/Year) 05/06/2022									Office below	r (give title		Other (s below)	specify		
(Street) NORTH CHICAG	· · · · · · · · · · · · · · · · · · ·				4. If A	4. If Amendment, Date of 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					
(City)	(Sta	ate) (2	Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					, 4 and Securiti Benefic Owned		ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	(A) or (D)	Price	_ т	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common	Stock, \$0.0	1 par value	ie 05,		2022			A		1,421(1)	A	\$	0	12	2,776	D			
Common Stock, \$0.01 par value											4,		000(2)	I		By spouse in trust			
Common Stock, \$0.01 par value												1,941(3)		Ι		By spouse as trustee for son			
Common Stock, \$0.01 par value													1,941(3)		I		By spouse as trustee for son		
		Та					ies Acqui varrants,							wnec	i				
1. Title of Derivative Security (Instr. 3)	rative Conversion Date Execution Date, if any			Transaction of Code (Instr. Deriva		Expiration Day/Y		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Pric Deriva Secur (Instr.	ative der rity Sec . 5) Ber Ow Fol Rep Tra	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Ow For Oir Or (I)	vnership rm: ect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
	of Pasnons				Code	or Nu Date Expiration of		umber											

- 1. These are restricted stock units awarded under the AbbVie Amended and Restated 2013 Incentive Stock Program (the "Program"). They will be paid, on a one-to-one basis, in shares of AbbVie common stock 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. The reporting person's spouse is the trustee of the trust. The trust is revocable by his spouse. The reporting person disclaims beneficial ownership of these securities.
- 3. Shares are held in an irrevocable trust for the benefit of the reporting person's son. The reporting person's spouse is the trustee of the trust. The reporting person disclaims beneficial ownership of these securities.

Steven L. Scrogham, attorneyin-fact for Thomas C.

05/09/2022

<u>Freyman</u>

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.