FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* GONZALEZ RICHARD A						2. Issuer Name and Ticker or Trading Symbol AbbVie Inc. [ABBV]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 1 N. WAUKEGAN ROAD						3. Date of Earliest Transaction (Month/Day/Year) 03/08/2017									X Officer (give title below) Other (sp below) Chairman of the Board and CEC				
(Street) NORTH CHICAGO IL 60064				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	X Form filed by One Reporting Person Form filed by More than One Reporting				.	
(City)	(S	tate)	(Zip)												Person				
		Tab	le I - No	on-Deri	vative	e Sec	curit	ies Ac	quired	l, Di	sposed o	f, or Be	nefic	ially	Owned				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Exe r) if a	. Deemed ecution Date, any onth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Securiti Benefic Owned		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct C	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Reported Transact (Instr. 3	ion(s)			Instr. 4)
Common stock, \$0.01 par value				03/08/				М		18,366	A	\$24.	\$24.2082 36		9,113		D		
Common stock, \$0.01 par value 03/08/2					/2017	017			M		53,650	A	\$29.	9.2265 422		,763		D	
Common stock, \$0.01 par value 03/08/2					/2017	017			S		72,016	D	\$64	54.25 350		,747		D	
Common stock, \$0.01 par value 03/10/2				/2017	017			G	V	785	D	\$	6 <mark>0</mark>	349	,962		D		
Common stock, \$0.01 par value														4,6		500(1)		1 1	By spouse
Common stock, \$0.01 par value															45	450(1)			By step- laughter
		-	Table II								posed of, converti				wned				
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. Transa Code (I 8)		5. Number on of		6. Date Expirati (Month/	on Da		7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		D	Price of Perivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amou or Numb of Share	oer					
Option (right to buy) ⁽²⁾	\$24.2082	03/08/2017						18,366	02/18/2	013	02/17/2021	Common stock	18,3	66	\$0	0		D	
Option (right to buy) ⁽²⁾	\$29.2265	03/08/2017			M			53,650	02/17/2	015	02/22/2022	Common stock	53,6	50	\$0	0		D	

Explanation of Responses:

- 1. The reporting person disclaims beneficial ownership of these securities.
- 2. Employee stock option granted pursuant to the AbbVie 2013 Incentive Stock Program in a transaction exempt from Section 16 under Rule 16b-3.

Remarks:

These transactions were made pursuant to a previously adopted plan complying with Rule 10b5-1(c).

Steven L. Scrogham, attorneyin-fact for Richard A. Gonzalez

** Signature of Reporting Person

03/10/2017

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.