FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* RAPP EDWARD J | | | | | | 2. Issuer Name and Ticker or Trading Symbol AbbVie Inc. [ABBV] | | | | | | | | | | olicable) | g Person(s) to I | ssuer |
|--|--|---------|----------|----------|--|---|-------------------------|------|--|--|----------|-------------------------------|------------------------|--|---|---|--|---------------|
| (Last) (First) (Middle) 1 N. WAUKEGAN ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/31/2017 | | | | | | | | | Offic below | er (give title w) | Other below | (specify) |
| (Street) NORTH CHICAG | ORTH II 60064 | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv Line) X | idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (St | ate) (2 | Zip) | | | | | | | | | | | | | | | |
| | | Tabl | e I - No | on-Deriv | ative | Sec | uritie | s Ac | quire | d, Dis | sposed o | f, or E | Benefic | ially | Owne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/ | | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (Instr. 3) Unique (Instr. 3) | | | | | Securities Beneficially | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A) o (D) | r Price | | Trans | action(s) 3 and 4) | | (1115411 4) |
| Common Stock, \$0.01 par value 07/31/20 | | | | | | | 017 | | P | | 4,000 | A | \$70. | 4455 1 | | 15,498 | D | |
| 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) | vative Conversion Date Executi rity or Exercise (Month/Day/Year) if any | | | | Instr. | of Deriv Secu Acqu (A) or Dispo | oosed D) tr. 3, 4 | | tion Day/Y | te Amount of Securitite Underlyin Derivative Security and 4) | | nt of ties ying tive | nt er | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

Steven L. Scrogham, attorneyin-fact for Edward J. Rapp

08/02/2017

** 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.