FORM 4

to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	.C. 20549
---------------	-----------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject

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

	tion 1(b).	iuc. occ		Filed							ties Exchang mpany Act o		1934			nours	per re	esponse:	0.5
1. Name and Address of Reporting Person*  Michael Robert A.  (Last) (First) (Middle)  1 N. WAUKEGAN ROAD				2. Issuer Name and Ticker or Trading Symbol     AbbVie Inc. [ ABBV ]  3. Date of Earliest Transaction (Month/Day/Year) 02/28/2021									5. Relationship of Reportir (Check all applicable) Director X Officer (give title below) EVP, Chief Fi				10% O Other ( below)	wner (specify	
(Street) NORTH CHICAC	GO IL		0064 Zip)											. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
		Table	I - No	n-Deriva	ative S	Secu	rities	Acc	uired	, Dis	posed of	, or Be	nefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Execution D		ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and S		5. Amount of Securities Beneficially Owned Following		wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
										v	Amount	(A) or (D)	Price	Reported Transaction( (Instr. 3 and		ction(s)			(Instr. 4)
Common Stock, \$0.01 par value 02/28				02/28/2	2021				F		14,006	D	\$107	7.74 3		7,877		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)	ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		Code ( 8)	Transaction Code (Instr. 8)		mber rative rities ired r osed ) : 3, 4	6. Date Exer Expiration D (Month/Day/		ate (ear)	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)  Amoun or Numbe of Title Shares				9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. 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 Robert A. Michael

03/02/2021

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.