FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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* ALBAN CARLOS					2. Issuer Name and Ticker or Trading Symbol AbbVie Inc. [ABBV]							(Ch	eck all applic	able)	10% Owner		Owner	
(Last) 1 N. WA	(F UKEGAN	irst) ROAD	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/19/2015								X Officer (give title Other (specify below) EVP, Commercial Operations				
(Street) NORTH CHICAC		tate)	60064 (Zip)		4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. I	Adividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Ta	ble I - N	on-Dei	rivativ	ve Se	curities	s Ac	quire	d, Di	isposed c	of, or Be	neficial	y Owned				
1. Title of Security (Instr. 3) 2. Trans Date (Month/		action	ion 2A. Deemed Execution Date, //Year) if any		3. 4		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar		(A) or	5. Amount of Securities Beneficially Owned Following		Form: Direct Ir (D) or Indirect B (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and				(Instr. 4)	
Common	stock, \$0.0	1 par value		02/19	9/2015)15		A		51,580(1) A	\$0.00	256,7	18	D			
Common stock, \$0.01 par value												40,442(2)		I		Maria Cristina Alban 2007 Declaration of Trust		
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)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year)	Execution		Date, Transac		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	ion Da		7. Title an of Securit Underlyin Derivative (Instr. 3 a	g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
Option (right to buy) ⁽³⁾	\$58.88	02/19/2015			A		101,960		02/19/2	2016	02/18/2025	Common stock	101,960	\$0	101	1,960	D	

Explanation of Responses:

- 1. These securities represent performance vested restricted stock awards under the AbbVie 2013 Incentive Stock Program. The awards have a 5-year term, with no more than 1/3 of the award vesting in any one year upon AbbVie reaching a minimum return on equity target. The awards include the right to have stock withheld for tax purposes.
- 2. Held in the Maria Christina Alban 2007 Declaration of Trust. The reporting person's spouse is trustee of the trust. The trust is revocable by his spouse. The reporting person disclaims beneficial ownership of these securities.
- 3. Employee stock option granted pursuant to the AbbVie 2013 Incentive Stock Program in a transaction exempt from Section 16 under Rule 16b-3. The option becomes exerciseable in annual increments of 33,987 on 02/19/2016, 33,986 on 02/19/2017, and 33,987 on 02/19/2018.

Steven L. Scrogham, attorney-02/23/2015 in-fact for Carlos Alban

** Signature of Reporting Person

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.