FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-028 | | | | | | | | |
| 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

| Name and Address of Reporting Person* ALBAN CARLOS | | | | | | 2. Issuer Name and Ticker or Trading Symbol AbbVie Inc. [ABBV] | | | | | | | | | neck all app Direc | licable) | | | Issuer Owner er (specify | |
|--|---|--|--|------------------------------|---|---|--|---|------------------|--|---|-------|----------|---|--|--|---|--|--|--|
| | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/04/2017 | | | | | | | | | X Officer (give title Other (specify below) EVP, Commercial Operations | | | | | |
| (Street) NORTH CHICAG | NORTH IL 60064 | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day) | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a 5) | | | | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) o | r Pri | ce | Transact (Instr. 3 a | ion(s) | | | (Instr. 4) | |
| Common stock, \$0.01 par value 05/04/20 | | | | | 2017 | | | | S | | 43,000 | D | 5 | 667 | 114 | ,745 | | D | | |
| Common stock, \$0.01 par value | | | | | | | | | | | | | | | 40,4 | 42(1) | 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) | rative rity or Exercise Price of Derivative Security Conversion or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Execution Date, | | | 4. Transa Code (8) | (Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 6. Date Expirat (Month) | ion Da /Day/Y | | Amount of Securities Underlying Derivative Security (Instr. and 4) | | nt er | 8. Price of Derivative Security (Instr. 5) Security (Instr. 5) Owned Following Reported Transact (Instr. 4) | | e Ownersh s Form: ally Direct (D or Indirect g (I) (Instr. | | Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. 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

Remarks:

This sale was made pursuant to a previously adopted plan complying with Rule 10b5-1(c).

Steven L. Scrogham, attorney-05/08/2017 in-fact for Carlos Alban

** 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.