FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
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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* FREYMAN THOMAS C			2. Issuer Name and Ticker or Trading Symbol AbbVie Inc. [ABBV]							(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	(Fir	st) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/05/2023								_	er (give title		(specify	
1 N. WAUKEGAN ROAD			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) NORTH CHICAG	GO IL	6	50064))		filed by Mo	e Reporting Pe ore than One Re		
(City) (State) (Zip)				Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	l - Nor	n-Deriva	tive S	ecur	ities Acq	uired,	Dis	osed of,	or Be	neficial	ly Own	ed			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year		Execution Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (ADisposed Of (D) (Instr. 35)			nd Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common	Stock, \$0.0	1 par value		05/05/2	2023			Α		1,450(1)	A	\$0	12	24,226	D		
Common	Stock, \$0.0	1 par value											4,	000(2)	I	By spouse in trust	
Common	Stock, \$0.0	1 par value											1,	941(3)	I	By spouse as trustee for son	
Common Stock, \$0.01 par value												1,	941 ⁽³⁾	I	By spouse as trustee for son		
		Tal					ies Acqui varrants,						Owne	d			
1. Title of Derivative Security (Instr. 3)	Conversion Date Execution Date, Trans		Transac Code (li	nsaction of		6. Date Exercisab Expiration Date (Month/Day/Year)		te	7. Title a Amount Securitie Underlyi Derivativ Security 3 and 4)	of S s (I e		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D) or Indirect (I) (Instr.	Beneficial Ownership t (Instr. 4)			
	n of Pasnans				Code	v	(A) (D)	Date Exercisa	able	Expiration Date	OI N of	ımber					

- 1. These are restricted stock units awarded under the AbbVie Amended and Restated 2013 Incentive Stock Program (the "Program"). They will be paid, on a one-to-one basis, in shares of AbbVie common stock on the earlier of the date of the director's separation from service, death, or the occurrence of a change in control (as defined in the Program).
- 2. The reporting person's spouse is the trustee of the trust. The trust is revocable by his spouse. The reporting person disclaims beneficial ownership of these securities.
- 3. Shares are held in an irrevocable trust for the benefit of the reporting person's son. The reporting person's spouse is the trustee of the trust. The reporting person disclaims beneficial ownership of these securities

Steven L. Scrogham, attorney-05/09/2023 in-fact for Thomas C.

** 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.