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 respons | e 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] | | | | | | | | | ationship call app Direc | licable) | ng Pe | erson(s) to Is | | |
|---|--|---|----------------|------------|--------|---|---|---|---------------------|--------------------------------|---|---|---|---|--|--|--|----------------------------|--------------------|--|
| (Last) | (Fir | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/03/2024 | | | | | | | | Office | er (give title v) | | Other (: below) | specify | | |
| I N. WA | UKEGAN . | EGAN ROAD | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | |
| (Street) | | | | | | | | | | | | | | X | | • | | oorting Pers an One Rep | | |
| NORTH CHICAC | GO IL | 6 | 0064 | | | | | | | | | | | | Perso | | ie uie | an one rep | orung | |
| , | | | | | Rul | e 10 |)b5- | 1(c) | Trans | sact | ion Indi | catio | on | | | | | | | |
| (City) | (Sta | ate) (Z | Zip) | | | Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In | | | | | rsuant to a | a contract, instruction or written plan that is intended to struction 10. | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | Execution Date | | Date, | Transaction Code (Instr. | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | , 4 and Securi Benefi Owned | | ties For cially (D) I Following (I) (| | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or Pric | е | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common Stock, \$0.01 par value 05/03/2 | | | | 2024 | | | A | | 1,322(1) | I | 4 \$ | <mark>0</mark> | 31,356 | | D | | | | | |
| Common | Stock, \$0.0 | 1 par value | | | | | | | | | | | | | 10,388(2) | | | I | By spouse in 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 | ercise of ative (Month/Day/Year) if any (Month/Day/Year) if any (Month/Day/Year) 8) | | saction of | | | Expiration Date (Month/Day/Year) Amo Sec Und Deri | | | Amou Secur Unde Deriv | rlying ative rity (Instr. I 4) | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code V | | (A) | (D) | Date Exercisable | | Expiration Date | Title | Amount or Number of Shares | er | | | | | | |

Explanation of Responses:

- 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 disclaims beneficial ownership of all securities held by his wife.

/s/ T.O. Odutayo, attorney-infact for Edward J. Rapp 05/07/2024

** 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.