Edgar Filing: AbbVie Inc. - Form 4

AbbVie Inc. Form 4													
July 15, 2016													
FORM 4	L)MB A	PPROVA	۱L
	UNITED	STATES		RITIES shingto				GE	COMMISSIO		OMB Number: 32		-0287
Check this bo if no longer subject to Section 16. Form 4 or Form 5 obligations	suant to S	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section							Estir burd resp	Estimated average burden hours per response 0		ry 31, 2005 0.5	
may continue. <i>See</i> Instruction 1(b).				nvestme						on			
(Print or Type Respo	onses)												
1. Name and Addre LIDDY EDWA	Person [*]	2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer					
	AbbVie Inc. [ABBV]						(Check all applicable)						
(Last) (First) (Middle) 1 N. WAUKEGAN ROAD			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2016					X_ Director 10% Owner Officer (give title Other (specify below) below)					
	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person							
NORTH CHICA	AGO, IL 600	64							Form filed by Person	More that	ı One R	leporting	
(City)	(State)	(Zip)	Tab	ole I - Non	1-De	rivative	Securitie	es A	cquired, Disposed	of, or Be	neficia	ally Owne	d
	ansaction Date nth/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	3. Transact Code (Instr. 8) Code V	ionA D (I	Disposed	(A) or of (D) 4 and 5) (A) or	ice	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Owne Form: D (D) or Ir (I) (Instr. 4)	irect idirect	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al ip
Reminder: Report o	n a separate line	e for each cla	ass of sect	urities ben	nefic	Perso inform requir	ons who nation co red to re ays a cui	res onta	r indirectly. pond to the colle ained in this forn ond unless the fo ttly valid OMB co	n are no rm		SEC 1474 (9-02)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	Deriva
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Securi
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securities			(Instr.

	Derivative Security				(A) Disp of (I	oosed D) ar. 3, 4,					
			Cc	de N	/ (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Equivalent Units	\$ 0 <u>(1)</u>	06/30/2016	P	L	53)	<u>(1)</u>	<u>(1)</u>	Common stock	539	\$ 61
Report	ing Ow	ners									

Reporting Owner Name / Address	Relationships									
http://ling o which i faile / i fail out	Director	10% Owner	Officer	Other						
LIDDY EDWARD M 1 N. WAUKEGAN ROAD NORTH CHICAGO, IL 60064	Х									
Signatures										
Steven L. Scrogham, attorney-in Liddy	n-fact for	Edward M.		07/15/201						

*Signature of Reporting Person

Date

6

Explanation of Responses:

- * 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).

Director fees credited to stock equivalent unit accounts established by the director at Abbott Laboratories and AbbVie. The stock equivalent units in the Abbott account will be paid, in cash, generally at age 65 or upon retirement from Abbott's board, and the stock

- (1) equivalent units in the Abbott account will be paid, in cash, generally at age 65 or upon retirement from AbbVie's board, and the stock equivalent units in each account earn the same return as if the fees were invested in AbbVie stock.
- (2) Balance includes stock equivalent units acquired pursuant to a dividend equivalent reinvestment feature.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.