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Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

**2014**

Open to Public Inspection

For calendar year 2014 or tax year beginning

, 2014, and ending

, 20

Name of foundation <b>ABBVIE FOUNDATION</b>		<b>A</b> Employer identification number <b>46-0827839</b>
Number and street (or P O box number if mail is not delivered to street address) <b>1 NORTH WAUKEGAN ROAD</b>		<b>B</b> Telephone number (see instructions) <b>(847) 938-8188</b>
City or town, state or province, country, and ZIP or foreign postal code <b>NORTH CHICAGO, IL 60064</b>		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply	<input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change	<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>D</b> 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <b>130,990,079.</b>		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>J</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received (attach schedule)	40,313,389.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	174.	174.		
	4 Dividends and interest from securities	1,404,831.	1,404,831.		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	41,718,394.	1,405,005.			
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc.	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule) ATCH. 1	70,430.			70,430.
	b Accounting fees (attach schedule) ATCH. 2	23,990.	1,750.		1,750.
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) [3]	452,439.			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) ATCH. 4	376,342.			376,342.
	24 Total operating and administrative expenses. Add lines 13 through 23.	923,201.	1,750.		448,522.
	25 Contributions, gifts, grants paid	17,103,356.			12,292,103.
26 Total expenses and disbursements. Add lines 24 and 25	18,026,557.	1,750.	0	12,740,625.	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	23,691,837.				
b Net investment income (if negative, enter -0-)		1,403,255.			
c Adjusted net income (if negative, enter -0-)					

p  
15

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing . . . . .			
	2	Savings and temporary cash investments . . . . .	41,955,836.	70,850,243.	70,850,243.
	3	Accounts receivable ▶ . . . . .			
		Less allowance for doubtful accounts ▶ . . . . .			
	4	Pledges receivable ▶ . . . . .			
		Less allowance for doubtful accounts ▶ . . . . .			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ . . . . .			
		Less allowance for doubtful accounts ▶ . . . . .			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments - U.S. and state government obligations (attach schedule), . . . . .			
	b	Investments - corporate stock (attach schedule) ATCH 5 . . . . .	420,920.	420,920.	60,139,836.
	c	Investments - corporate bonds (attach schedule), . . . . .			
	Liabilities	11	Investments - land, buildings, and equipment basis ▶ . . . . .		
		Less accumulated depreciation ▶ (attach schedule) . . . . .			
12		Investments - mortgage loans . . . . .			
13		Investments - other (attach schedule) . . . . .			
14		Land, buildings, and equipment basis ▶ . . . . .			
		Less accumulated depreciation ▶ (attach schedule) . . . . .			
15		Other assets (describe ▶ . . . . .)			
16		<b>Total assets</b> (to be completed by all filers - see the instructions Also, see page 1, item I) . . . . .	42,376,756.	71,271,163.	130,990,079.
17		Accounts payable and accrued expenses . . . . .	9,121.		
18		Grants payable . . . . .	40,000.	4,811,253.	
Net Assets or Fund Balances	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons . . . . .			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ . . . . . ATCH 6) . . . . .	753,940.	1,194,378.	
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	803,061.	6,005,631.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here. <input checked="" type="checkbox"/> X and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .	41,573,695.	65,265,532.	
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, . . . ▶ <input type="checkbox"/> check here and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .			
	29	Retained earnings, accumulated income, endowment, or other funds . . . . .			
30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	41,573,695.	65,265,532.		
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	42,376,756.	71,271,163.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	41,573,695.
2	Enter amount from Part I, line 27a . . . . .	2	23,691,837.
3	Other increases not included in line 2 (itemize) ▶ . . . . .	3	
4	Add lines 1, 2, and 3 . . . . .	4	65,265,532.
5	Decreases not included in line 2 (itemize) ▶ . . . . .	5	
6	<b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) - Part II, column (b), line 30 . . . . .	6	65,265,532.

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**Part IV Capital Gains and Losses for Tax on Investment Income**(a) List and describe the kind(s) of property sold (e.g., real estate,  
2-story brick warehouse, or common stock, 200 shs. MLC Co.)(b) How  
acquired  
P - Purchase  
D - Donation(c) Date  
acquired  
(mo., day, yr.)(d) Date sold  
(mo., day, yr.)

<b>1 a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

- 2** Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7  
If (loss), enter -0- in Part I, line 7 }
- 3** Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  
If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in  
Part I, line 8 . . . . . }

2

3

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2013	8,109,563.	72,678,630.	0.111581
2012		2,995,784.	
2011			
2010			
2009			

- 2** Total of line 1, column (d) . . . . . 2 0.111581
- 3** Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the  
number of years the foundation has been in existence if less than 5 years . . . . . 3 0.055791
- 4** Enter the net value of noncharitable-use assets for 2014 from Part X, line 5 . . . . . 4 90,865,119.
- 5** Multiply line 4 by line 3 . . . . . 5 5,069,456.
- 6** Enter 1% of net investment income (1% of Part I, line 27b) . . . . . 6 14,033.
- 7** Add lines 5 and 6 . . . . . 7 5,083,489.
- 8** Enter qualifying distributions from Part XII, line 4 . . . . . 8 12,740,625.
- If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the  
Part VI instructions

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 . . . . . Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)		1	14,033.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	
3 Add lines 1 and 2 . . . . .		3	14,033.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	14,033.
6 Credits/Payments			
a 2014 estimated tax payments and 2013 overpayment credited to 2014 . . . . .	6a 27,099.		
b Exempt foreign organizations - tax withheld at source . . . . .	6b		
c Tax paid with application for extension of time to file (Form 8868) . . . . .	6c		
d Backup withholding erroneously withheld . . . . .	6d		
7 Total credits and payments. Add lines 6a through 6d . . . . .		7	27,099.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .		8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .		9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . . .		10	13,066.
11 Enter the amount of line 10 to be Credited to 2015 estimated tax <input type="checkbox"/> 13,066. Refunded <input type="checkbox"/>		11	

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? . . . . . If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year? . . . . .		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> IL, _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation . . . . .	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .		X

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**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) <u>ATCH 7</u>	12	X	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>N/A</u>	13	X	
14	The books are in care of <u>TRACIE HAAS</u> Telephone no <u>847-935-1112</u> Located at <u>1 NORTH WAUKEGAN ROAD, NORTH CHICAGO, IL</u> ZIP+4 <u>60064</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u>			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If "Yes," enter the name of the foreign country <u></u>	16	Yes	No X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <u></u>		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u></u>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014)	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☒ Yes ☐ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ **5b** ☒ X

Organizations relying on a current notice regarding disaster assistance check here ☐

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☒ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ **6b** ☒ X

If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ **7b**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATCH 8		0	0	0

**2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. ☐

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)****3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ATCH 9		424,732.
Total number of others receiving over \$50,000 for professional services . . . . . ►		

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 DEVELOP GLOBAL SCIENCE (STEM) EDUCATION PROGRAM THAT SERVES PRIMARY AND SECONDARY SCHOOL CHILDREN IN COMMUNITIES.	91,173.
2	
3	
4	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3 . . . . . ►	

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	52,715,367.
b	Average of monthly cash balances	1b	39,533,485.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	92,248,852.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	92,248,852.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,383,733.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	90,865,119.
6	Minimum investment return. Enter 5% of line 5	6	4,543,256.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	4,543,256.
2a	Tax on investment income for 2014 from Part VI, line 5	2a	14,033.
b	Income tax for 2014 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	14,033.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,529,223.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,529,223.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	4,529,223.

**Part XII Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	12,740,625.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	12,740,625.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	14,033.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,726,592.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2014)

Page **9****Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7 . . . . .				4,529,223.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only . . . . .				
b Total for prior years 20 <u>12</u> , 20 <u>11</u> , 20 <u>10</u> . . . . .				
3 Excess distributions carryover, if any, to 2014				
a From 2009 . . . . .				
b From 2010 . . . . .				
c From 2011 . . . . .				
d From 2012 . . . . .				
e From 2013 . . . . . 4,444,721.				
f Total of lines 3a through e . . . . .	4,444,721.			
4 Qualifying distributions for 2014 from Part XII, line 4 ► \$ <u>12,740,625.</u>				
a Applied to 2013, but not more than line 2a . . . . .				
b Applied to undistributed income of prior years (Election required - see instructions) . . . . .				
c Treated as distributions out of corpus (Election required - see instructions) . . . . .				
d Applied to 2014 distributable amount . . . . .				4,529,223.
e Remaining amount distributed out of corpus . . . . .	8,211,402.			
5 Excess distributions carryover applied to 2014 . (If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:	12,656,123.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . .				
d Subtract line 6c from line 6b Taxable amount - see instructions . . . . .				
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions . . . . .				
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .				
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) . . . . .				
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	12,656,123.			
10 Analysis of line 9				
a Excess from 2010 . . . . .				
b Excess from 2011 . . . . .				
c Excess from 2012 . . . . .				
d Excess from 2013 . . . . . 4,444,721.				
e Excess from 2014 . . . . . 8,211,402.				

Form **990-PF** (2014)

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

NOT APPLICABLE

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section	4942(j)(3) or	4942(j)(5)
---	---------------	------------

		Prior 3 years				(e) Total
Tax year		(a) 2014	(b) 2013	(c) 2012	(d) 2011	
2 a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
b	85% of line 2a . . . . .					
c	Qualifying distributions from Part XII, line 4 for each year listed . .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test - enter					
(1)	Value of all assets . . . .					
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i). . . . .					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . .					
c	"Support" alternative test - enter					
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). . . . .					
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
(3)	Largest amount of support from an exempt organization. . . . .					
(4)	Gross investment income .					

**Part XV**      **Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**

### **1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

N/A

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.

**b The form in which applications should be submitted and information and materials they should include**

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>  ATCH 10				
<b>Total</b> . . . . .			<b>3a</b>	12,292,103.
<b>b Approved for future payment</b> UNIVERSITY OF CHICAGO 5801 S ELLIS AVENUE CHICAGO, IL 60637	NONE	PC	GENERAL SUPPORT	5,000,000.
<b>Total</b> . . . . .			<b>3b</b>	5,000,000.

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
<b>2</b> Membership dues and assessments . . . . .						
<b>3</b> Interest on savings and temporary cash investments				14	174.	
<b>4</b> Dividends and interest from securities . . . . .				14	1,404,831.	
<b>5</b> Net rental income or (loss) from real estate						
a Debt-financed property . . . . .						
b Not debt-financed property . . . . .						
<b>6</b> Net rental income or (loss) from personal property .						
<b>7</b> Other investment income . . . . .						
<b>8</b> Gain or (loss) from sales of assets other than inventory						
<b>9</b> Net income or (loss) from special events . . . .						
<b>10</b> Gross profit or (loss) from sales of inventory . .						
<b>11</b> Other revenue a _____						
b _____						
c _____						
d _____						
e _____						
<b>12</b> Subtotal Add columns (b), (d), and (e) . . . . .					1,405,005.	
<b>13</b> Total. Add line 12, columns (b), (d), and (e) . . . . .					13	1,405,005.

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

- |          |  |              |           |
|----------|--|--------------|-----------|
| <b>1</b> | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  | <b>Yes</b>   | <b>No</b> |
| <b>a</b> | Transfers from the reporting foundation to a noncharitable exempt organization of  |              |           |
|          | (1) Cash . . . . .   | <b>1a(1)</b> | X         |
|          | (2) Other assets . . . . .   | <b>1a(2)</b> | X         |
| <b>b</b> | Other transactions   |              |           |
|          | (1) Sales of assets to a noncharitable exempt organization . . . . .   | <b>1b(1)</b> | X         |
|          | (2) Purchases of assets from a noncharitable exempt organization . . . . .   | <b>1b(2)</b> | X         |
|          | (3) Rental of facilities, equipment, or other assets . . . . .   | <b>1b(3)</b> | X         |
|          | (4) Reimbursement arrangements . . . . .   | <b>1b(4)</b> | X         |
|          | (5) Loans or loan guarantees . . . . .   | <b>1b(5)</b> | X         |
|          | (6) Performance of services or membership or fundraising solicitations . . . . .   | <b>1b(6)</b> | X         |
| <b>c</b> | Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .   | <b>1c</b>    | X         |
| <b>d</b> | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |              |           |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

[illegible]

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

5/13/15  
Date

▶ President  
Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name
----------------------------

JOHN WOODHULL

Preparer's signature

Operator's signature  
Bern V Woodhull, Esq

Date	
------	--

05/12/15

Check ☐ if self-employed

PTIN	
------	--

P01305268

Firm's name ► CROWE HORWATH LLP

Firm's address ► 225 WEST WACKER DRIVE, SUITE 2600  
CHICAGO, IL

60606-1224

Firm's EIN ▶ 35-0921680

Phone no 630-574-7878

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

**2014**▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

Name of the organization

ABBVIE FOUNDATION

Employer identification number

46-0827839

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

JSA  
4E1251 2 000

2020FM L073 5/12/2015 11:53:29 AM V 14-4.6F

Name of organization **ABBVIE FOUNDATION**Employer identification number  
46-0827839**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ABBVIE INC. 1 N WAUKEGAN RD NORTH CHICAGO, IL 60064	\$ 40,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	ABBVIE PURCHASING COMPANY 1 N WAUKEGAN RD NORTH CHICAGO, IL 60064	\$ 313,389.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)



Name of organization **ABEVIE FOUNDATION**

Employer identification number

46-0827839

**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
---	----- ----- ----- -----	\$ -----	-----

Name of organization ABBVIE FOUNDATION

Employer identification number

46-0827839

**Part III** **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	-----	-----	-----
	-----	-----	-----
	-----	-----	-----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	-----		-----
	-----		-----
	-----		-----
-----	-----	-----	-----
	-----	-----	-----
	-----	-----	-----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	-----		-----
	-----		-----
	-----		-----
-----	-----	-----	-----
	-----	-----	-----
	-----	-----	-----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	-----		-----
	-----		-----
	-----		-----
-----	-----	-----	-----
	-----	-----	-----
	-----	-----	-----
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	-----		-----
	-----		-----
	-----		-----

ATTACHMENT 1

FORM 990PF, PART I - LEGAL FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
LEGAL FEES	70,430.			70,430.
TOTALS	<u>70,430.</u>			<u>70,430.</u>

ATTACHMENT 2

FORM 990PF, PART I - ACCOUNTING FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
ACCOUNTING FEES	23,990.	1,750.		1,750.
TOTALS	<u>23,990.</u>	<u>1,750.</u>		<u>1,750.</u>

ATTACHMENT 3

FORM 990PF, PART I - TAXES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>ADJUSTED NET INCOME</u>	<u>CHARITABLE PURPOSES</u>
FEDERAL EXCISE TAX	452,439.			
TOTALS	<u>452,439.</u>			

ATTACHMENT 4

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
OUTSIDE SERVICES	280,775.			280,775.
SCIENCE EDUCATION EXPENSE	91,173.			91,173.
BANK FEES	4,166.			4,166.
OFFICE EXPENSE	228.			228.
TOTALS	<u>376,342.</u>			<u>376,342.</u>

ATTACHMENT 5

FORM 990PF, PART II - CORPORATE STOCK

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
ABBOTT LABORATORIES	201,937.	24,511,093.
ABBVIE	218,983.	35,628,743.
TOTALS	<u>420,920.</u>	<u>60,139,836.</u>

ATTACHMENT 6

FORM 990PF, PART II - OTHER LIABILITIES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>
DEFERRED TAXES	1,194,378.
TOTALS	<u>1,194,378.</u>



FORM 990PF, PART VII-A -DISTRIBUTION TO A DONOR ADVISED FUND

THE FOUNDATION MAKES GRANTS TO A DONOR-ADVISED FUND ("DAF") AT SILICON VALLEY COMMUNITY FOUNDATION ("SVCF") OVER WHICH THE FOUNDATION HAS ADVISORY PRIVILEGES. SVCF USES THE FUNDS IN THE DAF SOLELY TO MAKE GRANTS TO ORGANIZATIONS DESCRIBED IN, OR TREATED AS DESCRIBED IN, SECTION 509(A)(1), (2), OR (3), OR 4942(J)(3) OF THE INTERNAL REVENUE CODE TO BE USED TO ACCOMPLISH ONE OR MORE PURPOSES DESCRIBED IN SECTION 170(C)(2)(B) OF THE CODE ("ELIGIBLE RECIPIENT ORGANIZATIONS"). SVCF USES THE FUNDS RECEIVED FROM THE FOUNDATION TO MAKE GRANTS TO ELIGIBLE RECIPIENT ORGANIZATIONS ON A QUARTERLY BASIS, THUS ENSURING THAT THE FOUNDATION'S GRANTS ARE USED PROMPTLY TO ACCOMPLISH PURPOSES DESCRIBED IN SECTION 170(C)(2)(B) OF THE CODE. SVCF SELECTS THE ELIGIBLE RECIPIENT ORGANIZATIONS BASED ON INDEPENDENT CONTRIBUTIONS MADE TO SUCH ORGANIZATIONS BY ABBVIE EMPLOYEES, PROVIDED SUCH CONTRIBUTIONS ARE ELIGIBLE TO BE MATCHED UNDER THE FOUNDATION'S MATCHING GRANT PROGRAMS.

ABBVIE FOUNDATION

46-0827839

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 8

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
TRACIE HAAS 1 NORTH WAUKEGAN ROAD NORTH CHICAGO, IL 60064	PRESIDENT/DIRECTOR 20.00	0	0	0
CATHY ACKERMAN 1 NORTH WAUKEGAN ROAD NORTH CHICAGO, IL 60064	VICE PRESIDENT 20.00	0	0	0
TABETHA SKARBEK 1 NORTH WAUKEGAN ROAD NORTH CHICAGO, IL 60064	TREASURER 1.00	0	0	0
DENIS TIAN 1 NORTH WAUKEGAN ROAD NORTH CHICAGO, IL 60064	ASSISTANT TREASURER 1.00	0	0	0
KATHLEEN SCHEIDT 1 NORTH WAUKEGAN ROAD NORTH CHICAGO, IL 60064	SECRETARY 1.00	0	0	0
RICHARD A. GONZALEZ 1 NORTH WAUKEGAN ROAD NORTH CHICAGO, IL 60064	DIRECTOR 1.00	0	0	0

ABBVIE FOUNDATION

46-0827839

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 8 (CONT'D)

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION</u>	<u>COMPENSATION</u>	<u>CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS</u>	<u>EXPENSE ACCT AND OTHER ALLOWANCES</u>
LAURA J. SCHUMACHER 1 NORTH WAUKEGAN ROAD NORTH CHICAGO, IL 60064	DIRECTOR 1.00	0	0	0
JENNIFER SMOTER 1 NORTH WAUKEGAN ROAD NORTH CHICAGO, IL 60064	DIRECTOR 1.00	0	0	0
JOHN (JEFF) RICHARDSON 1 NORTH WAUKEGAN ROAD NORTH CHICAGO, IL 60064	VICE PRESIDENT 29.00	0	0	0
GRAND TOTALS		0	0	0

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALSATTACHMENT 9

<u>NAME AND ADDRESS</u>	<u>TYPE OF SERVICE</u>	<u>COMPENSATION</u>
HAMILTON VOPELAK 1137 S. MAIN STREET GRAPEVINE, TX 76051	LEGAL SERVICES	60,405.
COONEY WATERS 90 FIFTH AVENUE NEW YORK, NY 10011	PUBLIC RELATIONS	221,740.
GIVE2ASIA 340 PINE STREET, SUITE 501 SAN FRANCISCO, CA 94104	STRATEGY SUPPORT	52,535.
CATALYSIS 2520 SW HAMILTON CT. PORTLAND, OR 97239	PROGRAM DEVELOPMENT	90,052.
	TOTAL COMPENSATION	<u>424,732.</u>

ABBVIE FOUNDATION

46-0827839

FORM 990PF PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 10

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

GENERAL PHILANTHROPIC GRANTS  
SEE ATTACHED SCHEDULE

NONE

CHARITABLE - SEE ATTACHED SCHEDULE

12,292,103

TOTAL CONTRIBUTIONS PAID

12,292,103

Country	State	Legal Name	Address	City	State	Zip / Postal Code	Organization Tax Status	Project Title	Payment Amount
US	CA	Direct Relief	27 S LA PATERA LN	SANTA BARBARA	CA	93117-3214	PC	Prevention of Mother-to-Child Transmission of HIV	\$517,500.00
		Direct Relief	27 S LA PATERA LN	SANTA BARBARA	CA	93117-3214	PC	Prevention of Mother-to-Child Transmission of HIV	\$1,207,500.00
		Direct Relief	27 S LA PATERA LN	SANTA BARBARA	CA	93117-3214	PC	General Mission to Support Ebola Relief Efforts	\$80,000.00
		Direct Relief	27 S LA PATERA LN	SANTA BARBARA	CA	93117-3214	PC	Ebola Outbreak Relief	\$20,000.00
		Direct Relief	27 S LA PATERA LN	SANTA BARBARA	CA	93117-3214	PC	Family Emergency Care Kits	\$40,000.00
		International Medical Corps	12400 WILSHIRE BLVD	LOS ANGELES	CA	90025-1030	PC	Stopping the Ebola Outbreak in West Africa-General Mission Support	\$100,000.00
		Silicon Valley Community Foundation	2440 WEST EL CAMINO REAL	MOUNTAIN VIEW	CA	94040-1497	PC	Donor Advised Fund - Matching Grants	\$5,180.06
		Silicon Valley Community Foundation	2440 WEST EL CAMINO REAL	MOUNTAIN VIEW	CA	94040-1497	PC	Donor Advised Fund - Matching Grants	\$2,492,353.55
		Silicon Valley Community Foundation	2440 WEST EL CAMINO REAL	MOUNTAIN VIEW	CA	94040-1497	PC	Donor Advised Fund - Matching Grants	\$172,706.57
		Silicon Valley Community Foundation	2440 WEST EL CAMINO REAL	MOUNTAIN VIEW	CA	94040-1497	PC	Donor Advised Fund - Matching Grants	\$93,583.34
		Siempre Unidos	1001 SMITH RD	MILL VALLEY	CA	94941-3902	PC	Medical Care for HIV+ and HIV- Indigent Hondurans	\$80,000.00
		Legal Name Unique Count for CA							4
		Payment Amount Total for CA							\$4,788,823.52
US	CT	AmenCares Foundation, Inc.	88 Hamilton Ave	Stamford	CT	06802	PC	AmenCares Ebola Response	\$100,000.00
		Legal Name Unique Count for CT							1
		Payment Amount Total for CT							\$100,000.00
US	DC	Albert B Sabin Vaccine Institute, Inc	2000 PENNSYLVANIA AVE NW STE 7100	WASHINGTON	DC	20006-1894	PC	Evaluation of the Impact of Mass Abendazole Treatment in South and Southeast Mexico	\$93,552.00
		Improving coverage for the prevention, control and elimination of five prioritized neglected tropical diseases (NTDs) in Vaupés province, in the Amazon region of Colombia					PC		\$109,750.00
		READesign School Library Makeovers					PC		\$726,910.00
		Legal Name Unique Count for DC							2
		Payment Amount Total for DC							\$930,212.00
US	GA	MAP International	4700 Glynnco Parkway	Brunswick	GA	31525	PC	Chagas Disease Prevention and Control in Rural Bolivia	\$83,800.00
		MAP International	4700 Glynnco Parkway	Brunswick	GA	31525	PC	General Mission Grant to support MAP International's Ebola Relief Efforts	\$100,000.00
		MAP International	4700 Glynnco Parkway	Brunswick	GA	31525	PC	Bringing hope and health to Buruli ulcer patients in Côte d'Ivoire	\$150,000.00
		Legal Name Unique Count for GA							1
		Payment Amount Total for GA							\$313,800.00
US	IL	American Red Cross	2200 W Harrison St	Chicago	IL	60612	PC	Disaster Relief	\$50,000.00
		Ene Family Health Center	2323 Grand Ave	Waukegan	IL	60085	PC	Operating and Capital for Ene HealthReach Waukegan Health Center	\$100,000.00
		GlobeMed	620 Library Place	Evanston	IL	60208	PC	GlobeMed Leadership Training and Events	\$50,000.00
		IMSA Fund for Advancement of Education	1500 SULLIVAN RD	AURORA	IL	60506-1067	PC	IMSA Boundless Learning Advancing Chemistry	\$93,000.00
		IMSA Fund for Advancement of Education	1500 SULLIVAN RD	AURORA	IL	60506-1067	PC	IMSA Fusion in North Chicago	\$40,000.00

PC US	Kohl Children's Museum of Greater Chicago	2100 PATRIOT BLVD 855 Skokie Highway North, Suite D	GLENVIEW	IL	60028-8090	PC	Science + You Travel and Operations Support	\$44,615.00
		North Chicago Community Partners	Lake Bluff	IL	60044	POF	Adopt-A-School Program - North Elementary School	\$246,833.00
		Northern Illinois Food Bank	GENEVA	IL	60134-0000	PC	Mobile Pantry Program - North Chicago	\$14,400.00
		PADS Lake County, Inc	Waukegan	IL	60085	PC	PADS Emergency Shelter Project	\$10,000.00
		Reading Power, Inc	Lake Forest	IL	60045	PC	Literacy Tutoring Program	\$10,000.00
PC US	Rosalind Franklin University of Medicine and Science	3333 GREEN BAY RD	NORTH CHICAGO	IL	60064-3037	PC	The INSPIRE Summer Research Program	\$10,000.00
		330 S GREENLEAF ST	GURNEE	IL	60031-3389	PC	Success By 8 Program in North Chicago	\$80,000.00
		5801 S ELLIS AVENUE	CHICAGO	IL	60637-5418	PC	Harnessing the Potential of Cancer Immunotherapy	\$1,000,000.00
		2100 Green Bay Road	NORTH CHICAGO	IL	60064-2012	PC	YBLC Healthcare & Science Education Lab	\$15,000.00
		YouthBuild Lake County						13
								\$1,763,848.00
IN	Indiana University	400 E 7TH STREET POPLARS ROOM 501	BLOOMINGTON	IN	47405-3001	PC	HIV Programs in Western Kenya	\$665,000.00
		400 E 7TH STREET	BLOOMINGTON	IN	47405-3001	PC	HIV Programs in Western Kenya	\$285,000.00
		400 E 7TH STREET	BLOOMINGTON	IN	47405-3001	PC	Oncology Program in Western Kenya	\$100,000.00
		400 E 7TH STREET	BLOOMINGTON	IN	47405-3001	PC	HBV/HCV Needs Assessment in Western Kenya	\$100,000.00
		400 E 7TH STREET	BLOOMINGTON	IN	47405-3001	PC		1
								\$1,150,000.00
MA	Asian University for Women Support Foundation	1100 MASSACHUSETTS AVENUE, Suite 300	CAMBRIDGE	MA	02138-5218	PC	AbbVie Foundation Scholarships at Asian University for Women	\$50,000.00
		300 Technology Square, 8th floor	Cambridge	MA	02139-3520	PC	BioTeach	\$40,000.00
		888 COMMONWEALTH AVE., 3rd Floor	BOSTON	MA	02215-1205	PC	General Mission Support - Fighting Ebola West Africa	\$100,000.00
								3
								\$190,000.00
NJ US	Family Reach Foundation	2001 ROUTE 46	PARSIPPANY	NJ	07054-1385	PC	Family Assistance Program at Lune Children's Hospital	\$100,000.00
								1
								\$100,000.00
NY	Global Health Corps	5 PENN PLZ FLR 2	NEW YORK	NY	10001-1810	PC	Global Health Corps 2014-15 Fellowship Class (Co-Fellow Pair, Malawi)	\$50,000.00
		1275 York Avenue	New York	NY	10065	PC	Family Assistance Fund at Memorial Sloan Kettering Cancer Center	\$100,000.00
		225 VARICK ST FL 7	NEW YORK	NY	10014-4396	PC	Matching Grant - General Mission Support	\$12,500.00
								3
								\$162,500.00
OH US	Invent Now, Inc.	3701 HIGHLAND PARK NW	NORTH CANTON	OH	44720-4535	PC	Collegiate Inventors Competition 2014	\$225,000.00
								1
								\$225,000.00

US	OR	Caring Ambassadors Program, Inc	PO Box 1748	Oregon City	OR	97045	PC	SHAPE - Supporting Hepatitis Awareness through Program Enhancement	\$253,282.00
		Legal Name Unique Count for OR							\$253,282.00
US		Payment Amount Total for OR							\$253,282.00
	TX	Baylor College of Medicine International Pediatric AIDS Initiative	1102 Bates Street, Suite FC-630	HOUSTON	TX	77030-3411	SO I	BIPAI HIV/AIDS Network	\$1,226,225.00
		Baylor College of Medicine International Pediatric AIDS Initiative	1102 Bates Street, Suite FC-630	HOUSTON	TX	77030-3411	SO I	BIPAI HIV/AIDS Network	\$415,139.00
		Baylor College of Medicine International Pediatric AIDS Initiative	1102 Bates Street, Suite FC-630	HOUSTON	TX	77030-3411	SO I	BIPAI Malawi Pediatric Hem/Onc Needs Assessment	\$100,000.00
		Baylor College of Medicine International Pediatric AIDS Initiative	1102 Bates Street, Suite FC-630	HOUSTON	TX	77030-3411	SO I	BIPAI Romania HCV Program Symposium on Neglected Tropical Diseases in the US and border region with Mexico	\$478,973.00
		William Marsh Rice University	PO BOX 1892	HOUSTON	TX	77251-1892	PC		\$94,300.00
		Legal Name Unique Count for TX							\$2,314,637.00
		Payment Amount Total for TX							\$2,314,637.00
		Legal Name Unique Count for US							\$12,292,102.52
		Payment Amount Total for US							\$12,292,102.52



**AbbVie Foundation  
2014 Form 990-PF  
Part VII-B, Line 5C**

**Report of Expenditure Responsibility Grants**

Grantee: North Chicago Community Partners  
855 Skokie Highway North, Suite D  
Lake Bluff, IL 60044

Date and amount of grant.

<u>Date</u>	<u>Amount</u>
12/2/14	\$ 246,833

Purpose of grant: Adopt-A-School Project - North Elementary

Amount of grant spent by grantee (based on most recent report received from the grantee): Not available

<u>Amount</u>
\$ -

Dates of reports received from grantee: Report pending - 1st report not due until FYE 6/30/2015

Date

To the knowledge of the Foundation, the grantee did not divert any portion of the grant funds from the purpose of the grant. Because the Foundation has not yet received the grantee's reports, the Foundation has not conducted any independent verification of the grantee's reports.

AbbVie Foundation  
2014 Form 990-PF  
Part VII-B, Line 5C

Report of Expenditure Responsibility Grants

Primary Grantee: Albert B. Sabin Vaccine Institute, Inc.  
2000 Pennsylvania Ave., NW Ste 7100  
Washington, DC  
20006-1894

Secondary Grantee: Sinergias                      FYE      12/31/2014  
16#39<sup>a</sup>  
78 Oficina 202  
Bogotá, Colombia

Date and amount awarded to Secondary Grantee (as of primary grantee's fiscal year end):

Date	Amount
9/26/14	\$ 99,000

Purpose of grant: Improving coverage for the prevention, control and elimination of five prioritized neglected tropical diseases (NTDs) in Vaupes province, in the Amazon region of Colombia

Amount of grant spent by Secondary Grantee (based on most recent report received from the Secondary Grantee):

Amount
\$ 39,025

Dates of reports received from Secondary Grantee:

Date
2/18/15

To the knowledge of the Foundation, the grantee did not divert any portion of the grant funds from the purpose of the grant. Further, the Foundation had no reason to doubt the accuracy or reliability of the grantee's reports and therefore conducted no independent verification of the grantee's reports

**AbbVie Foundation  
2014 Form 990-PF  
Part VII-B, Line 5C**

**Report of Expenditure Responsibility Grants**

Primary Grantee: Baylor College of Medicine International Pediatric AIDS Initiative  
1102 Bates Street, Suite FC-630  
Houston, TX  
77030-3411

Secondary Grantee: Fundatia Baylor-Marea Neagra  
(Baylor Black Sea Foundation) FYE 12/31/2014  
Str. Prelungirea Liliacului, Nr.10, Km 4-5  
Constanta, Romania

Date and amount awarded to Secondary Grantee (as of primary grantee's fiscal year end):

Date	Amount
5/22/14	\$ 478,973

Purpose of grant: Preventing, testing and caring for patients with viral hepatitis

Amount of grant spent by Secondary Grantee (based on most recent report received from the Secondary Grantee):

Amount
\$ 312,872

Dates of reports received from Secondary Grantee.

Date
3/18/15

To the knowledge of the Foundation, the grantee did not divert any portion of the grant funds from the purpose of the grant. Further, the Foundation had no reason to doubt the accuracy or reliability of the grantee's reports and therefore conducted no independent verification of the grantee's reports.

AbbVie Foundation  
2014 Form 990-PF  
Part VII-B, Line 5C

Report of Expenditure Responsibility Grants

Grantee: Caring Ambassadors      FYE      12/31/2014  
P.O. Box 1748  
Oregon City, OR 97045

Date and amount of grant:

<u>Date</u>	<u>Amount</u>
12/2/14	\$ 253,282

Purpose of grant:      Supporting hepatitis awareness through program enhancement

Amount of grant spent by grantee (based on most recent report received from the grantee).

<u>Amount</u>
\$ 8,400

Dates of reports received from grantee:

<u>Date</u>
2/18/15

To the knowledge of the Foundation, the grantee did not divert any portion of the grant funds from the purpose of the grant. Further, the Foundation had no reason to doubt the accuracy or reliability of the grantee's reports and therefore conducted no independent verification of the grantee's reports.