**Part I  Reporting Issuer**

1. Issuer's name  
   **Verizon Communications Inc.**

2. Issuer's employer identification number (EIN)  
   **23-2258884**

3. Name of contract for additional information  
   **Investor Relations**

4. Telephone No. of contact  
   **(212) 395-1525**

5. Email address of contact  
   **fixedincomeir@verizon.com**

6. Number and street (or P.O. box if mail is not delivered to street address) of contact  
   **One Verizon Way**

7. City, town, or post office, state, and Zip code of contact  
   **Basking Ridge, NJ 07920**

8. Date of action  
   **February 3, 2017**

9. Classification and description  
   **Debt for debt exchange**

10. CUSIP number  
    **See attached**

11. Serial number(s)  
    **See attached**

12. Ticker symbol  
    **VZ**

13. Account number(s)  

**Part II  Organizational Action**

Attach additional statements if needed. See back of form for additional questions.

14. Describe the organizational action and, if applicable, the date of the action or the date against which shareholders' ownership is measured for the action  
   **See attached.**

15. Describe the quantitative effect of the organizational action on the basis of the security in the hands of a U.S. taxpayer as an adjustment per share or as a percentage of old basis  
   **See attached.**

16. Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates  
   **See attached.**
17  List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ See attached.

18  Can any resulting loss be recognized? ▶ See attached.

19  Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ See attached.

Signature ▶ William P. Van Saders Date ▶ 3/13/2017

Print your name ▶ William P. Van Saders Title ▶ SENIOR VICE PRESIDENT - DEPUTY GENERAL COUNSEL - CORP TAX

Paid Preparer Use Only
Print/Type preparer’s name Preparer’s signature Date Check □ if self-employed Firm’s EIN ▶
Firm’s name ▶ Firm’s address ▶ Phone no.