## Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

## Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

ssuer							
	2 Issuer's employer identification number (EIN)						
<b>).</b>	23-2259884						
3 Name of contact for additional information 4		5 Email address of contact					
Investor Relations		shareowner.services@verizon.com					
O. box if mail is not	ct 7 City, town, or post office, state, and ZIP code of contact						
	Basking Ridge, NJ 07920						
	n						
11 Serial number(s	s) 12 Ticker symbol	13 Account number(s)					
	VZ						
Part II Organizational Action Attach additional statements if needed. See back of form for additional questions.  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.  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.							
on of the change in be attached.	asis and the data that supports the c	calculation, such as the market values of securities and the					
	itional information  O. box if mail is not  11 Serial number(s  anal Action Attactional action and, if and action and if and action and if and action and if and actional action and if and action act	itional information  4 Telephone No. of contact (212) 395-1525  O. box if mail is not delivered to street address) of contact  9 Classification and description Debt for debt exchange  11 Serial number(s)  12 Ticker symbol  VZ  Inal Action Attach additional statements if needer in action and, if applicable, the date of the action or the ached.  In of the change in basis and the data that supports the control of the change in					

Par	Ш	Organizational Action (continued)			· · · · · · · · · · · · · · · · · · ·	
4-					Constant	
17	List the	e applicable Internal Revenue Code section(	s) and subsection(s) upon which the tax tr	eatment is based ►	See attached.	
18	Can ar	ny resulting loss be recognized? ► See att	ached.			
19	Provid	e any other information necessary to implen	nent the adjustment, such as the reportab	e tax year ► See att	ached.	
	Linc	der penalties of perjury, I declare that I have exam	nined this return, including accompanying scher	fules and statements a	and to the hest of my knowledge and	
		ef, it is true, correct, and complete. Declaration of				
Sign		william Van Saders				
Here	Sigr	nature ►		Nov 12, 2	2020	
		William Van Saders		SVP & Depu	ity General Counsel - Taxes	
Paic		Print/Type preparer's name	Preparer's signature	Date	Check if PTIN	
	ı Darer	Alexander Cadmus			self-employed P02188948	
	Only	Firm's name ► Cleary Gottlieb Steen &			Firm's EIN ▶ 13-5599083	
		Firm's address ► One Liberty Plaza, New			Phone no. (212) 225-2000	
<u>Send</u>	Form 8	3937 (including accompanying statements) to	o: Department of the Treasury, Internal Re	venue Service, Ogde	en, UT 84201-0054	