## 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

Part   Reporting Issuer		
1 Issuer's name	2 Issuer's employer identification number (EIN)	
Verizon Communications Inc.	23-2259884	
3 Name of contact for additional information 4 Telephone No. of contact		5 Email address of contact
Investor Relations (212)395-1525		shareowner.services@verizon.com
6 Number and street (or P.O. box if mail is not	7 City, town, or post office, state, and ZIP code of contact	
One Verizon Way		Basking Ridge, NJ 07920
8 Date of action 9 Classification and description		
August 9 and August 21, 2024 Debt for debt exchange		
10 CUSIP number 11 Serial number(	s) 12 Ticker symbol	13 Account number(s)
See attached.	VZ	
Part II Organizational Action Attac	ch additional statements if needed. Se	e back of form for additional questions.
the action ► See attached.		e against which shareholders' ownership is measured for
		· · · · · · · · · · · · · · · · · · ·
Describe the quantitative effect of the organishare or as a percentage of old basis ►	anizational action on the basis of the securi	ity in the hands of a U.S. taxpayer as an adjustment per
16 Describe the calculation of the change in I valuation dates ► See attached.	pasis and the data that supports the calcula	ation, such as the market values of securities and the

Pa	rt II	Organizational Action (continued)	Page Z		
17	lis	the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based	0		
••	LIS	the applicable internal revenue code section(s) and subsection(s) upon which the tax treatment is based	See attached.		
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			<del></del>		
18	Ca	n any resulting loss be recognized? ► <u>See attached</u> .			
19	Dro	vide any other information necessary to implement the adjustment, such as the reportable tax year ▶ <u>Set</u>			
	• • • •	wide any other information necessary to implement the adjustment, such as the reportable tax year ► <u>561</u>	attached.		
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		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statement	s, and to the best of my knowledge and		
C:		belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer	parer has any knowledge.		
	Sign Here Signature / William: P. Van Sank				
		Signature Valve Date 5VP	Donuty Goutra		
_	[	Print your name > William P. Van Saders Title > Con	nsel-Corporate Taxe		
Pai		Print/Type preparer's name Preparer's signature Date	Check if PTIN		
Pre			self-employed P03140025		
Us	e O	nly   Firm's name	Firm's EIN ► 13-5599083  Phone no. (212)225-2000		
Sen	d Fo	m 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Oc	gden, UT 84201-0054		