## Edgar Filing: SCHULMAN DANIEL H - Form 4

|  | N DANIEL H  |   |   |  |              |   |   |                                     |                         |  |
|--|---|---|---|--|--------------|---|---|-------------------------------------|-------------------------|--|
| Form 4<br>March 12, 2  | 019   |   |   |  |              |   |   |                                     |                         |  |
|  |   |   |   |  |              |   |   | OMB A                               | PPROVAL                 |  |
| FORM 4 UNITED STATES SI  |   |   |   | SECURITIES AND EXCHANGE COMMISSION<br>Washington, D.C. 20549   |              |   |   | N OMB<br>Number:                    | 3235-0287               |  |
| Check th<br>if no lon<br>subject to<br>Section<br>Form 4 of<br>Form 5<br>obligation<br>may com<br><i>See</i> Instru<br>1(b). | nger<br>16.<br>16.<br>or<br>Filed pur<br>Dns<br>Section 17( | <b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b><br><b>SECURITIES</b><br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |   |  |              |   |   | Estimated<br>burden hou<br>response | urs per                 |  |
| (Print or Type   | Responses)  |   |   |  |              |   |   |                                     |                         |  |
| ,  |   |   | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>VERIZON COMMUNICATIONS<br>INC [VZ] |  |              | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable) |   |                                     |                         |  |
|  | COMMUNICAT<br>AVENUE OF TI                                  |   |   | of Earliest T<br>Day/Year)<br>2019   | ransaction   |   | X Director<br>Officer (giv<br>below)  | ve title109<br>below)               | % Owner<br>her (specify |  |
|  |   |   |   | mendment, Date Original<br>Month/Day/Year)   |              |   | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person |                                     |                         |  |
| NEW YOR  | K, NY 10036   |   |   |  |              |   | Form filed by<br>Person   | More than One R                     | eporting                |  |
| (City)   | (State)   | (Zip)   | Tab   | ole I - Non-I  | Derivative   | Securities A  | cquired, Disposed   | of, or Beneficia                    | lly Owned               |  |
| 1.Title of<br>Security<br>(Instr. 3)   |   | action Date 2A. Deemed<br>'Day/Year) Execution Date, if<br>any<br>(Month/Day/Year)  |   | 3. 4. Securities<br>TransactionAcquired (A) or<br>Code Disposed of (D)<br>(Instr. 8) (Instr. 3, 4 and 5)<br>(A)<br>or<br>Code V Amount (D) Price |              |   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I)<br>(Instr. 4)                                    | Indirect                            |                         |  |
| Reminder: Re   | port on a separate line                                     | e for each cla  | ass of sec  | urities bene   | ficially own | ned directly of   | or indirectly.  |                                     |                         |  |

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5. Number<br>onf Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed of<br>(D)<br>(Instr. 3, 4,<br>and 5) | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | (Instr. 3 and 4) |  | 8. Pric<br>Deriva<br>Securi<br>(Instr. |
|---|---|---|---|--|--|--|--------------------|------------------|--|--|
|   |   |   |   | Code V                                 | (A) (D)  | Date<br>Exercisable  | Expiration<br>Date | Title            | Amount<br>or<br>Number<br>of<br>Shares |  |
| Phantom<br>Stock                                    | <u>(1)</u>  | 03/08/2019                              |   | А                                      | 3,096  | (1)  | (1)                | Common<br>Stock  | 3,096                                  | \$                                     |

## **Reporting Owners**

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| Reporting Owner Name / Address  | Relationships |            |         |       |  |  |
|---|---------------|------------|---------|-------|--|--|
|   | Director      | 10% Owner  | Officer | Other |  |  |
| SCHULMAN DANIEL H<br>VERIZON COMMUNICATIONS INC.<br>1095 AVENUE OF THE AMERICAS<br>NEW YORK, NY 10036 | Х             |            |         |       |  |  |
| Signatures  |               |            |         |       |  |  |
| William L. Horton, Jr., Attorney-in-fact f<br>Schulman  | (             | 03/12/2019 |         |       |  |  |
| <u>**</u> Signature of Reporting Person   |               | Date       |         |       |  |  |

## **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).
- Each share of phantom stock is the economic equivalent of one share of common stock and is settled in cash. The shares of phantom stock (1)become payable following the reporting person's termination of service as a director.
- (2) Includes phantom stock acquired through dividend reinvestment.

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.