

Report of Organizational Actions Affecting Basis of Securities

OMB No. 1545-2224

► See separate instructions.

Part I Reporting Issuer

1 Issuer's name Microchip Technology Incorporated		2 Issuer's employer identification number (EIN) 86-0629024	
3 Name of contact for additional information Gary W. McDaniel	4 Telephone No. of contact 480-792-7200	5 Email address of contact gary.mcdaniel@microchip.com	
6 Number and street (or P.O. box if mail is not delivered to street address) of contact 2355 W. Chandler Blvd.		7 City, town, or post office, state, and Zip code of contact Chandler, AZ 85224	
8 Date of action 2023		9 Classification and description Dividends on Common Stock	
10 CUSIP number 595017104	11 Serial number(s)	12 Ticker symbol MCHP	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 ► **Distributions to shareholders paid on:**

September 5, 2023 in the amount of \$0.41 per share.

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 ► **100% of the distribution described above represents a taxable dividend.**

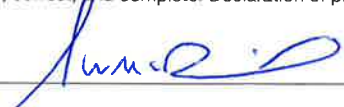
16 Describe the calculation of the change in basis and the data that supports the calculation, such as the market values of securities and the valuation dates ► **As described above, Microchip Technology Incorporated has determined that of such distributions described above, 100% will be treated as a taxable dividend under Section 301(c)(2).**

	Total Per Share	Taxable	Return of
Payment Date	Distribution	Dividend	Capital
09/05/2023	\$0.41	\$0.41	\$0.00

Part II Organizational Action (continued)**17** List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ►**Internal Revenue Code Sections 301(c)(2) and 301(c)(3)****18** Can any resulting loss be recognized? ► **n/a****19** Provide any other information necessary to implement the adjustment, such as the reportable tax year ► **2023****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 officer) is based on all information of which preparer has any knowledge.

Signature ►



Date ►

10/9/2023Print your name ► **Gary W. McDaniel**Title ► **Tax Director****Paid
Preparer
Use Only**

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if
self-employed

PTIN

Firm's name ►

Firm's EIN ►

Firm's address ►

Phone no.