FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL

| OMB Number:              | 3235-0287 |
|--------------------------|-----------|
| Estimated average burden |           |
| ha nav vaananaa.         | 0.5       |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| purchase or sale or issuer that is inter | e conditions of Rule |                                       |   |  |  |  |  |  |  |
|--|----------------------|---------------------------------------|---|--|--|--|--|--|--|
| 1. Name and Addres                       | ss of Reporting Pers |                                       | 2. Issuer Name and Ticker or Trading Symbol MICROCHIP TECHNOLOGY INC [ MCHP ] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  |  |  |  |  |  |
|  |                      | <del>_</del>                          |   | X Director 10% Owner   |  |  |  |  |  |
| (Last)<br>C/O MICROCH<br>2355 WEST CH    |                      | (Middle)<br>GY INCORPORATED<br>LEVARD | 3. Date of Earliest Transaction (Month/Day/Year) 08/21/2023                   | Officer (give title Other (specify below)  |  |  |  |  |  |
| (Street) CHANDLER                        | AZ                   | 85224-6199                            | 4. If Amendment, Date of Original Filed (Month/Day/Year)                      | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |  |  |  |  |  |
| (City)                                   | (State)              | (Zip)                                 |   |  |  |  |  |  |  |

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 3.<br>Transaction<br>Code (Instr.<br>8) |  | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) |               |         | Securities<br>Beneficially Owned | 6. Ownership<br>Form: Direct (D)<br>or Indirect (I)<br>(Instr. 4) | Beneficial<br>Ownership |
|---------------------------------|--|---|---|--|---|---------------|---------|----------------------------------|---|-------------------------|
|                                 |  |   | Code V                                  |  | Amount  | (A) or<br>(D) | Price   | (Instr. 3 and 4)                 |   | (Instr. 4)              |
| Common Stock                    | 08/21/2023                                 |   | M                                       |  | 2,748   | A             | \$80.52 | 38,430                           | D   |                         |

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security (Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transac<br>Code (li<br>8) |   | Derivative |       | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amount of<br>Securities Underlying<br>Derivative Security (Instr.<br>3 and 4) |                                     | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|--|---|--|---|---------------------------------|---|------------|-------|--|--------------------|--|-------------------------------------|---|--|--|--|
|  |   |  |   | Code                            | v | (A)        | (D)   | Date<br>Exercisable  | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of Shares |   | Transaction(s)<br>(Instr. 4)   |  |  |
| Restricted Stock<br>Units                        | \$80.52   | 08/21/2023                                 |   | M                               |   |            | 2,748 | (1)  | (1)                | Common<br>Stock  | 2,748                               | \$0   | 0  | D  |  |
| Restricted Stock<br>Units                        | (2)   | 08/22/2023                                 |   | A                               |   | 2,492      |       | (3)  | (3)                | Common<br>Stock  | 2,492                               | \$0   | 2,492  | D  |  |

### **Explanation of Responses:**

- 1. The restricted stock units vested in full on August 21, 2023. Vested shares were delivered to the reporting person upon vest.
- 2. Each restricted stock unit represents a contingent right to receive one share of Microchip Technology Incorporated common stock.
- 3. The restricted stock units will vest in full on August 22, 2024 as long as the individual remains a service provider through the vesting date. Vested shares will be delivered to the reporting person upon vest.

### Remarks:

<u>Deborah L. Wussler, as Attorney-</u>in-Fact

\*\* Signature of Reporting Person

08/23/2023

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.