

Employer and Plan Sponsor

The Employer and Plan Sponsor is Micron Technology, Inc. and any other affiliated entity which participates in a plan pursuant to the terms of the plan. This document is effective January 1, 2023.

Participants and beneficiaries may receive from the Plan Administrator, upon written request, information as to whether a particular employer is a sponsor of a plan and, if the employer is a plan sponsor, the employer's address.

Plan Administrator

The Plan Administrator for all of the Plans is:

Micron Technology, Inc.
8000 South Federal Way
Boise, Idaho 83716
(208) 368-4000

Plan Fiduciary

The Plan Administrator is the Plan Fiduciary for all Plans.

Trustee

The Retirement at Micron (RAM) 401(k) Plan is the only U.S. based Plan for Micron team members which has a trustee.

The Trustee for the RAM 401(k) Plan is:

Fidelity Management Trust Company
245 Summer Street Mail Zone V7B
Boston, MA 02110

Agent for Service of Process

The Agent for Service of Process for all of the Plans, unless otherwise noted, is:

Office of the General Counsel
Micron Technology, Inc.
8000 South Federal Way
Boise, Idaho 83716
(208) 368-4000

For the Retirement at Micron (RAM) 401(k) Plan, service of process may also be made upon the Trustee listed above.

Funding

Fully-Insured Group Health Plan. The

Fully-Insured Group Health Plan includes a variety of fully-insured plans. See the accompanying chart for details. If a plan is fully-insured, benefits are provided under a group insurance contract entered into between the Employer and the insurance company listed. Claims for benefits are sent to the insurance company, not the Employer. The insurance company is responsible for processing and paying claims, not the Employer. Insurance premiums for team members and their families will be paid out of the general assets of the Employer.

Self-Insured Group Health Plan. The Self-Insured Group Health Plan includes a variety of self-insured plans. See the accompanying chart for details. If a plan is self-insured, benefits are paid directly out of the general assets of the Employer. There is no special fund or trust or insurance from which benefits are paid. The Employer has hired the Claims Administrator listed in the accompanying chart to process claims. The Claims Administrator does not serve as an insurer, just a claims processor. Claims for benefits are sent to the Claims Administrator. The Claims Administrator is a fiduciary for claims processing and claim appeals purposes. It processes the claims, then requests and receives funds from the Employer to pay the claims, and makes payment on the claims. The Employer is ultimately responsible for providing self-insured plan benefits, not the listed Claims Administrator.

Day Care Flexible Spending Account Plan. This Plan is self-insured. Benefits are paid directly out of the general assets of the Employer. There is no special fund or trust or insurance from which benefits are paid. The Employer has hired Flores & Associates to process claims. Flores & Associates does not serve as an insurer, just a claims processor. Claims for benefits are sent to Flores & Associates. It processes the claims, then requests and receives funds from the Employer to pay the claims, and makes payment on the claims. The Employer is ultimately responsible for providing plan benefits, not Flores & Associates. This Plan is not subject to ERISA.

Life, Travel, and Disability Plan. This Plan

is a mixture of self-insured and fully-insured plans. See the accompanying chart for details. For the self-insured plans, benefits are paid directly out of the general assets of the Employer. There is no special fund or trust or insurance from which benefits are paid. The Claims Administrator does not serve as an insurer, just a claims processor. The Claims Administrator is a fiduciary for claims processing and claim appeals purposes. Claims for the benefits are sent to the Claims Administrator. It processes the claims, then requests and receives funds from the Employer to pay the claims, and makes payment on the claims. The Employer is ultimately responsible for providing those plan benefits, not the listed Claims Administrator.

For the fully-insured plans, benefits are provided under a group insurance contract entered into between the Employer and the insurance company listed. Claims for benefits are sent to the insurance company, not the Employer. The insurance company is responsible for processing and paying claims, not the Employer. Insurance premiums for team members and their families will be paid out of the general assets of the Employer.

Retirement at Micron (RAM) 401(k) Plan. Funding for the RAM 401(k) Plan is through a trust agreement with Fidelity Management Trust Company.

Authority to Terminate the Plans or Amend or Eliminate Benefits

Micron has established the Self-Insured Group Health Plan, the Fully-Insured Group Health Plan, the Life, Travel and Disability Plan and the Day Care Flexible Spending Account Plan with the intention that they will be maintained indefinitely. However, Micron has no obligation whatsoever to maintain these plans or any particular benefit offered by these plans for any given length of time. Micron reserves the right to terminate the plans or any benefit offered under the plans at any time by written document executed by its Board of Directors, the Senior Vice President of People Services or another authorized person.

Upon termination or discontinuance of a plan or benefit, all elections with respect to the

terminated plan or benefit shall terminate, and payments with respect to benefits available under the terminated plan or benefit shall be made only with respect to claims incurred on or prior to the date of the termination.

Micron reserves the right to amend the provisions of the plans and any benefit offered by the plans to any extent and in any manner it desires by execution of a written document by an authorized party describing the intended amendment(s). Micron may also amend the Self-Insured Group Health Plan, the Fully-Insured Group Health Plan, the Life, Travel and Disability Plan and the Day Care Flexible Spending Account Plan at any time by preparation and publication with the supervision of an authorized party of a revised Benefits Handbook or other summary plan description or a supplement to the Benefits Handbook or other summary of material modifications.

Any fully-insured plan or benefit offered may also be terminated or amended as described in the applicable plan description prepared by the relevant insurer.

See the detailed description of the Micron RAM 401(k) Plan in the Benefits Handbook for an additional description of the authority to terminate that plan or amend or eliminate the benefits offered by that plan.

Plan Information

The Plan Name, Plan Number and Plan Effective Date are shown in the next chart.

Beneficiary Designation

You are responsible to ensure that external documents such as divorce decrees or property settlements do not contradict your Beneficiary Designations on record with the Micron Group Life Insurance Plans at benefitexpress, and the Micron Technology, Inc. Retirement at Micron (RAM) 401(k) Plan at Fidelity. If you wish to revise your Beneficiary Designations to remove a former spouse you must update the Beneficiary Designation information stored on-line at enrollnow.micron.com and Fidelity. Access to enrollnow.micron.com requires DUO Authenticator.

Plan Year

The Plan Year for all Micron Technology, Inc. Plans is January 1 through December 31 unless otherwise noted. The first Plan Year for each of the Plans will begin on each respective Plan's Effective Date through December 31 of that particular year.

| Plan Name | Plan Number | Plan Effective Date | Plan Year |
|---|--------------------|----------------------------|-------------------------|
| Self-Insured Group Health Plan | 518 | January 1, 2005 | January 1 - December 31 |
| Fully-Insured Group Health Plan | 519 | January 1, 2005 | January 1 - December 31 |
| Life, Travel and Disability Plan | 520 | January 1, 2005 | January 1 - December 31 |
| Day Care Flexible Spending Account Plan | Not Applicable | January 1, 1996 | January 1 - December 31 |
| Retirement at Micron (RAM) 401(k) Plan | 004 | September 1, 1987 | January 1 - December 31 |

The Self-Insured Group Health Plan includes the following Plans:

| Benefit Plan Name | Type of Administration | Claims Administrator | Policy Number | Eligibility | Contribution Source |
|---|--|--|----------------------|------------------------------------|----------------------------|
| Value High Deductible Medical Plan | Self-funded Claims Administration through Administrative Agreement | Blue Cross of Idaho 3000 E. Pine Avenue Meridian, ID 83642-5995 (208) 286-3410 | 10020590 | Team Member, Spouse, and Dependent | Employer and Team Member |
| Consumer Directed High Deductible Medical Plan | Self-funded Claims Administration through Administrative Agreement | Blue Cross of Idaho 3000 E. Pine Avenue Meridian, ID 83642-5995 (208) 286-3410 | 10020590 | Team Member, Spouse, and Dependent | Employer and Team Member |
| Idaho PPO Medical Plan | Self-funded Claims Administration through Administrative Agreement | Blue Cross of Idaho 3000 E. Pine Avenue Meridian, ID 83642-5995 (208) 286-3410 | 10020590 | Team Member, Spouse, and Dependent | Employer and Team Member |
| Value PPO Medical Plan | Self-funded Claims Administration through Administrative Agreement | Blue Cross of Idaho 3000 E. Pine Avenue Meridian, ID 83642-5995 (208) 286-3410 | 10020590 | Team Member, Spouse, and Dependent | Employer and Team Member |

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|---|--|--|----------------|------------------------------------|--------------------------|
| PPO Medical Plan | Self-funded Claims Administration through Administrative Agreement | Blue Cross of Idaho 3000 E. Pine Avenue Meridian, ID 83642-5995 (208) 286-3410 | 10020590 | Team Member, Spouse, and Dependent | Employer and Team Member |
| Clinic Plan (Boise, ID & San Jose, CA) | Self-funded Claims Administration through Administrative Agreement | Crossover Health 101 W. Avenida Vista Hermosa, Ste. 120 San Clemente, CA 92672 (208) 368-5656 (408) 495-5850 | N/A | Team Member, Spouse, and Dependent | Employer and Team Member |
| Medical SelectUS | Self-funded Claims Administration through Administrative Agreement | Blue Cross of Idaho 3000 E. Pine Avenue Meridian, ID 83642-5995 (208) 286-3410 | 10020590 | Team Member, Spouse, and Dependent | Employer and Team Member |
| Dental | Self-funded Claims Administration through Administrative Agreement | Blue Cross of Idaho 3000 E. Pine Avenue Meridian, ID 83642-5995 (208) 286-3410 | 10020590 | Team Member, Spouse, and Dependent | Employer and Team Member |
| Dental Plus | Self-funded Claims Administration through Administrative Agreement | Blue Cross of Idaho 3000 E. Pine Avenue Meridian, ID 83642-5995 (208) 286-3410 | 10020590 | Team Member, Spouse, and Dependent | Employer and Team Member |
| Delta Dental | Self-funded Claims Administration through Administrative Agreement | Delta Dental of Idaho 555 E. Parkcenter Blvd., Boise, Idaho 83706 800-356-7586 | 5850 | Team Member, Spouse, and Dependent | Employer and Team Member |
| Vision | Self-funded Claims Administration through Administrative Agreement | VSP PO Box 997105 Sacramento, CA 95899-7105 (800) 877-7195 | 30021795 | Team Member, Spouse, and Dependent | Employer and Team Member |
| Vision Choice | Self-funded Claims Administration through Administrative Agreement | VSP PO Box 997105 Sacramento, CA 95899-7105 (800) 877-7195 | 30021795 | Team Member, Spouse, and Dependent | Employer and Team Member |
| Health Care Flexible Spending Account | Self-funded Claims Administration through Administrative Agreement | Flores & Associates PO BOX 31397 Charlotte, NC 28231 (800) 532-3327 | Not Applicable | Team Member | Team Member |
| Limited Purpose Flexible Spending Account | Self-funded Claims Administration through Administrative Agreement | Flores & Associates PO BOX 31397 Charlotte, NC 28231 (800) 532-3327 | Not Applicable | Team Member | Team Member |

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|------------------------------------|---|---|----------------|-------------|----------|
| Early Cancer Detection Plan | Self-funded test provided through Test Purchase Agreement | Grail 1525 O'Brien Drive Menlo Park, CA 94025 (833)-694-2553 | Not Applicable | Team Member | Employer |
|------------------------------------|---|---|----------------|-------------|----------|

The Fully-Insured Group Health Plan includes the following Plans:

| Benefit Plan Name | Type of Administration | Insurance Company | Policy Number | Eligibility | Contribution Source |
|--|--------------------------------------|--|---|-----------------------------------|----------------------------|
| Medical HMO | Fully-Insured Group Insurance Policy | Kaiser Foundation Health Plan, Inc. Northern California Region 1950 Franklin Street Oakland, CA 94612 (800) 464-4000 | No CA 38521, MAS 26875, GA 10680, CO 47257 | Team Member, Spouse and Dependent | Employer and Team Member |
| Medical International Health Plan | Fully-insured Group Insurance Policy | Cigna International P.O.Box 15111 Wilmington, DE 19850 (800)243-1348 | 04491A | Team Member, Spouse and Dependent | Employer and Team Member |
| Employee Assistance Program | Fully-insured Group Insurance Policy | ComPsych Total Wellness | Not Applicable | Team, Spouse, and Dependent | Employer |
| Willamette Dental Blue Plan | Fully-Insured Group Insurance Policy | Blue Cross of Idaho 3000 E. Pine Avenue Meridian, ID 83642-5995 (208) 286-3410 | 10020590 | Team Member, Spouse and Dependent | Employer and Team Member |

The Life, Travel, and Disability Plan includes the following Plans:

| Benefit Plan Name | Type of Administration | Claims Administrator or Insurance Company | Policy Number | Eligibility | Contribution Source |
|---|--|--|----------------------|------------------------------------|----------------------------|
| Short-Term Disability | Self-funded Claims Administration through Administrative Agreement | Matrix Absence Management 5225 Hellyer Avenue Suite 210 San Jose, CA 95138 (877) 202-0055 | Not Applicable | Team Member | Employer |
| Fully-insured New York portion of Short-Term Disability Plan | Fully-insured Group Insurance Policy | Reliance Standard Life Insurance Company 153 East 53rd Street Suite 4950 New York, NY 10022 (800) 644-1103 | DBL 251063 | Team Member | Employer |
| Long-Term Disability | Fully-insured Group Insurance Policy | Reliance Standard Life Insurance Company 2001 Market Street, Suite 1500 Philadelphia PA 19103 (800) 644-1103 | LTD - 109660 | Team Member | Employer |
| Long-Term Disability Buy-Up Plan | Fully-insured Group Insurance Policy | Reliance Standard Life Insurance Company 2001 Market Street, Suite 1500 Philadelphia PA 19103 (800) 644-1103 | LTD - 109660 | Team Member | Team Member |
| Basic Life and AD&D | Fully-insured Group Insurance Policy | The Hartford Life and Accident Insurance Company 200 Hopmeadow Street Simsbury, CT 06089 (888) 563-1124 | GL-674815 | Team Member | Employer |
| Supplemental (Voluntary) Life and AD&D | Fully-insured Group Insurance Policy | The Hartford Life and Accident Insurance Company 200 Hopmeadow Street Simsbury, CT 06089 (888) 563-1124 | GL-674815 | Team Member, Spouse, and Dependent | Team Member |
| Business Travel Accident | Fully-insured Group Insurance Policy | Chubb Group of Insurance Companies 15 Mountain View Road Warren, NJ 07061-1615 (800) 252-4670 | 9906-80-80 | Team Member | Employer |
| Medical Benefits Abroad International Health Plan | Fully-insured Group Insurance Policy | Cigna International P.O.Box 15111 Wilmington, DE 19850 (800)243-1348 | 04491B | Team Member, Spouse and Dependent | Employer |