

Vendor # (Internal Use): \_\_\_\_\_



### Vendor Sales Tax Questionnaire

Micron Technology, Inc. is the parent company to the following entities with which you may be conducting business:

- IM Flash Technologies, LLC
- Micron Consumer Products Group, a Division of Micron Semiconductor Products, Inc (Crucial™)
- Micron Semiconductor Products, Inc.

Incomplete or incorrect vendor tax information can cause delays with Micron’s processing and payment of your invoices. To avoid tax issues, please have a member of your tax department complete the sales/use tax questionnaire below.

**Vendor Name** \_\_\_\_\_ **EIN#** \_\_\_\_\_  
**Vendor Address** \_\_\_\_\_

**1. Where are you registered to collect tax? (Check the states that apply)**

- |  |                 |
|--|-----------------|
| AL Reg. # _____                          | MO Reg. # _____ |
| AZ Reg. # _____                          | NE Reg. # _____ |
| AR Reg. # _____                          | NV Reg. # _____ |
| CA Reg. # _____                          | NJ Reg. # _____ |
| CO Reg. # _____                          | NM Reg. # _____ |
| Do you collect Boulder County tax? (Y/N) | NY Reg. # _____ |
| CT Reg. # _____                          | NC Reg. # _____ |
| DC Reg. # _____                          | ND Reg. # _____ |
| FL Reg. # _____                          | OH Reg. # _____ |
| GA Reg. # _____                          | OK Reg. # _____ |
| HI Reg. # _____                          | PA Reg. # _____ |
| ID Reg. # _____                          | RI Reg. # _____ |
| IL Reg. # _____                          | SC Reg. # _____ |
| IN Reg. # _____                          | SD Reg. # _____ |
| IA Reg. # _____                          | TN Reg. # _____ |
| KS Reg. # _____                          | TX Reg. # _____ |
| KY Reg. # _____                          | UT Reg. # _____ |
| LA Reg. # _____                          | VT Reg. # _____ |
| ME Reg. # _____                          | VA Reg. # _____ |
| MD Reg. # _____                          | WA Reg. # _____ |
| MA Reg. # _____                          | WV Reg. # _____ |
| MI Reg. # _____                          | WI Reg. # _____ |
| MN Reg. # _____                          | WY Reg. # _____ |
| MS Reg. # _____                          |                 |

**2. Please provide two people we may contact with tax related questions.**

Primary Contact \_\_\_\_\_ Title \_\_\_\_\_  
Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_ Email Address \_\_\_\_\_  
Alternate Contact \_\_\_\_\_ Title \_\_\_\_\_  
Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_ Email Address \_\_\_\_\_

**3. Signature**

Name of Preparer (print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
Title \_\_\_\_\_ Telephone Number \_\_\_\_\_

Please email this completed form to [vendortax@micron.com](mailto:vendortax@micron.com).