



TRUST CHANGE FORM

Use this form to change from an Individual/Joint type Note to a Trust or to change the Trustee/Co-trustee

If the tax ID assigned to the trust is different than the primary social security number currently registered on the Demand Notes, a new Demand Notes will have to be opened. Please contact the Demand Notes Service Center for further instructions at 800-684-8823, M-F from 8 a.m. to 7 p.m. ET.

Please provide the following information. Information in all fields applicable to your Demand Notes change is required.

Demand Notes number 9000-

PRINT NAME

LAST 6-DIGITS SSN

DAYTIME PHONE NUMBER

1 CHANGE FROM AN INDIVIDUAL/JOINT TYPE TO A TRUST DEMAND NOTES

Trust Information: Please provide the titling information as stated on your Trust in this section. You must also provide a copy of your Trust Document or at least the first three and last three pages. We need the pages that state the title, Trustees, Successor Trustees and signature page. All Trustees/Co-Trustees must sign in section 4 and obtain **signature guarantee stamps for each signature.**

TRUST TITLE

DATE OF TRUST AGREEMENT

TRUST TAX ID

Check this box if the current registered owners will be titled as Trustee/Co-Trustee.

2 OWNERSHIP CHANGE(S): Please check the type of change and follow the instructions noted

To Add a Trustee/Co-Trustee

Please complete all of the information requested. Also, if applicable, include the amendment to the Trust which designates the new Trustee(s)/Co-Trustee(s) or any documents that may be required by the Trust to support this change.

Signature and signature guarantee stamps are required on section 4 for all current and new Trustees/Co-Trustees.

If the Successor Trustee(s) has changed and you want to update your Demand Notes records, please provide copies of the documents that support this change. Until the Successor Trustee(s) becomes Trustee(s), you do not have to complete this form.

1

NAME

DRIVER'S LICENSE NUMBER/STATE ID NUMBER

RESIDENTIAL ADDRESS (U.S. ADDRESS ONLY/ NO PO BOXES)

CITY

STATE/ZIP CODE

SOCIAL SECURITY NUMBER

DATE OF BIRTH (MM/DD/YYYY)

MOTHER'S MAIDEN NAME (FOR SECURITY)

()
HOME PHONE

()
WORK PHONE

EMAIL ADDRESS

2

NAME

DRIVER'S LICENSE NUMBER/STATE ID NUMBER

RESIDENTIAL ADDRESS (U.S. ADDRESS ONLY/ NO PO BOXES)

CITY

STATE/ZIP CODE

SOCIAL SECURITY NUMBER

DATE OF BIRTH (MM/DD/YYYY)

MOTHER'S MAIDEN NAME (FOR SECURITY)

()
HOME PHONE

()
WORK PHONE

EMAIL ADDRESS

2

OWNERSHIP CHANGE(S) CONTINUED: Please check the type of change and follow the instructions noted

To Remove an Owner/Trustee/Co-Trustee

If applicable, please include any amendments that support the removal of the Trustee/Co-Trustee. This section can also be used to remove an owner registered on your joint Demand Notes that will not be listed as a Trustee or Co-Trustee. **Signatures and signature guarantee stamps** must be provided on section 4 for each Owner/Trustee/Co-Trustee; unless removed due to death – which requires the submission of an original death certificate.

PRINT NAME TO BE REMOVED

SOCIAL SECURITY NUMBER

3

CHECKBOOK REORDER REQUEST

Please check this box to request an order of new redemption checks reflecting the changes requested on this form. Checkbook will be mailed to the address on file.

4

SIGNATURE AND TAXPAYER CERTIFICATION Signatures are required for processing

By signing this form, I certify that I have reviewed, and agree to be bound by the terms and description of Demand Notes as contained in the Prospectus, and acknowledge that the Demand Notes Committee has the full power and authority to amend the Program, to interpret its provisions, to adopt rules and regulations in connection with the Program, and to set and adjust the rate of interest to be paid on the Demand Notes, all as described in the Prospectus. I have legal capacity and meet the eligibility requirements to invest in Ally Demand Notes pursuant to this investment form.

Further, under penalties of perjury, I certify that the Social Security or taxpayer identification number provided on this form is correct and that I am a U.S. person (including a U.S. resident alien). Unless the box below is checked, I am not subject to backup withholding because I have not been notified by the Internal Revenue Service that I am subject to such withholding, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding. Check box below if applicable.

I am subject to backup withholding under provisions of Section 3406(a)(1)(C) of the Internal Revenue Service Code.

The Internal Revenue Service does not require your consent to any provision of this document other than the certification required to avoid backup withholding.

WRITTEN SIGNATURE (INDIVIDUAL, CUSTODIAN, CORPORATION OR TRUSTEE)

PRINTED NAME

DATE

SIGNATURE GUARANTEE STAMP

WRITTEN SIGNATURE (INDIVIDUAL, CUSTODIAN, CORPORATION OR TRUSTEE)

PRINTED NAME

DATE

SIGNATURE GUARANTEE STAMP

WRITTEN SIGNATURE (INDIVIDUAL, CUSTODIAN, CORPORATION OR TRUSTEE)

PRINTED NAME

DATE

SIGNATURE GUARANTEE STAMP

WRITTEN SIGNATURE (INDIVIDUAL, CUSTODIAN, CORPORATION OR TRUSTEE)

PRINTED NAME

DATE

SIGNATURE GUARANTEE STAMP

5

HELPFUL HINTS

A Signature Guarantee is designed to protect you and Ally Demand Notes against improper transactions or requests by unauthorized persons. It can be obtained from a bank or financial institution. A signature guarantee is required for certain ownership changes, to add or change bank account information and to add or change redemption options. Each owner must have their signature guaranteed. Do not obtain one stamp for all owners. A notary stamp will not be accepted.

Before You Mail:

- Make certain your Demand Notes number, Social Security/tax ID number, printed name and daytime phone number are provided.**
- Verify that the information supplied on this form is complete and accurate.**
- Verify that all owners have signed and dated the form and a signature guarantee stamp has been obtained for each.**
- Make sure all documents and/or original death certificates that support the changes are included with this form.**

Call 800-684-8823, M-F from 8 a.m. to 7 p.m. ET with any questions regarding this form.

Mail completed form to:

**Ally Demand Notes
PO Box 358425
Pittsburgh, PA 15252-8425**

Or overnight to:

**Ally Demand Notes
The Bank of New York Mellon
500 Ross Street
Room 154-0675
Pittsburgh, PA 15262**