RETURN INSTRUCTIONS



Return this form with any attached documents using one of these methods:

Upload/Secure Message

Log in at ally.com, choose Email / Bank Accounts / Send a New Secure Message.

Mail

Ally Bank PO Box 951 Horsham, PA 19044

Fax

Subject Line: Operations Fax Number: 866-699-2969

CUSTODIAL ACCOUNT APPLICATION



Account Product and Selection

Product Type	Quantity	Amount
SPENDING ACCOUNT		\$
SAVINGS ACCOUNT		\$
MONEY MARKET ACCOUNT		\$
NO PENALTY 11-MONTH CD		\$
RAISE YOUR RATE 2-YEAR CD		\$
RAISE YOUR RATE 4-YEAR CD		\$
HIGH YIELD 3-MONTH CD		\$

Product Type	Quantity	Amount
HIGH YIELD 6-MONTH CD		\$
HIGH YIELD 9-MONTH CD		\$
HIGH YIELD 12-MONTH CD		\$
HIGH YIELD 18-MONTH CD		\$
HIGH YIELD 3-YEAR CD		\$
HIGH YIELD 5-YEAR CD		\$
TOTAL		\$

Special Instructions:

UTMA / UGMA Information -

Custodial accounts will reflect a UTMA (Uniform Transfers to Minors Act) or UGMA (Uniform Gifts to Minors Act) title based on the minor's state of residence. Custodial accounts are only available for residents of the United States and the US territories of Guam and the U.S. Virgin Islands.

Important Notifications

To help the United States government fight terrorism and money laundering, federal law requires us to obtain, verify, and record information that identifies each person who opens an account. What this means for you: We will ask for your name, a street address, date of birth, and an identification number, such as a Social Security number or Individual Taxpayer Identification Number (ITIN). We may also ask to see your driver's license or other identifying documents that will allow us to identify you. We only open accounts for U.S. citizens and current U.S. residents. By signing and submitting this application, you are acknowledging that you are a U.S. citizen or current resident of the U.S.

If you have a freeze on your credit as a feature of credit security monitoring, we may contact you to lift the freeze temporarily to verify your identity.

You authorize us to contact you by using any telephone number you provide to us, including a mobile or cell phone number that you are authorized to use. In addition to manual calling, we may use text messages, prerecorded or artificial voice messages, or automatic dialing systems. We will not charge you for any contact, but your mobile phone service provider may.

Custodian Information

I am an existing Ally Bank account owner and would like to use my information already on file. (Complete only Name, Social Security, Occupation, Employer, Date of Birth information below.)

FIRST NAME M.I. LAST NAME / SUFFIX SOCIAL SECURITY OR ITIN DATE OF BIRTH

OCCUPATION EMPLOYER

EMAIL ADDRESS PERSONAL PHONE WORK PHONE

COUNTRY OF CITIZENSHIP

RESIDENTIAL STREET ADDRESS (NO PO BOX, BUS., OR MAIL DROP)

MAILING STREET ADDRESS (IF DIFFERENT THAN RESIDENTIAL)

CUSTODIAL ACCOUNT APPLICATION



Custodian Information (continued) -RESIDENTIAL ADDRESS LINE 2 MAILING ADDRESS LINE 2 RESIDENTIAL CITY STATE ZIP MAILING CITY STATE ZIP If you are not an Ally Bank customer, provide a security question with answer and mother's maiden name that may be used to identify you when contacting us. SECURITY QUESTION SECURITY ANSWER MOTHER'S MAIDEN NAME Minor Information — FIRST NAME LAST NAME / SUFFIX SOCIAL SECURITY OR ITIN DATE OF BIRTH MI **EMAIL ADDRESS** PERSONAL PHONE COUNTRY OF CITIZENSHIP RESIDENTIAL STREET ADDRESS (NO PO BOX, BUS., OR MAIL DROP) MAILING STREET ADDRESS (IF DIFFERENT THAN RESIDENTIAL) RESIDENTIAL ADDRESS LINE 2 MAILING ADDRESS LINE 2 RESIDENTIAL CITY STATE ZIP MAILING CITY STATE ZIP Successor Custodian Information (if applicable) -Note: The successor custodian is not an actual signer on the account and will not have access to the funds or be able to view the account online. FIRST NAME M.I. LAST NAME / SUFFIX SOCIAL SECURITY OR ITIN DATE OF BIRTH OCCUPATION **EMPLOYER EMAIL ADDRESS** PERSONAL PHONE WORK PHONE COUNTRY OF CITIZENSHIP RESIDENTIAL STREET ADDRESS (NO PO BOX, BUS., OR MAIL DROP) MAILING STREET ADDRESS (IF DIFFERENT THAN RESIDENTIAL) RESIDENTIAL ADDRESS LINE 2 MAILING ADDRESS LINE 2 RESIDENTIAL CITY STATE ZIP MAILING CITY STATE ZIP

CUSTODIAL ACCOUNT APPLICATION



Additional Services -

Debit Card: Check Order:

Spending Account Yes No Spending Account Yes No Money Market Account Yes No Money Market Account Yes No

Overdraft Service Yes No

This service links an Ally Money Market or Savings Account to your Ally Spending Account. Refer to the Ally Bank Deposit Agreement for a full explanation of this service and applicable fees that may be incurred.

NOTE: Additional services are not offered for the Minor, only the Custodian.

Fund Account(s) -

If you are a NEW customer:

Enclosed is a check with my application

• Ally Bank does not accept cash deposits, foreign checks/currency, or savings bonds.

If you are an EXISTING customer:

Enclosed is a check with my application

• Ally Bank does not accept cash deposits, foreign checks/currency, or savings bonds.

Use funds from an existing Ally Spending Account, Money Market Account, or Savings Account on which I am the signer ACCOUNT NUMBER

Initiate an ACH Transfer from a previously registered non-Ally account:

I authorize Ally Bank to initiate a one-time ACH debit to the following account

FINANCIAL INSTITUTION NAME ROUTING/ABA NUMBER ACCOUNT NUMBER

You may change or cancel the ACH transfer by calling us at 877-247-2559, unless the transfer status is "In Process" or "Complete."

Account Agreement

Acceptance of Terms and Conditions

By signing below, you agree that if you use and do not close your account within 30 days of opening, it will constitute your agreement to the terms of the Ally Bank Deposit Agreement that will be sent to you after your account is opened. You authorize us to obtain a consumer report from a consumer reporting agency to verify information provided in this application or for any legitimate business purpose in connection with the Ally Bank account.

SIGNATURE OF CUSTODIAN DATE

Certification Of Taxpayer Identification Number (Form W-9 or W-8)

A Certification of Taxpayer Identification Number Form W-9 or W-8 is required for each applicant who does not currently have an existing account at Ally Bank. Depending on your taxpayer status, each applicant must complete, sign, and return the attached Form W-9, if you are a U.S. person (including a resident alien), or Form W-8, if you are a foreign person. For Form W-8 see IRS website.

CERTIFICATION OF TAXPAYER IDENTIFICATION NUMBER FORM W-9



Complete with the minor's Social Security (custodian to sign on behalf of the minor)

FORM W-9 TAXPAYER IDENTIFICATION NUMBER (TIN) CERTIFICATION (Not applicable for Non-Resident Aliens):

For individuals the TIN is your Social Security Number or Individual Tax Identification Number (ITIN) which should match the first name listed on the account and will be used for tax reporting purposes. For other entities, it is your Employer Identification Number.

- A. Social Security Number or Employer Identification Number:
- B. Certification Under penalties of periury. I certify that:
 - 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
 - 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
 - 3. I am a U.S. citizen or other U.S. person (including a U.S. resident alien); and
 - 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Ally Bank doesn't collect Foreign Account Tax Compliance Act (FATCA) exemption codes. We're required by law to include the aforementioned certifications, but note that number 4 doesn't apply.

Backup Withholding Instructions

You must check off the box to the right if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

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



Customer Signature

Date

Customer Number (Internal Use Only)

Print Name

Complete with the custodian's Social Security and signature -

FORM W-9 TAXPAYER IDENTIFICATION NUMBER (TIN) CERTIFICATION (Not applicable for Non-Resident Aliens):

For individuals the TIN is your Social Security Number or Individual Tax Identification Number (ITIN) which should match the first name listed on the account and will be used for tax reporting purposes. For other entities, it is your Employer Identification Number.

- A. Social Security Number or Employer Identification Number:
- B. Certification Under penalties of perjury, I certify that:
 - 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
 - 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
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The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

SIGN HERE **Customer Signature**

Date

Customer Number (Internal Use Only)

Print Name