CILY TRUST CONVERSION REQUEST FORM

Return this form using one of these methods:

🗄 Online

Log in at ally.com and select Email, or log in on the Ally Mobile app and select  $\square$ . Attach the form to your message.

Mail Ally Bank PO Box 951 Horsham, PA 19044 Fax Subject Line: Operations Fax Number: 866-699-2969

Use this form to: -

Convert a personal Ally Bank account to an account titled in the name of a Trust.

Provide these documents:

A Certification of Trust OR written Trust agreement documents that include:

· Description of Trust, including the formal name of the Trust, Grantors and Trustees

• Notarized signature pages with Grantor and Trustee signatures. In some states, there may be a separate page completed by the notary

· Amendments to original Trust

- · Trustee powers and provisions related to incapacity or death of a Trustee
- · List of beneficiaries who will receive the funds if the Grantor of the Trust passes away
- · A copy of a death certificate for any Grantors or Trustees who is/are deceased

Current Account Holder and Authorization

CURRENT ACCOUNT HOLDER NAME

ACCOUNT NUMBER(S)

CURRENT ACCOUNT HOLDER NAME

ACCOUNT NUMBER(S)

In order for a personal account to be eligible for conversion to the name of a Trust, ALL current account owners must sign below. You acknowledge that the accounts listed above will be re-titled in the name of a Trust. Since the account(s) will convert to an entity, you acknowledge that if you aren't designated as a Trustee in the Trust Agreement you'll no longer have access to the account and you're giving up direct ownership of the funds as they become property of the Trust listed above. You also acknowledge that any person/entity currently designated as a "Payable on Death" (POD) payee or "In Trust For" (ITF) beneficiary on the accounts listed above will be removed as the Trust Agreement will designate the distribution of assets within the Trust.

SIGNATURE OF CURRENT ACCOUNT HOLDER

SIGNATURE OF CURRENT ACCOUNT HOLDER

We accept 4 ways to sign: 1) wet ink using a pen, 2) placement of your signature using your mouse or trackpad, 3) upload of an image with your signature, or 4) placement of a digital signature. We don't accept typed signatures.

Trust —											
Product Type:	Revocable Trust	Irrevocable Trust									
If the Grantor is NOT a Trustee, complete this application with the Grantor's information:											
NAME OF THE TRUS AGREEMENT)	ST (AS IT APPEARS ON THE	TAX IDENTIFICATION NUMBER FOR TRUST DATE OF TRUST AGREEMENT ACCOUNT(S)									
If any Grantor is deceased, provide their name and date of death below:											
NAME OF DECEASE	D GRANTOR OF TRUST	DATE OF DEATH OF DECEASED GRANTOR OF TRUST									



### 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'll 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're acknowledging that you're 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're authorized to use. In addition to manual calling, we may use text messages, prerecorded or artificial voice messages, or automatic dialing systems. We won't charge you for any contact, but your mobile phone service provider may.

# **Grantor Trustee**

Complete if any Trustee named in the Trust isn't currently on any of the accounts listed above. For additional Trustees, copy this form and submit for each Trustee.											
Is this Trustee a Grantor?	Yes	No									
If so and this is an irrevocable	e Trust, do	es the Grantor hav	ve retained interest?	Yes	No	If yes, what perc	centage?	%			
I'm an existing Ally Bank customer. Complete all fields.											
FIRST NAME	M.I.	LAST NAME	SUFFIX	SOCIAL SEC	CURITY OR ITIN	I DATI	E OF BIRTH				
OCCUPATION (IF RETIRED, HOMEMAKER, UNEMPLOYED, OR STUDENT, STATE SO HERE)					EMPLOYER (IF SELF-EMPLOYED, STATE BUSINESS NAME HERE)						
EMAIL ADDRESS				PERSONAL	PHONE	WOF	RK PHONE				
COUNTRY OF CITIZENSHIP					RESIDENCY ELECTION FOR TAX PURPOSES ONLY (see the Certification of Taxpayer Identification Number section for definition of Resident for tax purposes) Resident (W-9) Non-Resident (W-8BEN)						
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 CI	TY	STA	ATE	ZIP			
If you're not an Ally Bank customer, provide both a security question with answer (different than mother's maiden name) and mother's maiden name that may be used to identify you when contacting us.											
SECURITY QUESTION					SECURITY ANSWER MOTHER'S MAIDEN NAME						



SIGNATURE

## Account Agreement

Sign if a Trustee is not a current Ally Bank customer.

#### Acceptance of Terms and Conditions

By signing below, I agree that if I use and don't close my account within 30 days of opening, it will constitute my agreement to the terms of the Ally Bank Deposit Agreement that will be sent to me after my account is opened. I, as Trustee, authorize Ally Bank 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.

DATE

We accept 4 ways to sign: 1) wet ink using a pen, 2) placement of your signature using your mouse or trackpad, 3) upload of an image with your signature, or 4) placement of a digital signature. We don't accept typed signatures.

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

A Certification of Taxpayer Identification Number Form W-9 or W-8BEN is required for each Trust, Grantor, and Trustee who doesn't currently have an existing account at Ally Bank. Depending on your taxpayer status, each Trust, Grantor, and Trustee must complete the appropriate W-9 or W-8BEN form.

- Resident You're a resident of the United States for tax purposes if you a) are a US citizen, b) meet the green card test, or c) meet the substantial
  presence test. If you're a resident, you must complete, sign, and return the attached form labeled W-9. Criteria for the green card and substantial
  presence test can be found at IRS.gov.
- Non-Resident If you don't meet any of the Resident criteria above, then you're not considered a U.S. non-resident for tax purposes. If you're a
  non-resident for tax purposes, you must visit IRS.gov and download Form W-8BEN. Complete, sign, and attach the Form W-8BEN with your
  application.

### 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's 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'm waiting for a number to be issued to me); and

- 2. I'm not subject to backup withholding because: (a) I'm exempt from backup withholding, or (b) I haven't been notified by the Internal Revenue Service (IRS) that I'm 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'm no longer subject to backup withholding; and
- 3. I'm a U.S. citizen or other U.S. person (including a U.S. resident alien); and

Customer Signature

4. The FATCA code(s) entered on this form (if any) indicating that I'm 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've been notified by the IRS that you're currently subject to backup withholding because you've failed to report all interest and dividends on your tax return.

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



Print Name

Date

Customer Number (Internal Use Only)