Edgar Filing: DEBRUNNER DAVID J - Form 4

1. Name and Address of Reporting Person 1 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer DEBRUNNER DAVID J Symbol Ally Financial Inc. [ALLY] (Check all applicable) (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner 500 WOODWARD AVENUE 08/11/2017 4. If Amendment, Date Original Filed(Month/Day/Year) 6. Individual or Joint/Group Filing(Check Applicable Line) 10% Owner VP, CAO, Controller 6. Individual or Joint/Group Filing(Check Applicable Line) X. Form filed by More than One Reporting Person DETROIT, MI 48226 Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 5. Amount of Cover ship 7. Nature of Transaction(A) or Disposed of (D) or Beneficially Ownee Securities Acquired 6. Ownership 7. Nature of Code (Instr. 3, 4 and 5) (Instr. 3) (Month/Day/Year) 3. 4. Securities Acquired S. Amount of Code (Instr. 3, 4 and 5) 6. Ownership 7. Nature of Code (Instr. 3, 4 and 5) (Instr. 3) (Month/Day/Year) Execution Date, if Code V Amount (D) Price 5. Amount of Code V Amount (D) Price 6. Ownership 7. Nature of Transaction(s) (Instr. 4) (A) or Code V Amount (D) Price (Instr. 3) (Instr. 4) (Instr. 4)	DEBRUNNE Form 4 August 15, 2 FORN Check thi if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	017 14 UNITED S is box ger 6. r Filed purs inue. action	ENT OF CH Suant to Section of the Public	Washington, ANGES IN SECUR on 16(a) of th	, D.C. 20 BENEF RITIES le Securit ding Con	549 ICIA ties E	L OW xchange y Act of	COMMISSION NERSHIP OF e Act of 1934, f 1935 or Section 0	OMB Number: Expires: Estimated a burden hou response	•	
Filed(Month/Day/Year) Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person City (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of Security 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 6. Ownership 7. Nature of 1.Title of Security (Month/Day/Year) 2A. Deemed 3. 4. Securities Acquired 5. Amount of 6. Ownership 7. Nature of (Instr. 3) (Month/Day/Year) Execution Date, if any 3. 4. Securities Acquired 5. Amount of 6. Ownership 7. Nature of (Instr. 3) (Month/Day/Year) Execution Date, if any 3. 4. Securities Acquired 5. Amount of 6. Ownership 7. Nature of (Instr. 4) (Instr. 8) (Instr. 8) 0wned Indirect (I) Ownership (A) or Code V Amount or 0p Form filed by One Reported Form: 1 (Instr. 4) (Instr. 4) (Code V Amount (D) Price Pris (Instr. 3 and 4) Prise Prise	1. Name and Address of Reporting Person * 2. Issuer DEBRUNNER DAVID J Symbol Ally Fin (Last) (Last) (First) 500 WOODWARD AVENUE 08/11/2			ool Financial In tte of Earliest Tr tth/Day/Year) 1/2017	c. [ALL'	Y]	ng	Issuer (Check all applicable) <u> </u>			
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year) 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) 6. Ownership Form: Direct (D) or Beneficial Indirect (I) (Instr. 4) Common 08/11/2017 M 123 A \$ 0 119 154 D	Filed(Month DETROIT, MI 48226				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(1)(1)(1)(1) $(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)($	1.Title of Security (Instr. 3)	2. Transaction Date	2A. Deemed Execution Date any	3. , if Transaction Code ear) (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ties A ispose 4 and (A) or	cquired d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership	
Common Stock 08/11/2017 D 123 D 22.78 119,031 D (2)	Stock (1) Common						\$ 22.78				

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Edgar Filing: DEBRUNNER DAVID J - Form 4

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price o Derivativ Security (Instr. 5)
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Stock Units (DSU)	<u>(3)</u>	08/11/2017		М	123	<u>(3)</u>	<u>(3)</u>	Common Stock	123	\$ 0

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
DEBRUNNER DAVID J 500 WOODWARD AVENUE DETROIT, MI 48226			VP, CAO, Controller				
Signatures							
/s/ Donna M. DiCicco. attorney	in fact f	or Mr					

/s/ Donna M. DiCicco, attorney-in-fact for Mr. DeBrunner

**Signature of Reporting Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) The common stock reported includes shares issued upon the settlement of a portion of DSUs awarded in prior periods.
- (2) Represents the per share fair market value of the Company's common stock as of August 2, 2017.

Each Deferred Stock Unit (DSU) represents a vested right to receive the value of one share of the Company's common stock in cash equal(3) to the fair market value of a share of the Company's common stock. DSUs do not have an expiration or exercise date or carry a conversion price. May reflect rounding of fractional shares.

08/15/2017

Date

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.