FORM 5 Check box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See instruction 1(b). Form 3 holdings reported. Form 4 transactions reported.	Filed	Federa W STATEMENT pursuant to Ser (PLEASE	ES EX	OMB APPROVAL OMB NUMBER: 3064-0030 EXPIRES: 07/31/2013 Estimated average burden hours per response1.0							
1. Name of Reporting Person (Last, First, M Paul, James Street Address Amalgamated Bank 275 Seventh Avenue City State New York NY	Amalgam 3. Statement for Iss Year Ended (Month) 12/31/20	/Day/Year) 18	(AMAL) 4. If Amendment, Da Filed (Month/Day/	Year)	6. Individu	Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3)	Table 2. Transaction Date (Month/Day/Year)	I - Non-Derivat 2A. Deemed Execution Date, if any, (Month/ Day/ Year)	ive Securitie 3. Transaction Code (Instr. 8)	4. Securities Ac of (D) (Instrs.	quired (A) or		Illy Owned 5. Amount of Securities Beneficially Owned at End of Bank's Fiscal Year (Instrs. 3 and 4)	6. Ownership Form Direct (D) or Indirect (I) (Instr. 4)	 Nature of Indirect Beneficial Ownership (Instr. 4) 		
Class A Common Stock				Amount	(A) or (D)	Price	3,800 (1)	D			

FDIC 6800/05 (10-05)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. *(Continue on Page 2)* *If the form is filed by more than one reporting person, see Instruction 4(b)(v).

FORM 5 (continued)

	Table II -	Derivative	e Securities	Acquired,	Disposed	l of or Be	neficially	v Owned (e.g., puts, calls	s, warrants	s, options,	convertible s	securities)	
1. Title of Derivative Security (Instr. 3)	2. Con- version or Ex- ercise Price of De/ rivative Secur- ity	3. Trans- action Date (Month/ Day/ Year)	3A. Deem- ed Execu- tion Date, if any (Month/ Day/ Year)	4. Transac- tion Code (Instr. 8)	5. Number of Deriva- tive Securities Ac- quired (A) or Dis posed of (D) (Instrs. 3, 4, and 5)		6. Date Exercis able and Expi- ration Date (Month/Day/ Year)		7. Title and Amount of Underly- ing Securities (Instrs. 3 and 4)		8. Price of Deriva- tive Security (Instr. 5)	9. Number of Derivative Securities Beneficiall y Owned at End of Issuer's	10. Owner- ship Form of Deriva- tive Securities: Direct (D) or Indirect (I)	11. Nature of Indirect Beneficial Owner- ship (Instr. 4)
	ity				(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Y	Fiscal Year (Instr.4)	(Instr.4)	

Explanation of Responses:

(1) Reporting person's original Form 3 omitted 800 shares that were beneficially owned

(2) By: Mandy Tenner pursuant to power of attorney filed with the

FDIC on August 8, 2018.

/s/ James Paul (2)

2/12/2019

**Signature of Reporting Person

Date

NOTE: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, see Instruction 6 for procedure (12 C.F.R. 335.612). 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 current, valid OMB Control Number. **Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 1.0 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Paper Reduction Act Clearance Officer, Legal Division, Federal Deposit Insurance Corporation, 550 17th St. NW, Washington, D.C. 20429, and the Office of Management and Budget, Paperwork Reduction Project (3064-0030), Washington, D.C. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.