FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

ashington, I	D.C.	20549	
--------------	------	-------	--

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

UNIB APPRO	JVAL				
OMB Number:	3235-0287				
Estimated average burd	den				
hours per response:	0.5				

OME ADDDOMA

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

		_		1.	1	Mana				o marka a f			2-1-411	- f D	D-	(-) 1- 1		
1. Name and Address of Reporting Person*			2.	2. Issuer Name and Ticker or Trading Symbol Amalgamated Financial Corp. [ AMAL ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Bouffar	<u>rd, Jr. Do</u>	<u>nald E.</u>		<u> </u>	ınal	zamat	uг	mancial	<u></u>	<u>тр.</u> [ А.	WIAL J	'	X Direct	,		10% Ov	vner	
													Office	r (give title		Other (s	specify	
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 04/28/2022								below			below)	,,,,,,	
275 7TH	AVENUE			ľ	1/20/2	.022												
2/3 / III II ENOE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)				"		marrione,	Duto	or originar i	cu	(Mona &	ay/ reary	Lin		oon to Oroup	, i iii iş	g (Oncorrip	piloabio	
NEW YO	ORK N	v	10001										X Form	filed by One	e Rep	orting Perso	n	
INEW IC	JKK IV	1	10001												re thai	n One Repo	rting	
(Cit. )	(0	t-t-)	( <b>7</b> :)										Perso	n				
(City)	(5	tate)	(Zip)															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of S	Security (Ins	tr. 3)		Transactio		2A. Deem		3.			ities Acquir		5. Amou		6. Ov	vnership	7. Nature	
Date				ate //onth/Day/	Execution Date, ay/Year) if any			e, Transaction Disposed Of (D) (Instr. Code (Instr. 5)		str. 3, 4 an	d Securiti Benefic				of Indirect Beneficial			
(					(Month/Day/Yea								Following (i) (Ir		nstr. 4)	Ownership (Instr. 4)		
							Code	v	Amount	t (A) or Pi		Transac (Instr. 3	ction(s)			(1115111. 4)		
											(0)		(ilisti. 3	anu 4)				
		Т	able II - De										y Owned					
			(e.	g., puts	, call	s, warr	ants	s, option	s, c	onverti	ble secu	ırities)						
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Number		6. Date Exercisa					8. Price of	9. Number of		10.	11. Nature	
Security or Exercise (Month/Day/Year) if any			Code	action (Instr.	Derivative (					-	Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial			
(Instr. 3)	Price of Derivative		(Month/Day/Ye	ear)   8)	Securities Underlying Acquired Derivative (A) or (Instr. 3 and						(Instr. 5)	Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)			
	Security													Following		(I) (Instr. 4)	(,	
						Dispos of (D)								Reported Transaction(s)				
						(Instr. and 5)	3, 4						(Instr. 4)					
					<del>                                     </del>			$\top$			Amount	1						
												or Number						
				.		<b>.</b>		Date		xpiration	<b> </b>	of						
				Code	v	(A)	(D)	Exercisable	D	ate	Title	Shares						
Restricted Stocks	(1)	04/28/2022		A	1	2,747		(2)		(2)	Common	2,747	\$0	2,747	,	D		
Units	`´	01/20/2022		^	1	2,,,,,,		` ′		. /	Stock	_,, .,	**	1 2,747		"	1	

## Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of AMAL stock.
- 2. The restricted stock units vest in one annual installment on April 28, 2023.

## Remarks:

/s/ Donald Bouffard

04/29/2022

\*\* Signature of Reporting Person

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.