### FORM 4

continue. See instruction

# Check box if no longer subject to Section 16. Form 4 or Form 5 obligations may

## Federal Deposit Insurance Corporation Washington, D.C. 20429

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

(PLEASE PRINT OR TYPE ALL RESPONSES)

OMB APPROVAL
OMB NUMBER: 3064-0030 EXPIRES: 07/31/2013

Estimated average burden

hours per response ...0.5

1. Name of Reporting Person (Last, First,	<ol><li>Issuer Na</li></ol>	ame and Tic	kler or Trac	ding Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Brown, Sam	Amalgamated Bank (AMAL)					D	irector		10% Owner	
Street Address  Amalgamated Bank	Required to be Reported (Month/Day/Year)  08/13/2018			4. If Amendment, Date Original Filed (Month/Day/Year)		Officer (Give title below)  Exec. VP - Director Commercial Banking				
275 Seventh Avenue						Individual or Joint/Group Filing (Check applicable box)     Form filed by One Reporting Person				
City State New York NY						Form filed by More than One Reporting Person				
					Acquired, Disp			Owned		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		2A. Deemed Execu- tion Date if any, (Month/	3. Transaction Cod (Instr. 8)		de 4. Securities Acquired (A) or Disp of (D) (Instrs. 3, 4, and 5)		posed	5. Amount of Securities Beneficially Owned Follow- ing Reported	6. Ownership Form Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
		Day/ Year)	Code	V	Amount	(A) or (D)	Price	Transactions (Instr. 3 and 4)		
Class A Common Stock 08/13/2018			P		3,000	A	\$15.50	3,000	D	

FDIC 6800/04 (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).

Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans- action Date (Month/ Day/ Year)	3A. Deemed Execu- tion Date if any, (Month/ Day/ Year)	4. Trans actior Code (Instr.	1	5. Number Deriva Securi Acquir or Dispos (D) (Instrs	ative ities red (A) sed of	Day/Year)		7. Title and Amount of Underlying Securities (Instrs. 3 and 4)		8. Price of De-rivative Security (Instr. 5)	1		11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Ex- ercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Explanation of Responses	:	ı	L	1							L				

<b>(1)</b>	By: Mandy Tenner pursuant to power of attorney filed with the	he
	FDIC on August 8, 2018.	

FDIC on August 8, 2018.		
	/s/ Sam Brown (1)	08/14/2018
	**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**

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FDIC 6800/04 (10-05) Page 1 of 2 ---