Instruction 1(b).

FORM 4

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

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

Washington,	D.C. 20549	

STATEMENT	OF	CHANGES	IN BE	ENEFICIA	AL (	OWNERS	HIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response: 0.8							

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

Name and Address of Reporting Person*     Amalgamated Financial Corp.				2. Issuer Name and Ticker or Trading Symbol Amalgamated Financial Corp. [ AMAL ]											of Reportir licable) tor	ng Per X	. ,		
(Last) 22 SOUT	(Fir ΓH 22ND S	,	/liddle	)		3. Date of Earliest Transaction (Month/Day/Year) 11/21/2023							Officer (give title X Other (specify below)  Workers United						
(Street) PHILADELPHIA PA 19103 (City) (State) (Zip)			4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person									on						
(5.9)	(State)  Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												nded to						
		Table	I - N	on-Deriva	tive S	Secui	rities	Acc	quire	d, Di	sposed of	, or B	enefici	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transactic Date (Month/Day/				Execution [		ion Date,				Acquired (A) or (D) (Instr. 3, 4 a		Benefic		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Ti	ransac nstr. 3	tion(s)			(Instr. 4)
Common Stock 11			11/21/20	023				P		68,487.15	A	A \$21.1		4 8,013,682.0111		D			
		Tal	ole II								oosed of, convertib				wned	d			
1. Title of Derivative Security  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  3A. Deemed Execution Date, if any (Month/Day/Year)				5. Number of 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 Securities Underlying Derivative Security (Instr. 3 and 4)				9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares						

**Explanation of Responses:** 

Remarks:

/s/Bob Freeman on behalf of **Workers United** 

11/24/2023

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.