FORM 4

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

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 response0.5

1. Name of Reporting Person (Last, First, MI)* Pappas, Mark	2. Issuer Name Amalgama					Di	Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
Street Address Amalgamated Bank 275 Seventh Avenue	3. Date of Earliest Transaction Required to be Reported (Month/Day/Year) 11/9/2020 I - Non-Derivative Securities			If Amendment, Dat Filed (Month/Day/	e Original /ear)	6. Individual of	Executive VP 6. Individual or Joint/Group Filing (Check applicable box) Form filed by One Reporting Person Form filed by More than One Reporting Person					
New York State NY						Fo						
1 Title of Security	Table 2. Transaction Date	2A. Deemed				-			6. Ownership	7. Nature of Indirect		
1. Title of Security (Instr. 3)	(Month/Day/Year)	Execu- tion Date if any, (Month/ Day/ Year)	(Instr. 8)		Securities Acquoif (D) (Instrs. 3)		posea	5. Amount of Securities Beneficially Owned Following Reported	Form Direct (D) or Indirect (I) (Instr. 4)	Provided the state of the state		
			Code	V	Amount	(A) or (D)	Price	Transactions (Instr. 3 and 4)				
Class A Common Stock	11/9/2020		S		746	D	\$11.85	0	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).

	Table II -	Derivative	Securities	Acquire	ed, Dis _l	oosed o	f or Bei	neficially	Owned (e.g., puts, calls	, warrants	, options,	convertible s	ecurities)	
Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans- action Date (Month/ Day/ Year)	3A. Deemed Execution Date if any, (Month/ Day/ Year)	4. Trans action Code (Instr.	1			6. Date Exercisable and Expiration Date (Month/ Day/ Year)				8. Price of De- rivative Security (Instr. 5)			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		•									1				

(1) By: Mandy Tenner pursuant to power of attorney filed with the	/s/ Mark Pappas (1)	11/9/2020
FDIC on August 8, 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).

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FDIC 6800/04 (10-05) Page $\overline{2}$ of $\underline{2}$