

FORM 3

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

OMB APPROVAL
OMB NUMBER: 3064-0030
EXPIRES: 01/31/2020
Estimated average burden
hours per response ...1.0

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

(PLEASE PRINT OR TYPE ALL RESPONSES)

1. Name of Reporting Person (Last, First, Middle)* Mestrich, Keith Street Address Amalgamated Bank 275 Seventh Avenue City State ZIP Code New York NY 10001			2. Date of Event Requiring Statement (Month/Day/Year) 08/08/2018	4. Issuer Name and Ticker or Trading Symbol Amalgamated Bank (AMAL)		6. If Amendment, Date Original Filed (Month/Day/Year)
3. IRS Identification Number of Reporting Person, if an Entity (Voluntary)			5. Relationship of Reporting Person to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (Specify below) President and CEO		7. Individual or Joint/Group Filing (Check Applicable Box) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Class A Common Stock	800	D	

Table II - Derivative Securities Beneficially Owned (e.g., plus, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Securities: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of shares			
Employee Stock Option (right to buy)	(1)	1/1/2025	Class A Common Stock	175,020	\$11.00	D	
Employee Stock Option (right to buy)	(2)	1/1/2026	Class A Common Stock	160,520	\$12.00	D	
Employee Stock Option (right to buy)	(3)	1/1/2027	Class A Common Stock	140,020	\$13.75	D	
Employee Stock Option (right to buy)	(4)	1/1/2028	Class A Common Stock	144,560	\$14.65	D	

Explanation of Responses:

- (1) This option vests in three equal annual installments beginning January 1, 2016.**
- (2) This option vests in three equal annual installments beginning January 1, 2017.**
- (3) This option vests in three equal annual installments beginning January 1, 2018.**
- (4) This option vests in three equal annual installments beginning January 1, 2019.**
- (5) By: Mandy Tenner pursuant to power of attorney filed herewith**

/s/ Keith Mestrich (5)

8/8/2018

**Signature of Reporting Person

Date

NOTE: File three copies of this Form, one of which must be manually signed. If the space provided is insufficient, see Instruction 6 for procedure (12 C.F.R. 335.611). Potential persons who are to respond to the collection of information contained on 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 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and 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 to the Office of Management and Budget, Paperwork Reduction Project (3064-0030), Washington, D.C. 20503. An agency may not conduct or sponsor, and a person is not required to respond to, a collection unless it displays a currently valid OMB control.

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Federal Deposit Insurance Corporation
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1. Name of Reporting Person (Last, First, Middle)* LaBenne, Andrew Street Address Amalgamated Bank 275 Seventh Avenue <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">City New York</td> <td style="width:15%; border: none;">State NY</td> <td style="width:52%; border: none;">ZIP Code 10001</td> </tr> </table>			City New York	State NY	ZIP Code 10001	2. Date of Event Requiring Statement (Month/Day/Year) 08/08/2018	4. Issuer Name and Ticker or Trading Symbol <p style="text-align: center;">Amalgamated Bank (AMAL)</p> 5. Relationship of Reporting Person to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (Specify below) <hr/> Sr. Exec. VP & CFO	
City New York	State NY	ZIP Code 10001						
			6. If Amendment, Date Original Filed (Month/Day/Year) 					
			7. Individual or Joint/Group Filing (Check Applicable Box) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person					

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Class A Common Stock	500	D	

Table II - Derivative Securities Beneficially Owned (e.g., plus, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Securities: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of shares			
Employee Stock Option (right to buy)	(1)	1/1/2025	Class A Common Stock	140,020	\$11.00	D	
Employee Stock Option (right to buy)	(2)	1/1/2026	Class A Common Stock	128,420	\$12.00	D	
Employee Stock Option (right to buy)	(3)	1/1/2027	Class A Common Stock	112,020	\$13.75	D	
Employee Stock Option (right to buy)	(4)	1/1/2028	Class A Common Stock	52,580	\$14.65	D	

Explanation of Responses:

(1) This option vests in three equal annual installments beginning January 1, 2016.

(2) This option vests in three equal annual installments beginning January 1, 2017.

(3) This option vests in three equal annual installments beginning January 1, 2018.

(4) This option vests in three equal annual installments beginning January 1, 2019.

(5) By: Mandy Tenner pursuant to power of attorney filed herewith

/s/ Andrew LaBenne (5)

8/8/2018

**Signature of Reporting Person

Date

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(PLEASE PRINT OR TYPE ALL RESPONSES)

1. Name of Reporting Person (Last, First, Middle)* Murrell, Martin			2. Date of Event Requiring Statement (Month/Day/Year) 08/08/2018		4. Issuer Name and Ticker or Trading Symbol Amalgamated Bank (AMAL)				
Street Address Amalgamated Bank 275 Seventh Avenue			3. IRS Identification Number of Reporting Person, if an Entity (Voluntary)		5. Relationship of Reporting Person to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (Specify below) Sr. Exec. VP & COO			6. If Amendment, Date Original Filed (Month/Day/Year)	
City New York	State NY	ZIP Code 10001				7. Individual or Joint/Group Filing (Check Applicable Box) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person			

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
No securities are beneficially owned			

Table II - Derivative Securities Beneficially Owned (e.g., plus, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Securities: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of shares			
Employee Stock Option (right to buy)	(1)	1/1/2026	Class A Common Stock	48,160	\$12.00	D	
Employee Stock Option (right to buy)	(2)	1/1/2027	Class A Common Stock	42,020	\$13.75	D	
Employee Stock Option (right to buy)	(3)	1/1/2028	Class A Common Stock	39,440	\$14.65	D	

Explanation of Responses:

- (1) This option vests in three equal annual installments beginning January 1, 2017.**
- (2) This option vests in three equal annual installments beginning January 1, 2018.**
- (3) This option vests in three equal annual installments beginning January 1, 2019.**
- (4) By: Mandy Tenner pursuant to power of attorney filed herewith**

/s/ Martin Murrell (4)

8/8/2018

**Signature of Reporting Person

Date

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(PLEASE PRINT OR TYPE ALL RESPONSES)

1. Name of Reporting Person (Last, First, Middle)* Darby, Jason Street Address Amalgamated Bank 275 Seventh Avenue <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">City New York</td> <td style="width: 15%; border: none;">State NY</td> <td style="width: 52%; border: none;">ZIP Code 10001</td> </tr> </table>			City New York	State NY	ZIP Code 10001	2. Date of Event Requiring Statement (Month/Day/Year) 08/08/2018	4. Issuer Name and Ticker or Trading Symbol Amalgamated Bank (AMAL) 5. Relationship of Reporting Person to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (Specify below) Exec. VP and Chief Accounting Officer
City New York	State NY	ZIP Code 10001					
			6. If Amendment, Date Original Filed (Month/Day/Year) _____ 7. Individual or Joint/Group Filing (Check Applicable Box) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person				

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
No securities are beneficially owned			

Table II - Derivative Securities Beneficially Owned (e.g., plus, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Securities: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of shares			
Employee Stock Option (right to buy)	(1)	1/1/2026	Class A Common Stock	21,660	\$12.00	D	
Employee Stock Option (right to buy)	(2)	1/1/2027	Class A Common Stock	18,920	\$13.75	D	
Employee Stock Option (right to buy)	(3)	1/1/2028	Class A Common Stock	18,920	\$14.65	D	

Explanation of Responses:

- (1) This option vests in three equal annual installments beginning January 1, 2017.**
- (2) This option vests in three equal annual installments beginning January 1, 2018.**
- (3) This option vests in three equal annual installments beginning January 1, 2019.**
- (4) By: Mandy Tenner pursuant to power of attorney filed herewith**

/s/ Jason Darby (4)

8/8/2018

**Signature of Reporting Person

Date

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(PLEASE PRINT OR TYPE ALL RESPONSES)

1. Name of Reporting Person (Last, First, Middle)* Brown, Sam			2. Date of Event Requiring Statement (Month/Day/Year) 08/08/2018	4. Issuer Name and Ticker or Trading Symbol Amalgamated Bank (AMAL)	
Street Address Amalgamated Bank 275 Seventh Avenue			3. IRS Identification Number of Reporting Person, if an Entity (Voluntary)	5. Relationship of Reporting Person to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (Specify below) Exec. VP – Director Commercial Banking	
City New York	State NY	ZIP Code 10001			

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
No securities are beneficially owned			

Table II - Derivative Securities Beneficially Owned (e.g., plus, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Securities: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of shares			
Employee Stock Option (right to buy)	(1)	1/1/2025	Class A Common Stock	42,000	\$11.00	D	
Employee Stock Option (right to buy)	(2)	1/1/2026	Class A Common Stock	38,520	\$12.00	D	
Employee Stock Option (right to buy)	(3)	1/1/2027	Class A Common Stock	33,620	\$13.75	D	
Employee Stock Option (right to buy)	(4)	1/1/2028	Class A Common Stock	31,520	\$14.65	D	

Explanation of Responses:

- (1) This option vests in three equal annual installments beginning January 1, 2016.**
- (2) This option vests in three equal annual installments beginning January 1, 2017.**
- (3) This option vests in three equal annual installments beginning January 1, 2018.**
- (4) This option vests in three equal annual installments beginning January 1, 2019.**
- (5) By: Mandy Tenner pursuant to power of attorney filed herewith**

/s/ Sam Brown (5)

8/8/2018

**Signature of Reporting Person

Date

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

(PLEASE PRINT OR TYPE ALL RESPONSES)

1. Name of Reporting Person (Last, First, Middle)* Lubkemann, Jamee			2. Date of Event Requiring Statement (Month/Day/Year) 08/08/2018	4. Issuer Name and Ticker or Trading Symbol Amalgamated Bank (AMAL)	
Street Address Amalgamated Bank 275 Seventh Avenue			3. IRS Identification Number of Reporting Person, if an Entity (Voluntary)	5. Relationship of Reporting Person to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (Specify below) Exec. VP & Director - Consumer Banking	
City New York				6. If Amendment, Date Original Filed (Month/Day/Year)	
State NY	ZIP Code 10001		7. Individual or Joint/Group Filing (Check Applicable Box) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person		

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
No securities are beneficially owned			

Table II - Derivative Securities Beneficially Owned (e.g., plus, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Securities: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of shares			
Employee Stock Option (right to buy)	(1)	1/1/2028	Class A Common Stock	28,920	\$14.65	D	

Explanation of Responses:

- (1) This option vests in three equal annual installments beginning January 1, 2019.**
- (2) By: Mandy Tenner pursuant to power of attorney filed herewith**

/s/ Jamee Lubkemann (2)

8/8/2018

**Signature of Reporting Person

Date

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1. Name of Reporting Person (<i>Last, First, Middle</i>)* Pappas, Mark			2. Date of Event Requiring Statement (<i>Month/Day/Year</i>) 08/08/2018	4. Issuer Name and Ticker or Trading Symbol Amalgamated Bank (AMAL)	
Street Address Amalgamated Bank 275 Seventh Avenue			3. IRS Identification Number of Reporting Person, if an Entity (<i>Voluntary</i>)	5. Relationship of Reporting Person to Issuer (<i>Check all applicable</i>) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (<i>give title below</i>) <input type="checkbox"/> Other (<i>Specify below</i>) Exec. VP & Chief Risk Officer	
City New York					
State NY			ZIP Code 10001		7. Individual or Joint/Group Filing (<i>Check Applicable Box</i>) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (<i>Instr. 4</i>)	2. Amount of Securities Beneficially Owned (<i>Instr. 4</i>)	3. Ownership Form: Direct (D) or Indirect (I) (<i>Instr. 5</i>)	4. Nature of Indirect Beneficial Ownership (<i>Instr. 5</i>)
No securities are beneficially owned			

Table II - Derivative Securities Beneficially Owned (e.g., plus, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Securities: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of shares			
Employee Stock Option (right to buy)	(1)	1/1/2026	Class A Common Stock	8020	\$12.00	D	
Employee Stock Option (right to buy)	(2)	1/1/2027	Class A Common Stock	28,720	\$13.75	D	
Employee Stock Option (right to buy)	(3)	1/1/2028	Class A Common Stock	26,940	\$14.65	D	

Explanation of Responses:

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- (3) This option vests in three equal annual installments beginning January 1, 2019.**
- (4) By: Mandy Tenner pursuant to power of attorney filed herewith**

/s/ Mark Pappas (4)

8/8/2018

**Signature of Reporting Person

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(PLEASE PRINT OR TYPE ALL RESPONSES)

1. Name of Reporting Person (Last, First, Middle)* Paul, James			2. Date of Event Requiring Statement (Month/Day/Year) 08/08/2018	4. Issuer Name and Ticker or Trading Symbol Amalgamated Bank (AMAL)		
Street Address Amalgamated Bank 275 Seventh Avenue			3. IRS Identification Number of Reporting Person, if an Entity (Voluntary)	5. Relationship of Reporting Person to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (Specify below) Exec. VP & Chief Administrative Officer		6. If Amendment, Date Original Filed (Month/Day/Year)
City New York	State NY	ZIP Code 10001		7. Individual or Joint/Group Filing (Check Applicable Box) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person		

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
No securities are beneficially owned			

Table II - Derivative Securities Beneficially Owned (e.g., plus, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Securities: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of shares			
Employee Stock Option (right to buy)	(1)	1/1/2025	Class A Common Stock	42,000	\$11.00	D	
Employee Stock Option (right to buy)	(2)	1/1/2026	Class A Common Stock	38,520	\$12.00	D	
Employee Stock Option (right to buy)	(3)	1/1/2027	Class A Common Stock	33,620	\$13.75	D	
Employee Stock Option (right to buy)	(4)	1/1/2028	Class A Common Stock	31,520	\$14.65	D	

Explanation of Responses:

- (1) This option vests in three equal annual installments beginning January 1, 2016.**
- (2) This option vests in three equal annual installments beginning January 1, 2017.**
- (3) This option vests in three equal annual installments beginning January 1, 2018.**
- (4) This option vests in three equal annual installments beginning January 1, 2019.**
- (5) By: Mandy Tenner pursuant to power of attorney filed herewith**

/s/ James Paul (5)

8/8/2018

**Signature of Reporting Person

Date

NOTE: File three copies of this Form, one of which must be manually signed. If the space provided is insufficient, see Instruction 6 for procedure (12 C.F.R. 335.611). Potential persons who are to respond to the collection of information contained on 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 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and 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 to the Office of Management and Budget, Paperwork Reduction Project (3064-0030), Washington, D.C. 20503. An agency may not conduct or sponsor, and a person is not required to respond to, a collection unless it displays a currently valid OMB control.

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

(PLEASE PRINT OR TYPE ALL RESPONSES)

1. Name of Reporting Person (Last, First, Middle)* Prusan, Arthur Street Address Amalgamated Bank 275 Seventh Avenue <table style="width:100%; border: none;"> <tr> <td style="width:33%; border: none;">City</td> <td style="width:16%; border: none;">State</td> <td style="width:51%; border: none;">ZIP Code</td> </tr> <tr> <td style="border: none;">New York</td> <td style="border: none;">NY</td> <td style="border: none;">10001</td> </tr> </table>			City	State	ZIP Code	New York	NY	10001	2. Date of Event Requiring Statement (Month/Day/Year) 08/08/2018	4. Issuer Name and Ticker or Trading Symbol Amalgamated Bank (AMAL)		
City	State	ZIP Code										
New York	NY	10001										
			3. IRS Identification Number of Reporting Person, if an Entity (Voluntary)	5. Relationship of Reporting Person to Issuer (Check all applicable) <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <input type="checkbox"/> Director </div> <div style="width: 45%;"> <input type="checkbox"/> 10% Owner </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <input checked="" type="checkbox"/> Officer (give title below) </div> <div style="width: 45%;"> <input type="checkbox"/> Other (Specify below) </div> </div> <hr style="border: 0.5px solid black; margin-top: 5px;"/> Exec. VP and Chief Credit Risk Officer								
					6. If Amendment, Date Original Filed (Month/Day/Year)							
					7. Individual or Joint/Group Filing (Check Applicable Box) <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person </div>							

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
No securities are beneficially owned			

Table II - Derivative Securities Beneficially Owned (e.g., plus, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Securities: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of shares			

Explanation of Responses:
(1) By: Mandy Tenner pursuant to power of attorney filed herewith

/s/ Arthur Prusan (1) **8/8/2018**

**Signature of Reporting Person Date

NOTE: File three copies of this Form, one of which must be manually signed. If the space provided is insufficient, see Instruction 6 for procedure (12 C.F.R. 335.611). Potential persons who are to respond to the collection of information contained on 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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FORM 3

Federal Deposit Insurance Corporation
Washington, D.C. 20429

INITIAL STATEMENT OF 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: 01/31/2020
Estimated average burden
hours per response ...1.0

1. Name of Reporting Person (Last, First, Middle)* Silodor, Deborah Street Address Amalgamated Bank 275 Seventh Avenue City State ZIP Code New York NY 10001			2. Date of Event Requiring Statement (Month/Day/Year) 08/08/2018	4. Issuer Name and Ticker or Trading Symbol <p style="text-align: center;">Amalgamated Bank (AMAL)</p> 5. Relationship of Reporting Person to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (Specify below) Executive VP & General Counsel		6. If Amendment, Date Original Filed (Month/Day/Year) 7. Individual or Joint/Group Filing (Check Applicable Box) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
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Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	Title	Amount or Number of shares			
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- (5) By: Mandy Tenner pursuant to power of attorney filed herewith**

/s/ Deborah Silodor (5)

8/8/2018

**Signature of Reporting Person

Date

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