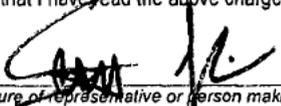


INTERNET  
FORM NLRB-501  
(2-08)UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
AMENDED CHARGE AGAINST EMPLOYER**DO NOT WRITE IN THIS SPACE**Case  
01-CA-169426Date Filed  
June 23, 2016**INSTRUCTIONS:**

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer Bridgewater Associates, LP	b. Tel. No. 203.226.3030
	c. Cell No.
	f. Fax No.
d. Address (Street, city, state, and ZIP code) 1 Glendinning Place Westport, CT 06880	e. Employer Representative David McCormick
	g. e-Mail
	h. Number of workers employed 1100
i. Type of Establishment (factory, mine, wholesaler, etc.) Hedge Fund	j. Identify principal product or service Institutional Asset Management
k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list subsections) (4) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)	
On about (b) (6), (b) (7)(C) 2016, the Employer suspended its employee, (b) (6), (b) (7)(C), in retaliation for (b) (6), (b) (7)(C) threat to file a charge with the Board.	
In the preceding 6 month period prior to the filing of this charge, and continuing, the Employer has violated the Act by maintaining unlawfully overbroad work rules.	
3. Full name of party filing charge (if labor organization, give full name, including local name and number) (b) (6), (b) (7)(C)	
4a. Address (Street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b. Tel. No. (b) (6), (b) (7)(C)
	4c. Cell No.
	4d. Fax No.
	4e. e-Mail
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization)	
6. DECLARATION	
I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.	
By  (signature of representative or person making charge)	Scott Grubin, Attorney (Print type name and title or office, if any)
Tel. No. (212) 257-6800	
Office, if any, Cell No.	
Fax No.	
e-Mail sgrubin@wigdorlaw.com	
Address Wigdor LLP, 85 Fifth Ave, 5th FL, New York, NY 10003	6/23/16 (date)

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

## PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.