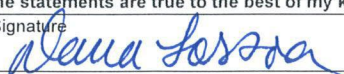


UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No.	Date Filed

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

2a. Name of Employer: NEW MUSEUM OF CONTEMPORARY ART		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 235 BOWERY NEW YORK, NY 10002	
3a. Employer Representative - Name and Title: LISA PHILLIPS, DIRECTOR		3b. Address (if same as 2b - state same): SAME	
3c. Tel. No. 212-219-1222	3d. Cell No.	3e. Fax No. 212-431-5328	3f. E-Mail Address lphillips@newmuseum.org
4a. Type of Establishment (Factory, mine, wholesaler, etc.) ART MUSEUM		4b. Principal Product or Service MUSEUM	
5b. Description of Unit Involved: Included: All full-time and regular part-time employees other than those excluded below. Excluded: Maintenance department employees, guards, and supervisors as defined by the Act.		5a. City and State where unit is located: NEW YORK, NY	
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about (Date) _____ (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.		6a. Number of Employees in Unit: 74	
8a. Name of Recognized or Certified Bargaining Agent (if none, so state) NONE		8b. Address:	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	
9. Is there now a strike or picketing at the Employer's establishment(s) involved? <u>No</u> If so, approximately how many employees are participating? _____ (Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)	
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)			
10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election:			11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s): JANUARY 17, 2019		11c. Election Time(s): 12 PM-3 PM	
11d. Election Location(s): SKY ROOM OR 5TH FL CLASSROOM			
12a. Full Name of Petitioner (including local name and number): TECHNICAL, OFFICE AND PROFESSIONAL UNION LOCAL 2110 UAW		12b. Address (street and number, city, State and ZIP code): 256 WEST 38TH ST, SUITE 704 NEW YORK, NY 10018	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): UNITED AUTOMOBILE, AEROSPACE AND AGRICULTURAL IMPLEMENT WORKERS OF AMERICA, AFL-CIO			
12d. Tel. No. 212-387-0220	12e. Cell No.	12f. Fax No. 212-228-0198	12g. E-Mail Address local2110@2110uaw.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: DANA LOSSIA, ATTORNEY FOR PETITIONER		13b. Address (street and number, city, State and ZIP code): LEVY RATNER, P.C., 80 EIGHTH AVE, 8TH FL, NEW YORK, NY 10011	
13c. Tel. No. 212-627-8100	13d. Cell No. 617-510-0283	13e. Fax No. 212-627-8182	13f. E-Mail Address dlossia@levyratner.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Dana Lossia	Signature 	Title Attorney for Petitioner	Date 1-4-2019

**WILLFUL FALSE STATEMENTS ON THIS PETITION 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 representation 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 may cause the NLRB to decline to invoke its processes.