

(REFERENCE COPY - Not for submission)

Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

File Number: 0000040828 | Submit Date: 2018-01-26 | FRN: 0008300709

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 01/26/2018

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0008300709	Montclair State University

Street Address	City (and Country if non U. S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
1 Normal Avenue	Upper Montclair	NJ	07043	+1 (973) 655- 5225	andersonmar@montclair.

2. Contact Representative

Name	Organization
David M. Silverman, Esq.	Davis Wright Tremaine LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1919 Pennsylvania Ave., N.W. Suite 800	Washington	DC	20006- 3401	+1 (202) 973- 4261	DavidSilverman@dwt.

3. Application Filing Fee

Not Applicable

4. Control of Respondent

(a) Provide the following information about the Respondent:		
Relationship to stations/permits	Licensee	
Is the Respondent's governing board (or other governing entity) directly or indirectly under the control of another entity?		No

(b) Provide the following information about this report:

Purpose	Biennial
"As of" date	10/01/2017
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.

5. Licensee(s) and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name	FRN
Montclair State University	0008300709

Fac. ID No.	Call Sign	City	State	Service
43579	WMSC	UPPER MONTCLAIR	NJ	FM

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 Documents

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Not Applicable.

2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, members of the governing board (or other governing entity), stockholders, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information			
FRN	0008300709	0008300709	
Entity Name	Montclair State University	Montclair State University	
Address	PO Box		
	Street 1	1 Normal Avenue	
	Street 2		
	City	Upper Montclair	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	07043	
	Country (if non-U.S. address)	United States	
Listing Type	Respondent		
Positional Interests (check all that apply)	Respondent		

Tribal Nation or Tribal Entity	Interest holder is not a Tribal nation or Tribal entity		
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?		No	

Ownership Information			
FRN	9990120312	9990120312	
Name	Rose C. Cali		
Address	PO Box		
	Street 1	11 Erwin Park Road	
	Street 2		
	City	Montclair	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	07042	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Education Advocate		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	us	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

Ownership Information		
	FRN	9990120313
	Name	Douglas Kennedy

Address	РО Вох		
	Street 1	135 Pollard Road	
	Street 2		
	City	Mountain Lakes	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	07046	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Chief Executive Officer, Peapack-Gladstone Bank		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	9990120314		
Name	Preston D. Pinkett, III.		
Address	РО Вох	PO Box	
	Street 1	1 Valley View	
	Street 2	Street 2	
	City	City Gladstone	
	State ("NA" if non-U.S. address)		
	Zip/Postal Code	Zip/Postal Code 07934	
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder	Other Interest Holder	

Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Chief Executive Officer, City National Bank of New Jersey		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting 0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	ssets (Equity Debt 0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No	

Ownership Information			
FRN	9990120315		
Name	Ralph A. LaRossa		
Address	PO Box		
	Street 1	366 Paul Avenue	
	Street 2		
	City	Allendale	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code 07401		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	President and Chief Operating Officer, PSE and G Power		
By Whom Appointed or Elected	Governor	Governor	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values			

from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on the	ve an attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	9990120316		
Name	John L. McGoldrick		
Address	PO Box		
	Street 1	25 Vandeventer Avenue	
	Street 2		
	City	Princeton	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08542	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Special Advisor, International AIDS Vaccine Initiative		
By Whom Appointed or Elected	Governor	Governor	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a	an attributable interest in one o	or more broadcast stations No	

Ownership Information			
FRN	9990120317	9990120317	
Name	William T. Mullen	William T. Mullen	
Address	РО Вох	PO Box	
	Street 1 21 St. Mary Drive		

	Street 2		
	City	Succasunna	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	07876	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	President NJ Bldg. and Construction Trades Council AFL-CIO		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

Ownership Information			
FRN	9990120318		
Name	George J. Hiltzik		
Address	PO Box		
	Street 1	1229 W. Laurelton Parkway	
	Street 2		
	City Teaneck State ("NA" if non-U.S. NJ address)		
	Zip/Postal Code 07666		
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		

Principal Profession or Occupation	Principal, Hiltzik Strategies	
By Whom Appointed or Elected	Governor	
Citizenship, Gender, Citizenship		US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	0.0%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No

Ownership Information			
FRN	9990120319	9990120319	
Name	Susan A. Cole	Susan A. Cole	
Address	PO Box		
	Street 1	Montclair State University	
	Street 2	1 Normal Avenue	
	City	Montclair	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	07043	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	President, Montclair State Univ	President, Montclair State University	
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	

Total assets (Equi	ty Debt 0.0%	
Does interest holder have an attributable interest that do not appear on this report?	t in one or more broadcast station	s No

Ownership Information				
FRN	9990120320			
Name	Francis M.C. Cuss			
Address	РО Вох			
	Street 1	111 Rippling Brood Way		
	Street 2			
	City	Bernardsville		
	State ("NA" if non-U.S. address)	NJ		
	Zip/Postal Code	07924		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Former Executive Vice President and Chief Scientific Officer - Retired, Bristol-Myers Squibb Co.			
By Whom Appointed or Elected	Governor			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a	n attributable interest in one o	r more broadcast stations	No	

Ownership Information			
FRN	9990120321		
Name	Thomas Maguire		
Address	РО Вох		
	Street 1	22310 Fairview Bend Drive	
	Street 2		

	City	Bonita Springs	
	State ("NA" if non-U.S. address)	FL	
	Zip/Postal Code	34135	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired Senior Vice President, National Operations Support, Verizon Telecom		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations	No

Ownership Information		
FRN	9990120323	
Name	Mary A. Comito	
Address	РО Вох	
	Street 1	26 Conklin Street
	Street 2	
	City Roseland	
	State ("NA" if non-U.S. NJ address)	
	Zip/Postal Code	07068
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Insurance and Financial Advisor, State Farm Insurance	

By Whom Appointed or Elected	Governor		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Female	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have that do not appear on this	an attributable interest in one creport?	or more broadcast stations No	

Ownership Information			
FRN	9990120324	9990120324	
Name	Jean Marc de Grandpre	Jean Marc de Grandpre	
Address	PO Box		
	Street 1	39 Birchwood Road	
	Street 2		
	City	Old Tappan	
	State ("NA" if non-U.S. NJ address) Zip/Postal Code 07675		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	General Manaager, New York Red Bulls and Red Bull Arena		
By Whom Appointed or Elected	Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

No

Ownership Information				
FRN	9990120325			
Name	Lawrence R. Inserra, Jr.			
Address	PO Box			
	Street 1	20 Henion Garden		
	Street 2			
	City	Mahwah		
	State ("NA" if non-U.S. address)	NJ		
	Zip/Postal Code	07430		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Chairman and Chief Executive Officer, Inserra Supermarkets Inc.			
By Whom Appointed or Elected	Governor	Governor		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	0.0%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)	0.0%		
Does interest holder have a	an attributable interest in one o	r more broadcast stations No		

Ownership Information		
FRN	9990120326	
Name	Kent Sluyter	
Address	PO Box	
	Street 1	10 Orchard Lane
	Street 2	
	City	Lebanon

States overning entity)		
overning entity)		
overning entity)		
Chief Executive Officer, Individual Life Insurances and Prudential Advisors, Prudential		
Governor		
panic or Latino		
White		
0.0%		
)		

Ownership Information			
FRN	9990120327		
Name	Hasani Council		
Address	РО Вох		
	Street 1	43 Scheerer Avenue	
	Street 2		
	City Newark		
	State ("NA" if non-U.S. NJ address) Zip/Postal Code 07112		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Student Member		
By Whom Appointed or Elected	Elected by Students		

Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Male
	Ethnicity	Not Hispanic or Latino
	Race	Black or African American
Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	0.0%
	Equity	0.0%
	Total assets (Equity Debt Plus)	0.0%
Does interest holder have that do not appear on this	an attributable interest in one o	or more broadcast stations No

Ownership Information			
FRN	9990120328		
Name	Cierra Watts		
Address	РО Вох		
	Street 1	927 S. 17th Street	
	Street 2		
	City	Newark	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	07108	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Student Member		
By Whom Appointed or Elected	Elected by Students		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages (enter percentage values	Voting	0.0%	
from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)	0.0%	
Does interest holder have a that do not appear on this	an attributable interest in one oreport?	r more broadcast stations	No

(b) Respondent certifies that any interests, including equity, financial, or voting interests, not reported in this filing are non-attributable. If "No," submit as an exhibit an explanation.	Yes
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(c) Is Respondent seeking an attribution exemption for any office duties wholly unrelated to the Licensee(s)?	er or director with No
If "Yes," complete the information in the required fields and submit an that individual's duties and responsibilities, and explaining why that in attributed an interest.	, ,

3. Organizational Chart (Licensees Only)

Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

Licensee has no parent entity.

Section III - Certification

Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: University Counsel Exact Legal Title or Name of Respondent: Montclair State University Name: Mark J. Fleming Phone: 9736555225