

(REFERENCE COPY - Not for submission)

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

File Number: 0000175562 | Submit Date: 2021-12-01 | FRN: 0005100185

Purpose: Noncommercial Broadcast Stations Biennial Ownership Report Status: Received Status Date: 12/01/2021

Filing Status: Active

Section I - General Information

1. Respondent

FRN	Entity Name
0005100185	Auricle Communications

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
PO Box 2011	Jersey City	NJ	07303- 2011	+1 (201) 521- 1416	ken@wfmu.

2. Contact Representative

Name	Organization
Anne Goodwin Crump	Fletcher, Heald & Hildreth, PLC

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1300 N. 17th Street 11th Floor	Arlington	VA	22209	+1 (703) 812-0426	crump@fhhlaw.com

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 boindirectly under the control of ano	ard (or other governing entity) directly or ther entity?	No

(b) Provide the following information about this report:		
Purpose	Biennial	
"As of" date	10/01/2021	
	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.	

and Station(s)

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

Licensee/Permittee Name	FRN
Auricle Communications	0005100185

Fac. ID No.	Call Sign	City	State	Service
3249	WFMU	EAST ORANGE	NJ	FM
41548	W220EG	NEW CITY	NY	FX
60031	WMFU	MOUNT HOPE	NY	FM
93996	W220EJ	WEEHAWKEN	NJ	FX

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.

Document Information	
Description of contract or instrument	Certificate of Incorporation
Parties to contract or instrument	New York State Department of Education
Date of execution	02/1992
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: Certificate of Incorporation

Document Information	
Description of contract or instrument	By-laws
Parties to contract or instrument	New York State Department of Education
Date of execution	02/1992
Date of expiration	No expiration date
Agreement type (check all that apply)	Other Agreement Type: By-laws

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	0005100185			
Entity Name	Auricle Communications	Auricle Communications		
Address	PO Box	2011		
	Street 1			
	Street 2			
	City	Jersey City		
	State ("NA" if non-U.S. address)	NJ		
	Zip/Postal Code	07303-2011		
	Country (if non-U.S. address)	United States		
Listing Type	Respondent	Respondent		
Positional Interests (check all that apply)	Respondent			
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	Interest holder is not a Tribal nation or Tribal entity		
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	

FRN	9990127527	9990127527	
Name	Pat Collins	Pat Collins	
Address	РО Вох		
	Street 1	48 Mountain Avenue	
	Street 2		
	City	Millburn	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	07041	
	Country (if non-U.S. address)	United States	

Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Attorney	Attorney	
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990127529	
Name	Ken Freedman	
Address	РО Вох	
	Street 1	920 Park Avenue
	Street 2	
	City	Hoboken
	State ("NA" if non-U.S. address)	NJ
	Zip/Postal Code 07030	
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Radio Administrator	
By Whom Appointed or Elected	Board	
Citizenship, Gender, Citizenship US		US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	8.3%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations	No

Ownership Information		
FRN	9990127534	
Name	Steve Rathe	
Address	РО Вох	
	Street 1	69 Murray Street
	Street 2	
	City	New York
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	10007-2136
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
Positional Interests (check all that apply)	Officer, Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Media Administrator	
By Whom Appointed or Elected	Board	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	8.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt	

Ownership Information		
FRN	9990127539	
Name	Kelly Jones	
Address	PO Box	
	Street 1	9 Glenside Drive

	Street 2		
	City	Annandale	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08801	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Officer, Member of Governing	Board (or other governing entity)	
Principal Profession or Occupation	Bookkeeper		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No	

Ownership Information		
FRN	9990127543	
Name	Irene Trudel	
Address	РО Вох	
	Street 1	77 West 85th Street
	Street 2	Apt. 6C
	City	New York
	State ("NA" if non-U.S. NY address) Zip/Postal Code 10024	
	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	Broad Engineer	

. . . .

By Whom Appointed or Elected	Board	
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US
	Gender	Female
	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	8.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have that do not appear on this	an attributable interest in one o	r more broadcast stations No

Ownership Information		
FRN	9990127547	
Name	Dave Mandl	
Address	РО Вох	
	Street 1	20 Plaza Street
	Street 2	Apt. F11
	City	Brooklyn
	State ("NA" if non-U.S. address)	NY
	Zip/Postal Code	11215
	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	Computer Programmer	
By Whom Appointed or Elected	Board	
Citizenship, Gender,	Citizenship	US
Ethnicity, and Race Information (Natural	Gender	Male
Persons Only)	Ethnicity	Not Hispanic or Latino
	Race	White
Interest Percentages	Voting	8.3%
(enter percentage values from 0.0 to 100.0)	Equity	0.0%
	Total assets (Equity Debt Plus)	
Does interest holder have a	an attributable interest in one o	r more broadcast stations No

Ownership Information			
FRN	9990127554		
Name	Monica Lynch		
Address	PO Box		
	Street 1	455 West 23rd Street	
	Street 2	Apt. 10F	
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10023	
	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	Music Executive		
By Whom Appointed or Elected	Board	Board	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this	an attributable interest in one o	or more broadcast stations No	

Ownership Information		
FRN	9990127555	
Name	Alan Rojer	
Address	PO Box	
	Street 1	423 Walton Road
	Street 2 City Maplewood	
	State ("NA" if non-U.S. address)	NJ

	Zip/Postal Code	07040	
	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	Computer Programmer		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this	terest holder have an attributable interest in one or more broadcast stations No not appear on this report?		

Ownership Information			
FRN	9990127556		
Name	Elizabeth Berg		
Address	РО Вох		
	Street 1	243 Montrose Avenue	
	Street 2	Apt. 3R	
	City Brooklyn		
	State ("NA" if non-U.S. NY address)		
	Zip/Postal Code	11206	
	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	Radio Administrator		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Ethnicity, and Race		
Information (Natural			

Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a that do not appear on this re	n attributable interest in one or eport?	r more broadcast stations	No

Ownership Information			
FRN	9990127558		
Name	Jim Friedlich	Jim Friedlich	
Address	PO Box	PO Box	
	Street 1	143 West 20th Street	
	Street 2	Apt. 5N	
	City	New York	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	10011	
	Country (if non-U.S. address)	United States	
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	Media Investment Analyst		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	ace White	
Interest Percentages Voting 8.3%			
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have a	an attributable interest in one o	r more broadcast stations	No

Ownership Information	
FRN	9990127559
Name	Joseph Binder

Address	PO Box		
	Street 1	231 Park Place	
	Street 2	Apt. 23	
	City	Brooklyn	
	State ("NA" if non-U.S. address)	NY	
	Zip/Postal Code	11238	
	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	Attorney		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	8.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Ownership Information			
FRN	9990148427		
Name	Gaylord Fields	Gaylord Fields	
Address	PO Box		
	Street 1 510 Mnnmouth Street		
	Street 2		
	City Jersey City		
	State ("NA" if non-U.S. NJ address)		
	Zip/Postal Code 07302		
	Country (if non-U.S. United States address)		
Listing Type	Other Interest Holder		
	Member of Governing Board (or other governing entity)		

Positional Interests (check all that apply)			
Principal Profession or Occupation	Editor		
By Whom Appointed or Elected	Board		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	8.3%	
(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
• • •	at any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes

(c) Is Respondent seeking an attribution exemption for any officer or director with duties wholly unrelated to the Licensee(s)?	No
If "Yes," complete the information in the required fields and submit an Exhibit fully describing that individual's duties and responsibilities, and explaining why that individual should not be 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: Treasurer Exact Legal Title or Name of Respondent: Auricle Communications Name: Kenneth Freedman Phone: 2015211416 12/01/2021
---------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------