

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

File Number:0000228366Submit Date:2023-11-28FRN:0005072053Purpose:Noncommercial Broadcast Stations Biennial Ownership ReportStatus:Status:Status Date:11/28/2023Filing Status:ActiveStatus:Status:Status Date:11/28/2023

### **Section I - General Information**

### 1. Respondent

FRN	Entity Name
0005072053	Rowan University

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
201 Mullica Hill Road	Glassboro	NJ	08028	+1 (856) 256- 4317	jonesd@rowan. edu

Organization

Tepper Law Firm, LLC

### 2. Contact Representative

Name

Cary S. Tepper

Not Applicable

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
4900 Auburn Avenue Suite 100	Bethesda	MD	20814-2632	+1 (301) 718-1818	tepperlaw@aol.co

## 3. Application Filing Fee

4. Control of Respondent

(a) Provide the following information	on about the Respondent	:			
Relationship to stations/permits	Licensee	icensee			
Is the Respondent's governing boa indirectly under the control of anot		ntity) directly or	No		
(b) Provide the following information	on about this report:				
Purpose		Biennial			
"As of" date		10/01/2023			
		•	ownership report or validating or biennial ownership report, this		

filed.

date must be Oct. 1 of the year in which this report is

Licensee/Permittee Name FRN					
Rowan University		000507	2053		
Fac. ID No.	Call Sign	City		State	Service
57778	WGLS-FM	GLASSBORO		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.					
			nk for an interest holder unless that interest holder has an Commission's Equity Debt Plus attribution standard, 47 C.F.R.			
	In the case of vertical or indirect attributable interest in the Licens		nose interests in the Respondent that also represent an ng 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	0005072053				
	Entity Name	Rowan University				
	Address	PO Box				
		Street 1	201 Mullica Hill Road			

Address	PO Box	
	Street 1	201 Mullica Hill Road
	Street 2	
	City	Glassboro
	State ("NA" if non-U.S. address)	NJ
	Zip/Postal Code	08028
	Country (if non-U.S. address)	United States
Listing Type	Respondent	
<b>Positional Interests</b> (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 that do not appear on this re	attributable interest in one or port?	more broadcast stations	No

Ownership Information				
FRN	9990118417			
Name	Brenda J. Bacon			
Address	PO Box			
	Street 1	525 Fellowship Road		
	Street 2	Suite 360		
	City	Mt. Laurel		
	State ("NA" if non-U.S. address)	NJ		
	Zip/Postal Code	08054		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	President and CEO, Brandywine Senior Living			
By Whom Appointed or Elected	Appointed by the State Govern	nor		
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	Voting	07.1%		
(enter percentage values from 0.0 to 100.0)	Equity	00.0%		
	Total assets (Equity Debt Plus)	00.0%		
	Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?			

# Ownership Information FRN 9990118418 Name Chad Bruner

Address	PO Box	660	
	Street 1		
	Street 2		
	City	Sewell	
	State ("NA" if non-U.S. address)	NJ	
	Zip/Postal Code	08080	
	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	County Administrator, Gloucester County		
By Whom Appointed or Elected	Appointed by the State Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	07.1%	
(enter percentage values from 0.0 to 100.0)	Equity	00.0%	
	Total assets (Equity Debt	00.0%	

Ownership Information				
FRN	9990118419	9990118419		
Name	Michael Carbone			
Address	PO Box			
	Street 1	10113 Magnolia Bend		
	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			

<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Retired	Retired		
By Whom Appointed or Elected	Appointed by State Governor	Appointed by State Governor		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	07.1%		
(enter percentage values from 0.0 to 100.0)	Equity	00.0%		
	Total assets (Equity Debt Plus)	00.0%		

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

No

### **Ownership Information**

FRN	9990118423		
Name	Jean Edelman		
Address	PO Box		
	Street 1	536 Innsbruck Avenue	
	Street 2		
	City	Great Falls	
	State ("NA" if non-U.S. address)	VA	
	Zip/Postal Code 22066		
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Co-Founder, Edelman Financial		
By Whom Appointed or Elected	Appointed by the State Governor		
Citizenship, Gender,	Citizenship US		
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race White		
Interest Percentages (enter percentage values	<b>Voting</b> 07.1%		

from 0.0 to 100.0)	Equity	00.0%	
	Total assets (Equity Debt Plus)	00.0%	
Does interest holder have ar	n attributable interest in one or	more broadcast stations	No

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

Ownership Information				
FRN	9990118424			
Name	Dr. Thomas J. Gallia			
Address	PO Box			
	Street 1	21 Pintail Drive		
	Street 2			
	City	Glassboro		
	State ("NA" if non-U.S. address)	NJ		
	Zip/Postal Code	08028		
	Country (if non-U.S.     United States       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	Vice President Emeritus, Rowan University			
By Whom Appointed or Elected	Appointed by the State Governor			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	07.1%		
(enter percentage values from 0.0 to 100.0)	Equity	00.0%		
	Total assets (Equity Debt Plus)	00.0%		

Ownership Information			
FRN	9990118425		
Name	Frank Giordano		
Address	es PO Box		
	Street 1 1518 Walnut Street		

	Street 2	Suite 1706		
	City	Philadelphia		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	19102		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	President, Atlantic Trailer Leasing Corp.			
By Whom Appointed or Elected	Apointed by the State Governor			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	07.1%		
(enter percentage values from 0.0 to 100.0)	Equity	00.0%		
	Total assets (Equity Debt Plus)	00.0%		
Does interest holder have a that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

Ownership	Information
Ownership	mormation

Ownership information				
FRN	9990118429			
Name	George S. Loesch			
Address	PO Box			
	Street 1 6 Trefoil Terrace			
	Street 2			
	City     Mt. Laurel       State ("NA" if non-U.S. address)     NJ			
	Zip/Postal Code 08054			
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			

Principal Profession or Occupation	Vice President, Corporate Services, Connor Strong and Buckelew		
By Whom Appointed or Elected	Appointed by the State Governor		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural Persons Only)	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	07.1%	
(enter percentage values from 0.0 to 100.0)	Equity	00.0%	
	Total assets (Equity Debt Plus)	00.0%	

that do not appear on this report?

Ownership Information				
FRN	9990118433	9990118433		
Name	Larry Salva			
Address	PO Box			
	Street 1	460 W. Chestnut Hill Avenue		
	Street 2			
	City	Philadelphia		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code	Zip/Postal Code 19118		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Retired			
By Whom Appointed or Elected	Appointed by the State Governor			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	07.1%		
(enter percentage values from 0.0 to 100.0)	Equity	00.0%		

	Total assets (Equity Debt Plus)	00.0%	
Does interest holder have an	attributable interest in one or	more broadcast stations	No

that do not appear on this report?

Ownership Information	Ownership Information			
FRN	9990118435			
Name	Virginia Smith			
Address	PO Box	157		
	Street 1	10 Indel Avenue		
	Street 2			
	City	Rancocas		
	State ("NA" if non-U.S. address)	NJ		
	Zip/Postal Code	08073		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Chair, Inductotherm Corp, and Group VP, Inductotherm Group			
By Whom Appointed or Elected	Appointed by the State Governor			
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	07.1%		
(enter percentage values from 0.0 to 100.0)	Equity	00.0%		
	Total assets (Equity Debt Plus)	00.0%		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	

Ownership Information				
FRN	9990154831			
Name	Anthony Calabrese			
Address	PO Box			
	Street 1	3301 Abitare Blvd.		
	Street 2			

ate ("NA" if non-U.S. dress) D/Postal Code Duntry (if non-U.S. dress) her Interest Holder ember of Governing Board ( tired	NJ 08043 United States	
p <b>untry (if non-U.S. dress)</b> her Interest Holder ember of Governing Board (	United States	
dress) her Interest Holder ember of Governing Board (		
ember of Governing Board (	or other governing entity)	
	or other governing entity)	
tired		
Appointed by State Governor		
izenship	US	
Gender Male		
nnicity	Not Hispanic or Latino	
се	White	
ting	07.1%	
uity	00.0%	
tal assets (Equity Debt us)	00.0%	
	ender nnicity ce ting uity tal assets (Equity Debt us)	InderMaleInicityNot Hispanic or LatinoIceWhiteting07.1%uity00.0%tal assets (Equity Debt us)00.0%Uitable interest in one or more broadcast stations

Ownership Information		
FRN	9990154832	
Name	Kris Kolluri	
Address	PO Box	
	Street 1	Two Penn Plaza East
	Street 2 11th Floor	
	City Newark	
	State ("NA" if non-U.S. address)NJZip/Postal Code07105	
	Country (if non-U.S. address)	United States
Listing Type	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	CEO, Gateway Development Commission	

By Whom Appointed or Elected	Appointed by State Governor			
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US		
	Gender	Male	Male	
	Ethnicity	Not Hispanic or Latino		
	Race	Asian		
Interest Percentages	Voting	07.1%		
(enter percentage values from 0.0 to 100.0)	Equity	00.0%		
	Total assets (Equity Debt Plus)	00.0%		
Does interest holder have an attributable interest in one or more broadcast stations No			No	

Ownership Information			
FRN	9990154833		
Name	Barbara Armand Kushner		
Address	PO Box		
	Street 1     One Port Center		
	Street 2	2 Riverside Drive; Suite 507	
	City	Camden	
	State ("NA" if non-U.S.NJaddress)		
	Zip/Postal Code 08103		
	Country (if non-U.S.United Statesaddress)		
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	President and CEO, Armand Corporation		
By Whom Appointed or Elected	Appointed by State Governor		
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	07.1%	
from 0.0 to 100.0)	Equity	00.0%	
	Total assets (Equity Debt Plus)	00.0%	

that do not appear on this report?

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

No

Ownership Information				
FRN	9990154834			
Name	Doctor Sunitha Menon-Rudolph			
Address	PO Box			
	Street 1	5781 Oak Crest Drive		
	Street 2			
	City	Doylestown		
	State ("NA" if non-U.S. address)	PA		
	Zip/Postal Code 18902			
	Country (if non-U.S.     United States       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	Independent Consultant			
By Whom Appointed or Elected	Appointed by State Governor			
Citizenship, Gender,	Citizenship US			
Ethnicity, and Race Information (Natural	Gender Female			
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race Asian			
Interest Percentages (enter percentage values	<b>Voting</b> 07.1%			
from 0.0 to 100.0)	Equity	00.0%		
	Total assets (Equity Debt Plus)	00.0%		
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?				

### **Ownership Information**

FRN	9990154835	
Name	Nick Petroni	
Address	PO Box	
	Street 1	515 University Blvd.
	Street 2	
	City	Glassboro

	State ("NA" if non-U.S. address)	NJ		
	Zip/Postal Code	08028		
	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			
By Whom Appointed or Elected	Appointed by State Governor	Appointed by State Governor		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	07.1%		
(enter percentage values from 0.0 to 100.0)	Equity	00.0%		
	Total assets (Equity Debt Plus)	00.0%		
Does interest holder have that do not appear on this	an attributable interest in one o report?	r more broadcast stations	No	
., .	at any interests, including equi his filing are non-attributable. an explanation.	ty, financial, or voting	Yes	
	an attribution exemption for an the Licensee(s)?	y officer or director with	No	
duties wholly unrelated to				
•	ation in the required fields and su esponsibilities, and explaining why			
If " <u>Yes</u> ," complete the inform that individual's duties and re	·			
If " <u>Yes</u> ," complete the inform that individual's duties and re attributed an interest.	·	y that individual should not be vertical ownership structure inclu es with a single parent entity may	y provide a brief explanator	

### **Section III - Certification**

3. Organizational Chart (Licensees

Only)

Question

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: <b>Chair, Board of Trustees</b> Exact Legal Title or Name of Respondent: <b>Rowan University</b> Name: <b>Chad Bruner</b> Phone: <b>8562564317</b> 11/28/2023