Goal 1: Enhance discovery and advance HIV science through fundamental research.

Description: Fundamental research seeks to expand understanding of the biological, physiological, interpersonal, and social-structural mechanisms of HIV—*i.e.,* how it operates as a virus and as an infectious disease pandemic—at the molecular, cellular, individual, community, and population level. This understanding provides the foundation for the development of safe, effective, and scalable tools to prevent, treat, and ultimately cure HIV infection, as well as reduce the risk and impact of comorbid conditions and co-occurring infections. Fundamental research includes theoretical, pre-clinical, and methodological research across scientific disciplines.

Goal 2: Advance the development and assessment of novel interventions for HIV prevention, treatment, and cure.

Description: Knowledge gleaned from fundamental, pre-clinical, and translational research to inform clinical trials and other intervention studies to test the most promising products, tools, or strategies for HIV prevention, treatment, and cure and management of its complications. Rigorous randomized control trials, observational studies, and other methodologies assess biological, behavioral, and social outcomes of novel interventions, as well as their feasibility, acceptability, effectiveness, and scalability in differing populations and across the lifespan.

Goal 3: Optimize public health impact of HIV discoveries through translation, dissemination, and implementation of research findings.

Description: As HIV prevention, treatment, and cure interventions are shown to be efficacious, their findings must be translated to inform practice and to connect with communities and the general public in order to maximize their public health impact. Implementation research can identify how best to facilitate effective adaptation, uptake, integration, and scale-up of evidence-based HIV interventions. Information-sharing through community partnerships, research collaborations, and dissemination activities can amplify the impact of research and promote health equity.

Goal 4: Build research workforce and infrastructure capacity to enhance sustainability of HIV scientific discovery.

Description: Continued progress in HIV science and its application requires robust support for research tools, computational resources, instrumentation, data and physical infrastructure, and workforce development, particularly in institutions that serve underrepresented or high HIV burden populations or that historically have been underfunded in the United States and globally. Such enhanced capacity-strengthening efforts will promote diversity and inclusion in the HIV research workforce.

Respondents are also invited to share comments on the new framework.

Responses to this RFI Notice are voluntary. The submitted information will be reviewed by NIH staff and may be made available to the public. Submitted information will not be considered confidential. This request is for information and planning purposes and should not be construed as a solicitation or as an obligation of the federal government or the NIH. No awards will be made based on responses to this Request for Information. The information submitted will be analyzed and may be used in reports or presentations. Those who respond are advised that the NIH is under no obligation to acknowledge receipt of your comments or provide comments on your submission. No proprietary, classified, confidential and/or sensitive information should be included in your response. The NIH and the government reserve the right to use any non-proprietary technical information in any future solicitation(s).

Dated: February 5, 2024.

Lawrence A. Tabak,

Principal Deputy Director, National Institutes of Health.

[FR Doc. 2024–03122 Filed 2–14–24; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Secretary; Notice of Meeting

Pursuant to section 1009 of the Federal Advisory Committee Act, as amended, notice is hereby given of a meeting of the Muscular Dystrophy Coordinating Committee (MDCC).

The meeting will be held as a virtual meeting and will be open to the public as indicated below. Individuals who plan to view the virtual meeting and need special assistance or other reasonable accommodations to view the meeting, should notify the Contact Person listed below in advance of the meeting. The meeting can be accessed from the NIH Videocast at the following link: *https://videocast.nih.gov/.*

Name of Committee: Muscular Dystrophy Coordinating Committee.

Date: March 18, 2024.

Time: 12:00 p.m. to 4:00 p.m. ET.

Agenda: The purpose of this meeting is to bring together committee members, representing government agencies, patient advocacy groups, other voluntary health organizations, and patients and their families to update one another on progress relevant to the Action Plan for the Muscular Dystrophies and to coordinate activities and discuss gaps and opportunities leading to better understanding of the muscular dystrophies, advances in treatments, and improvements in patients' and their families' lives. The agenda for this meeting will be available on the MDCC website: *https://www.mdcc.nih.gov/.*

Registration: To register, please go to: *https://roseliassociates.zoomgov.com/meeting/register/vJItc-6hrTsuHDK-RDbVsTHLsMoFRuqyoRw#/registration.*

Webcast Live: https://videocast.nih.gov/.

Place: National Institutes of Health, Neuroscience Center, 6001 Executive Boulevard, Rockville, MD 20852 (Virtual Meeting).

Contact Person: Glen Nuckolls, Ph.D., Program Director, National Institute of Neurological, Disorders and Stroke (NINDS), NIH, 6001 Executive Blvd., Bethesda, MD 20892, 301–496–5876, *MDCC@nih.gov.*

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

Anyone from the public can attend the meeting virtually via the NIH Videocasting website (*https://videocast.nih.gov*). Please continue checking these websites, in addition to the committee website listed below, for the most up to date guidance as the meeting date approaches.

More information can be found on the Muscular Dystrophy Coordinating Committee website: *https://mdcc.nih.gov/.*

Dated: February 9, 2024.

Miguelina Perez,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2024–03106 Filed 2–14–24; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Allergy and Infectious Diseases; Notice of Closed Meeting

Pursuant to section 1009 of the Federal Advisory Committee Act, as amended, notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), title 5 U.S.C.,

as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Allergy and Infectious Diseases Special Emphasis Panel; NIAID New Innovators Awards (DP2 Clinical Trial Not Allowed).

Date: March 11–13, 2024.

Time: 10:00 a.m. to 6:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institute of Allergy and Infectious Diseases, National Institutes of Health, 5601 Fishers Lane, Rockville, MD 20852 (Video Assisted Meeting).

Contact Person: Vanitha Sundaresa Raman, Scientific Review Officer, Scientific Review Program, Division of Extramural Activities, National Institute of Allergy and Infectious Diseases, National Institutes of Health, 5601 Fishers Lane, MSC 9834, Rockville, MD 20852, 301–761–7949, *vanitha.raman@nih.gov*.

(Catalogue of Federal Domestic Assistance Program Nos. 93.855, Allergy, Immunology, and Transplantation Research; 93.856, Microbiology and Infectious Diseases Research, National Institutes of Health, HHS)

Dated: February 12, 2024.

Lauren A. Fleck,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2024–03195 Filed 2–14–24; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The invention listed below is owned by an agency of the U.S. Government and is available for licensing to achieve expeditious commercialization of results of federally-funded research and development. Foreign patent applications are filed on selected inventions to extend market coverage for companies and may also be available for licensing.

FOR FURTHER INFORMATION CONTACT: Licensing information may be obtained by communicating with the Technology Transfer and Intellectual Property Office, National Institute of Allergy and Infectious Diseases, 5601 Fishers Lane, Rockville, MD 20852 by contacting Dawn Taylor-Mulneix at 301–451–8021 or *dawn.taylor-mulneix@nih.gov.* A signed Confidential Disclosure Agreement will be required to receive copies of unpublished information related to the invention.

SUPPLEMENTARY INFORMATION: Technology description follows:

Equipping Natural Killer Cells With a CD28H-Containing Chimeric Antigen Receptor To Overcome Inhibition for Cancer Immunotherapy

Description of Technology

Immunotherapy with chimeric antigen receptor (CAR) cytotoxic T cells have been successful in the clinical treatment of hematologic cancers; however adverse side effects such as severe cytokine release syndrome and neurotoxicity are associated with CAR–T cell infusion. CAR natural killer (NK) cells represent a viable alternative with demonstrated advantages over CAR–T cells for the elimination of tumor cells, but NK inhibitory cell receptors need to be reduced or overridden. To overcome this challenge, scientists at NIAID have developed CAR constructs that overcome inhibition of NK cells by receptors for human major histocompatibility complex molecules HLA–E and HLA–C, based on in vitro studies. NK cells that are expressing variants of this invention robustly overcome inhibition imposed by $CD19^+$ $HLA–I^+$ tumor cells and are cytotoxic to them.

This technology is available for licensing for commercial development in accordance with 35 U.S.C. 209 and 37 CFR part 404, as well as for further development and evaluation under a research collaboration.

Potential Commercial Applications

- Method of adoptive cell therapy where CAR–NK cells are the effective cell.

Competitive Advantages

- CD28H CAR–NK cells induce a more robust anti-tumor cytotoxic activity compared to third generation CAR–T cells and are more potent in overcoming inhibition.
- CAR–NK can be developed without the need of genetic silencing of TCR.

Developmental Stage

- Pre-clinical.

Inventors: Eric Long, Ph.D. and Xiaoxuan Zhuang, both of NIAID.

Publications:

Zhuang X., Long E.O., ''NK cells equipped with a chimeric antigen receptor that overcomes inhibition by HLA Class I for adoptive transfer of CAR–NK Cells. Front. Immunol. 13:840844. *https://www.frontiersin.org/articles/10.3389/fimmu.2022.840844/full.* May 2, 2022.

Zhuang X. and Long E.O., ''CD28 homolog is a strong activator of Natural Killer cells for lysis of B7H7-positive tumor cells.'' Cancer Immunol. Res. 7(6):939–951. *https://cancerimmunolres.aacrjournals.org/content/7/6/939.long.* April 24, 2019.

Zhuang X, Long E.O. ''Inhibition-resistant CARs for NK cell cancer immunotherapy.'' Trends Immunol. 40(12):1078–1081.*https://www.sciencedirect.com/science/article/pii/S1471490619302133?via%3Dihub.* November 12, 2019.

Intellectual Property: HHS Reference No. E–097–2020; Patent Application Nos.: PCT Application No. PCT/US2020/02498, US: 17/914,027, Australia: 2020437669, Brazil: BR112022017512–4, Canada: 3174779, Europe: 20719313.7, India: 2022170585054, Japan: 2022–557764, South Korea: 10–2022–7037236.

Licensing Contact: To license this technology, please contact Dawn Taylor-Mulneix at 301–451–8021 or *dawn.taylor-mulneix@nih.gov,* and reference E–097–2020.

Collaborative Research Opportunity: The National Institute of Allergy and Infectious Diseases is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate, or commercialize this technology. For collaboration opportunities, please contact Dawn Taylor-Mulneix at 301–451–8021 or *dawn.taylor-mulneix@nih.gov.*

Dated: February 9, 2024.

Surekha Vathyam,

Deputy Director, Technology Transfer and Intellectual Property Office, National Institute of Allergy and Infectious Diseases.

[FR Doc. 2024–03121 Filed 2–14–24; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Director; Notice of Charter Renewal

In accordance with Title 41 of the U.S. Code of Federal Regulations, Section 102–3.65(a), notice is hereby given that the charter for the Cures Acceleration Network Review Board, was renewed for an additional two-year period on February 7, 2024.