published by the journal, whether or not under a federal award (GPS 7.9.1).

• Costs for services incurred after closeout of the award, even for an Author Accepted Manuscript subject to the NIH Public Access Policy, are unallowable because the costs of publications must be incurred before closeout (GPS 7.9.1). Note that this means that costs for publication may be charged after the period of performance and prior to closeout (*i.e.,* during the 120-day liquidation period). However, these costs must only be for the originally approved activities and must not be associated with any new work performed outside of the period of performance.

Points To Consider for Authors and Institutions in Assessing Reasonable Costs

As stated in Section 7.2 of the NIH GPS, a cost may be considered reasonable if the nature of the goods or services acquired or applied and the associated dollar amount reflect the action that a prudent person would have taken under the circumstances prevailing when the decision to incur the cost was made. NIH promotes *reasonable* publication costs to ensure an equitable system for publishing opportunities. However, establishing a particular threshold for what is reasonable may lead to inequitable outcomes in specific circumstances, so NIH is instead providing these Points to Consider in assessing reasonable costs to guide authors and institutions. While NIH may modify this approach in the future, NIH encourages researchers and institutions to consider, when determining whether costs are reasonable:

- Amount of publication cost in relation to NIH award
- Other works researchers may wish to produce during an award period
- Professional and institutional priorities
- Sustainability in terms of the library budget, laboratory budget, and other relevant budgets, if such costs were to be consistently paid
- Relevance of the journal in communicating findings to advance science and/or improve health outcomes
- Suitability of the journal's target readership for the dissemination of the content

Other Public Works for Which Allowable Costs May Be Requested

This Guidance is primarily to help funded authors and institutions understand what costs are allowable under the NIH Public Access Policy. NIH acknowledges that the public dissemination of results from NIH funding does not occur only through peer-reviewed publications. Models for sharing research findings are evolving and allowable costs may be requested for publicly disseminating works reporting on the results of NIH funding that are not subject to the NIH Public Access Policy.

As a reminder, the unallowable costs listed above continue to apply, and works must be made publicly available to qualify for costs.

Reputable Journals and Responsible Conduct of Research

In addition, NIH reiterates its Statement on Article Publication Resulting from NIH Funded Research *https://grants.nih.gov/grants/guide/notice-files/NOT-OD-18-011.html,* a 2017 NIH Guide Notice that encourages authors to publish papers resulting from NIH-funded research in reputable journals. Fees paid to journals that have characteristics described in the Statement may be considered unreasonable.

Finally, NIH also reiterates the importance of maintaining integrity in science in its Guidance on the requirement for Instruction in the Responsible Conduct of Research *https://grants.nih.gov/grants/guide/notice-files/NOT-OD-22-055.html,* which includes responsible authorship and publication.

Dated: December 12, 2024.

Lawrence A. Tabak,

Principal Deputy Director, National Institutes of Health.

[FR Doc. 2024–29929 Filed 12–17–24; 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 contract proposals and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the contract proposals, 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; HHS–NIH–CDC–SBIR PHS 2025–1 Discovery and Development of Oral Small-molecule Direct-acting Antivirals Targeting Viruses of Pandemic Potential (Topic 146).

Date: January 15, 2025.

Time: 11:00 a.m. to 5:00 p.m.

Agenda: To review and evaluate contract proposals.

Place: National Institute of Allergy and Infectious Diseases, National Institutes of Health, 5601 Fishers Lane, Room 3F52A, Rockville, MD 20892 (Video Assisted Meeting).

Contact Person: Shilpakala Ketha, Ph.D., Scientific Review Officer, Scientific Review Program, Division of Extramural Activities, National Institute of Allergy and Infectious Diseases, National Institutes of Health, 5601 Fishers Lane, Room 3F52A, Rockville, MD 20892, (301) 761–6821, *shilpa.ketha@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: December 12, 2024.

Lauren A. Fleck,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2024–29838 Filed 12–17–24; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer at (240) 276–0361.

Project: Substance Abuse Prevention and Treatment Block Grant Synar Report Format, FFY 2024–2026—(OMB No. 0930–0222)—Extension

Section 1926 of the Public Health Service Act [42 U.S.C. 300x–26] stipulates that Substance Use Prevention, Treatment, and Recovery Services Block Grant (SUPTRS) funding agreements for alcohol and drug abuse programs for fiscal year 1994 and

subsequent fiscal years require states to have in effect a law providing that it is unlawful for any manufacturer, retailer, or distributor of tobacco products to sell or distribute any such product to any individual under the age of 21. This section further requires that states conduct annual, random, unannounced inspections to ensure compliance with the law; that the state submit annually a report describing the results of the inspections, the activities carried out by the state to enforce the required law, the success the state has achieved in reducing the availability of tobacco products to individuals under the age of 21, and the strategies to be utilized by the state for enforcing such law during the fiscal year for which the grant is sought.

Before making an award to a state under the Block Grant, the Secretary must make a determination that the state has maintained compliance with the regulations. If a determination is made that the state is not in compliance, penalties shall be applied. There are three (3) penalty options for failure to comply with the Synar requirements: (1) States may be fined a penalty up to 10 percent of the SUPTRS). (2) States may elect to submit a corrective action plan to the Assistant Secretary for Mental Health and Substance Use within 90 days of receipt of notice that they are not in compliance with the Synar regulations, which outlines strategies they will take to reduce the Retail Violation Rate to 20 percent or less. (3) States certify to the Secretary by May 1 of the fiscal year for which the funds are appropriated, consistent with subparagraph (B), that the State will commit additional State funds, in accordance with paragraph (1), to ensure that retailers do not sell tobacco products to individuals under 21 years of age; (Pub. L. 116–94 Statute, section 604 pg. 593). Respondents include the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the U.S. Virgin Islands, Guam, American Samoa, the Commonwealth of the Northern Mariana Islands, Palau, Micronesia, and the Marshall Islands. Red Lake Indian Tribe is not subject to tobacco requirements.

Regulations that implement this legislation are at 45 CFR 96.130, are approved by OMB under control number 0930–0163, and require that each state submit an annual Synar report to the Secretary describing their progress in complying with section 1926 of the PHS Act. The Synar report, due December 31 following the fiscal year for which the state is reporting, describes the results of the inspections and the activities carried out by the state to enforce the required law; the success the state has achieved in reducing the availability of tobacco products to individuals under the age of 21; and the strategies to be utilized by the state for enforcing such law during the fiscal year for which the grant is sought. SAMHSA is requesting an extension of OMB approval of the current report format associated with section 1926 (42 U.S.C. 300x–26) to 2026. Extending OMB approval of the current report format will continue to facilitate consistent, credible, and efficient monitoring of Synar compliance across the states.

ANNUAL REPORTING BURDEN

45 CFR citation	Number of respondents [1]	Responses per respondents	Total number of responses	Hours per response	Total hour burden
Annual Report (Section 1—States and Territories) 96.130(e)(1–3)	59	1	59	15	885
State Plan (Section II—States and Territories) 96.130(e)(4,5)96.130(g)	59	1	59	3	177
Total	59		118		1,062

[1] Red Lake Indian Tribe is not subject to tobacco requirements.

Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to *www.reginfo.gov/public/do/PRAMain.* Find this particular information collection by selecting ''Currently under 30-day Review—Open for Public Comments'' or by using the search function.

Alicia Broadus,

Public Health Advisor.

[FR Doc. 2024–29937 Filed 12–17–24; 8:45 am]

BILLING CODE 4162–20–P

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

[Docket ID FEMA–2024–0002]

Changes in Flood Hazard Determinations

AGENCY: Federal Emergency Management Agency, Department of Homeland Security.

ACTION: Notice.

SUMMARY: New or modified Base (1-percent annual chance) Flood Elevations (BFEs), base flood depths, Special Flood Hazard Area (SFHA) boundaries or zone designations, and/or regulatory floodways (hereinafter referred to as flood hazard determinations) as shown on the indicated Letter of Map Revision (LOMR) for each of the communities listed in the table below are finalized. Each LOMR revises the Flood Insurance Rate Maps (FIRMs), and in some cases the Flood Insurance Study (FIS) reports, currently in effect for the listed communities.

DATES: Each LOMR was finalized as in the table below.

ADDRESSES: Each LOMR is available for inspection at both the respective Community Map Repository address listed in the table below and online through the FEMA Map Service Center at *https://msc.fema.gov.*

FOR FURTHER INFORMATION CONTACT: Rick Sacbibit, Chief, Engineering Services Branch, Federal Insurance and Mitigation Administration, FEMA, 400 C Street SW, Washington, DC 20472, (202) 646–7659, or (email) *patrick.sacbibit@fema.dhs.gov;* or visit the FEMA Mapping and Insurance eXchange (FMIX) online at *https://*