○ PEDF mimics the natural protective process lost in patients with inherited eye diseases.

○ Protective effects on photoreceptors are independent of the gene mutations causing degeneration.

• Chemically synthesized bioactive peptide solutions are free of inactive ingredients, causing fewer secondary effects than mixed formulations.

Collaboration Opportunity: Researchers at the NEI seek licensing and/or co-development research collaborations for the development of an AVV2-based delivery system or an eyedrop formulation to deliver a PEDF peptide as a gene-agnostic approach to treating inherited retinal diseases.

Dated: July 21, 2026.

Richard U. Rodriguez,

Associate Director, Technology Transfer Center, National Cancer Institute.

[FR Doc. 2026–14980 Filed 7–23–26; 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 National Institute of Allergy and Infectious Diseases (NIAID), an institute of the National Institutes of Health (NIH), Department of Health and Human Services (HHS), is giving notice of the invention listed below, which 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: Inquiries related to this licensing opportunity should be directed to: Terrence Joyce at 301–761–7235, or *terrence.joyce@nih.gov.* 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: tel. 301–496–2644. A signed Confidential Disclosure Agreement will be required to receive copies of unpublished information related to the invention.

SUPPLEMENTARY INFORMATION: Technology description follows:

Replication-Competent VSV–BDBV Vaccine for Rapid Prevention and Post-Exposure Protection Against Bundibugyo Virus

Description of Technology

Bundibugyo virus (BDBV) is one of several ebolaviruses that cause Ebola virus disease (EVD). Sporadic outbreaks continue to occur in Central Africa, highlighting the need for effective vaccines that provide rapid protection.

Researchers at NIAID's Laboratory of Virology developed a vaccine against BDBV using vesicular stomatitis virus (VSV) to carry the BDBV surface glycoprotein (GP), a key target of the immune response, to BDBV. The team also created the DNA plasmid pATX–VSVΔG–BDBV GP, a circular DNA molecule used to produce the vaccine virus in cell culture. Subsequent laboratory studies confirmed that the vaccine could be produced in cells and express the BDBV glycoprotein as intended. This design stimulates both early immune defenses and longer-lasting immune responses against BDBV. The BDBV glycoprotein may also facilitate delivery of the vaccine to antigen-presenting cells, including monocytes, macrophages, and dendritic cells, which play a central role in initiating antiviral immune responses.

In nonhuman primate studies, a single intramuscular dose of the vaccine protected animals from disease within 3 days of vaccination, supporting further development of the vaccine for rapid protection and post-exposure use. The licensable materials include both the recombinant rVSV–BDBV vaccine and the corresponding DNA plasmid to support further development, manufacturing, and outbreak response.

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

• Leverages existing rVSV platforms, potentially reducing development and scale-up risk in manufacturing.

• Emergency vaccination programs, including vaccination of close contacts and surrounding communities during BDBV outbreaks.

• Pre-exposure vaccination for healthcare workers, laboratory personnel, outbreak-response teams, and others at increased risk of BDBV exposure.

• Post-exposure use and related development programs for BDBV and other filovirus countermeasures.

Competitive Advantages

• VSV vectors replicate transiently, producing rapid strong innate immune activation and early antibody responses. Recent nonhuman primate studies showed complete protection within 3 days after a single vaccination, which is exceptionally rapid for an Ebola vaccine platform.

• Proven viral platform built on the same rVSV technology as the licensed Ebola vaccine Ervebo, providing clinical and regulatory familiarity.

• Designed to provide rapid protection with a single intramuscular dose, simplifying use during outbreak response.

• May stimulate both early immune defenses and longer-lasting immune responses against BDBV.

• Ideal for ring vaccinations by supporting rapid immunization of contacts and contacts-of-contacts to help contain outbreaks.

• Includes the BDBV glycoprotein, which may direct the vaccine to immune cells like monocytes, macrophages, and dendritic cells involved in activating antiviral responses.

• Available for licensing as both the recombinant rVSV–BDBV vaccine and the DNA plasmid construct used to produce it.

Development Stage

• Pre-Clinical.

Inventors: Dr. Andrea Marzi and Dr. Heinrich (Heinz) Feldmann, all of NIAID.

Publications: O'Donnell KL, Haase JA, Henderson CW, et al. A single-dose Bundibugyo virus vaccine protects macaques within 3 days. bioRxiv. Published online June 15, 2026. doi:10.64898/2026.06.14.732188.

Intellectual Property: HHS Reference No. E–122–2026–0.

Licensing Contact: To license this technology, please contact Terrence Joyce at 301–761–7235, or *terrence.joyce@nih.gov,* and reference E–122–2026–0.

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 Terrence Joyce at 301–761–7235, or *terrence.joyce@nih.gov.*

Dated: July 21, 2026.

Surekha Vathyam,

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

[FR Doc. 2026–14966 Filed 7–23–26; 8:45 am]

BILLING CODE 41467–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government Owned Invention Available for License: Nucleophosmin 1 (NPM1) Mutation-Specific T Cell Receptors for Targeted Treatment of Acute Myeloid Leukemia (AML)

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The NCI seeks research co-development partners or licensees for NPM1 Mutation-Specific T Cell Receptors for Targeted Treatment of AML.

FOR FURTHER INFORMATION CONTACT: Inquiries related to this license opportunity should be directed to: Abritee Dhal, Ph.D., Technology Transfer Manager, NCI, Technology Transfer Center, Email: *abritee.dhal@nih.gov* or Phone: 240–276–6154.

SUPPLEMENTARY INFORMATION: AML is a rare form of blood cancer affecting myeloid stem and progenitor cells, associated with a poor prognosis and a 5-year survival rate of ~33%. Current treatments, including intensive chemotherapy and stem cell transplantation, are not suitable for all patients and can cause significant toxicities, including low blood cell counts, infection and graft-versus-host disease. Therefore, there is a need for safer and more effective treatments.

This specific invention concerns the isolation of two highly specific T cell receptors (TCRs), known as TCR6 and TCR7, recognizing a neoepitope, AVEEVSLRK. The neoepitope is derived from mutant NPM1 and presented in the context of HLA–A*11:01. Pre-clinical results for these TCRs revealed robust and specific cytotoxicity against a leukemia cell line and several patient-derived AML samples expressing the NPM1 mutation and HLA–A*11:01. Furthermore, they showed no cross-reactivity to normal peripheral blood mononuclear cells, structurally similar peptides or unrelated HLA alleles. These results suggest these novel TCRs represent a potential adoptive T cell therapy for the treatment of AML.

''This Notice is in accordance with 37 CFR 404.4 Authority to grant licenses.''

NIH Reference Number: E–200–2025–0.

Related Technologies: N/A.

Product Type: Therapeutic.

Therapeutic Area(s): Oncology.

Development Stage: Pre-clinical (*in vivo* validation).

Publications:

- Aidan Pursley, et al., T cell receptors targeting mutant NPM1 for adoptive cell therapy in acute myeloid leukemia, (*https://doi.org/10.1182/blood-2025-4132*).

Patens: U.S. Provisional Patent Application, 63/908,266, filed October, 30–2025.

Potential Commercial Applications:

- Acute myeloid leukemia patients expressing HLA–A*11:01.

Competitive Advantages:

- Highly specific targeting of mutant NPM1.
- Minimal off-target effects with enhanced safety profile.
- Significant unmet medical need for AML patients.

Collaboration Opportunity: Researchers at the NCI seek licensing and/or co-development research collaborations for NPM1 Mutation-Specific T Cell Receptors for Targeted Treatment of Acute Myeloid Leukemia.

Dated: July 21, 2026.

Richard U. Rodriguez,

Associate Director, Technology Transfer Center, National Cancer Institute.

[FR Doc. 2026–14981 Filed 7–23–26; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Center for Scientific Review; 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: Center for Scientific Review, Special Emphasis Panel; Career Development Applications in Neuroscience.

Date: August 19, 2026.

Time: 10:00 a.m. to 9:00 p.m.

Agenda: To review and evaluate grant applications.

Address: National Institutes of Health, Rockledge II, 6701 Rockledge Drive, Bethesda, MD 20892.

Meeting Format: Virtual Meeting.

Contact Person: Dorela Doris Shuboni-Mulligan, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Bethesda, MD 20892, (301) 480–1823, *dorela.shuboni-mulligan@nih.gov.*

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research, 93.306, 93.333, 93.337, 93.393–93.396, 93.837–93.844, 93.846–93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: July 21, 2026.

Rosalind M. Niamke,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2026–14964 Filed 7–23–26; 8:45 am]

BILLING CODE 4167–05–P

DEPARTMENT OF HOMELAND SECURITY

U.S. Citizenship and Immigration Services

[OMB Control Number 1615–0116]

Agency Information Collection Activities; Extension, Without Change, of a Currently Approved Collection: Request for Fee Waiver

AGENCY: U.S. Citizenship and Immigration Services, Department of Homeland Security.

ACTION: 30-Day notice.

SUMMARY: The Department of Homeland Security (DHS), U.S. Citizenship and Immigration Services (USCIS) will be submitting the following information collection request to the Office of Management and Budget (OMB) for review and clearance in accordance with the Paperwork Reduction Act of 1995. The purpose of this notice is to allow an additional 30 days for public comments.

DATES: Comments are encouraged and will be accepted until August 24, 2026.

ADDRESSES: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, must be submitted via the Federal eRulemaking Portal website at *http://www.regulations.gov* under e-Docket ID number USCIS–2010–0008. All submissions received must include the OMB Control Number 1615–0116 in the