

**Licensing Contact:** To license this technology, please contact Carol A. Salata at 240–627–3727; [csalata@niaid.nih.gov](mailto:csalata@niaid.nih.gov).

Dated: January 8, 2021.

**Surekha Vathyam,**

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

[FR Doc. 2021–01490 Filed 1–22–21; 8:45 am]

**BILLING CODE 4140–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Prospective Grant of an Exclusive Patent License: Development and Commercialization of Cell Therapies for Cancer

**AGENCY:** National Institutes of Health, HHS.

**ACTION:** Notice.

**SUMMARY:** The National Cancer Institute, an institute of the National Institutes of Health, Department of Health and Human Services, is contemplating the grant of an Exclusive Patent License to practice the inventions embodied in the Patents and Patent Applications listed in the Supplementary Information section of this Notice to Ziopharm Oncology, Inc. (“Ziopharm”), headquartered in Boston, MA.

**DATES:** Only written comments and/or applications for a license which are received by the National Cancer Institute’s Technology Transfer Center on or before February 9, 2021 will be considered.

**ADDRESSES:** Requests for copies of the patent applications, inquiries, and comments relating to the contemplated Exclusive Patent License should be directed to: Andrew Burke, Ph.D., Senior Technology Transfer Manager, NCI Technology Transfer Center, Telephone: (240) 276–5484; Email: [andy.burke@nih.gov](mailto:andy.burke@nih.gov).

#### SUPPLEMENTARY INFORMATION:

##### Intellectual Property

##### Group B

*E–173–2020: T Cell Receptors Recognizing R273C or Y220C Mutation in P53*

1. U.S. Provisional Patent Application 63/074,747, filed September 4, 2020 (E–173–2020–0–US–01).

The patent rights in these inventions have been assigned and/or exclusively licensed to the government of the United States of America.

The prospective exclusive license territory may be worldwide, and the fields of use may be limited to the following:

Fields of Use Applying to Intellectual Property Group B

“Development, manufacture and commercialization of autologous, peripheral blood T cell therapy products engineered by transposon-mediated gene transfer to express T cell receptors reactive to mutated P53, as claimed in the Licensed Patent Rights, for the treatment of human cancers. Specifically excluded from this field of use are CRISPR-engineered peripheral blood T cell therapy products for the treatment of human cancers.

Development, manufacture and commercialization of companion diagnostics approved or cleared by the FDA or equivalent foreign regulatory agency for Licensee-proprietary T cell therapy products.”

Intellectual Property Group B is primarily directed to isolated TCRs reactive to mutated tumor protein 53 (TP53 or P53), within the context of several HLAs. P53 is the archetypal tumor suppressor gene and the most frequently mutated gene in cancer. Contemporary estimates suggest that >50% of all tumors carry mutations in P53. Because of its prevalence in cancer and its restricted expression to precancerous and cancerous cells, this antigen may be targeted on mutant P53-expressing tumors with minimal normal tissue toxicity.

This Notice is made in accordance with 35 U.S.C. 209 and 37 CFR part 404. The prospective exclusive license will be royalty bearing, and the prospective exclusive license may be granted unless within fifteen (15) days from the date of this published Notice, the National Cancer Institute receives written evidence and argument that establishes that the grant of the license would not be consistent with the requirements of 35 U.S.C. 209 and 37 CFR part 404.

In response to this Notice, the public may file comments or objections. Comments and objections, other than those in the form of a license application, will not be treated confidentially and may be made publicly available.

License applications submitted in response to this Notice will be presumed to contain business confidential information and any release of information from these license applications will be made only as required and upon a request under the Freedom of Information Act, 5 U.S.C. 552.

Dated: January 14, 2021.

**Richard U. Rodriguez,**

*Associate Director, Technology Transfer Center, National Cancer Institute.*

[FR Doc. 2021–01487 Filed 1–22–21; 8:45 am]

**BILLING CODE 4140–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Prospective Grant of an Exclusive Patent License: Development and Commercialization of Certain Fusion Proteins and Their Use for the Treatment of Humans With Short Stature

**AGENCY:** National Institutes of Health, HHS.

**ACTION:** Notice.

**SUMMARY:** The *Eunice Kennedy Shriver* National Institute of Child Health and Human Development and the National Cancer Institute, both institutes of the National Institutes of Health, Department of Health and Human Services, are contemplating the grant of an Exclusive Patent License to practice the inventions embodied in the Patents and Patent Applications listed in the Supplementary Information section of this Notice to EpifiZa Inc. of Montreal, QC (Canada).

**DATES:** Only written comments and/or applications for a license which are received by the National Cancer Institute’s Technology Transfer Center on or before February 9, 2021 will be considered.

**ADDRESSES:** Requests for copies of the patent applications, inquiries, and comments relating to the contemplated Exclusive Patent License should be directed to: Richard T. Girards, Jr., Esq., MBA, Senior Technology Transfer Manager, National Institutes of Health, NCI Technology Transfer Center by email ([richard.girards@nih.gov](mailto:richard.girards@nih.gov)) or phone (240–276–6825).

#### SUPPLEMENTARY INFORMATION:

##### Intellectual Property

*E–003–2014: Agents That Specifically Bind Matrilin–3 and Their Use/Cartilage Targeting Agents and Their Use*

1. United States Provisional Patent Application No. 61/927,904, filed 15 January 2014 (HHS Reference No. E–003–2014–0–US–01);

2. United States Patent No. 10,323,083, issued 18 June 2019 (HHS Reference No. E–003–2014–0–US–06);

3. United States Patent Application No. 16/391,101, filed 22 April 2019