

FORM PTO-1619A

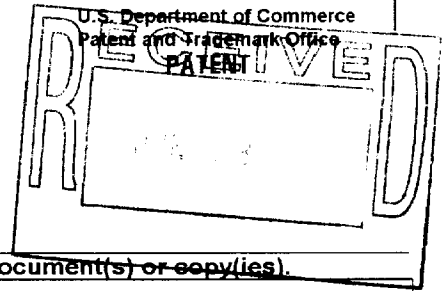
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TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

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- ☒ New
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**Conveyance Type**

- ☐ Assignment ☐ Security Agreement
- ☐ License ☐ Change of Name
- ☐ Merger ☒ Other  Confirmatory License
- U.S. Government**  
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- ☐ Departmental File ☒ Secret File

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- Name (line 2)
- Execution Date  
Month Day Year  
 3/10/99

**Second Party**

- Name (line 1)
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- Execution Date  
Month Day Year

**Receiving Party**

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- Name (line 1)  National Institutes of Health, The
- Name (line 2)  Extramural Inventions Office, The
- Address (line 1)  6701 Rockledge Drive, Room 3188
- Address (line 2)  MSC 7750
- Address (line 3)  Bethesda  Maryland / USA  20892-7750
- City State/Country Zip Code
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FORM PTO-1619B

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U.S. Department of Commerce  
Patent and Trademark Office  
**PATENT****Correspondent Name and Address**Area Code and Telephone Number Name Address (line 1) Address (line 2) Address (line 3) Address (line 4) **Pages**Enter the total number of pages of the attached conveyance document  
including any attachments.# **Application Number(s) or Patent Number(s)**☐ Mark if additional numbers attached

Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

Patent Application Number(s)

Patent Number(s)

If this document is being filed together with a new Patent Application, enter the date the patent application was  
signed by the first named executing inventor.

Month Day Year

**Patent Cooperation Treaty (PCT)**

Enter PCT application number

only if a U.S. Application Number  
has not been assigned.PCT  PCT  PCT PCT  PCT  PCT **Number of Properties**

Enter the total number of properties involved.

# **Fee Amount**

Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment:

Deposit Account

Enclosed ☐Deposit Account ☐

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number:

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Authorization to charge additional fees:

Yes ☐No ☒**Statement and Signature***To the best of my knowledge and belief, the foregoing information is true and correct and any  
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indicated herein.*

Belen Awetahegne

Name of Person Signing

Signature

6/22/99

Date

**LICENSE TO THE UNITED STATES GOVERNMENT**

**Invention Title:** Gene Encoding MNR2 and Uses Thereof

**Inventor:** Thomas Jessell

**Patent Application Serial No.:** 09/162,524

**Docket No.:** 57477

**U.S. Application Filing Date:** September 29, 1998

**Grant/Contract Identification No.:** 5T32GM07367

The invention identified above is a Subject Invention under 35 U.S.C. 200, et. seq., and the Standard Patent Rights clause at 37 CFR 401.14 or FAR 52.227-11, which are included among the terms of the above-identified grant/contract award from the National Institutes of Health. This document is confirmatory of:

1. The nonexclusive, nontransferable, irrevocable, paid-up license granted to the Federal Government in the invention described in the patent application and in any and all divisions, continuations, and continuations in part, and in any and all patents and re-issues granted thereon; and
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The Government is hereby granted an irrevocable power to inspect and make copies of the above-identified patent application.

Signed this 10 day of March, 1999

By Jack M. Granowitz  
Jack M. Granowitz - Executive Director, Columbia Innovation Enterprise

For The Trustees of Columbia University in the City of New York

At 363 Engineering Terrace, Columbia University, New York, NY 10027