

○ Should EPA expand the scope of the strategy to include sea-based sources?

○ Should specific types of plastic products be targeted for reduction or reuse in this strategy?

• Do you have any additional information or recommendations for EPA regarding these or other proposed actions in this draft strategy?

IV. Disclaimer and Important Note

This request for public comment is issued solely for information, research and planning purposes and does not constitute a Request for Proposals (RFP) or a Request for Applications (RFA). Responding to this notice will not give any advantage to or preclude any organization or individual in any subsequently issued solicitation, RFP, or RFA. Any future development activities related to this activity will be announced separately. This notice does not represent any award commitment on the part of the U.S. Government, nor does it obligate the Government to pay for costs incurred in the preparation and submission of any responses.

Dated: June 8, 2023.

Carolyn Hoskinson,

Director, Office of Resource Conservation and Recovery.

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FEDERAL RESERVE SYSTEM

Change in Bank Control Notices; Acquisitions of Shares of a Bank or Bank Holding Company

The notificants listed below have applied under the Change in Bank Control Act (Act) (12 U.S.C. 1817(j)) and § 225.41 of the Board's Regulation Y (12 CFR 225.41) to acquire shares of a bank or bank holding company. The factors that are considered in acting on the applications are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The public portions of the applications listed below, as well as other related filings required by the Board, if any, are available for immediate inspection at the Federal Reserve Bank(s) indicated below and at the offices of the Board of Governors. This information may also be obtained on an expedited basis, upon request, by contacting the appropriate Federal Reserve Bank and from the Board's Freedom of Information Office at <https://www.federalreserve.gov/foia/request.htm>. Interested persons may express their views in writing on the standards enumerated in paragraph 7 of the Act.

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Ann E. Misback, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington, DC 20551-0001, not later than June 29, 2023.

A. Federal Reserve Bank of Kansas City (Jeffrey Imgarten, Assistant Vice President) One Memorial Drive, Kansas City, Missouri. Comments can also be sent electronically to KCApplicationComments@kc.frb.org.

1. *Michael Taylor, Sundance, Wyoming*; to join the Richard Durfee Family Control Group, a group acting in concert, to retain voting shares of Sundance Bankshares, Inc., and thereby indirectly retain voting shares of Sundance State Bank, both of Sundance, Wyoming.

2. *Charles and Loretta Durfee Revocable Trust, Loretta Durfee and Charles Durfee, as co-trustees, all of Sundance, Wyoming; Gerald and Peggy Hyatt Living Trust, Gerald Hyatt and Peggy Hyatt, as co-trustees, all of Bar Nunn, Wyoming; Moline Revocable Trust, Brett R. Moline and Judy Moline, as co-trustees, all of Laramie, Wyoming; and Tranas Family Revocable Trust, Donald Tranas and Shirley Tranas, as co-trustees, all of Greybull, Wyoming*; to join the James R. Durfee Family Control Group, a group acting in concert, to retain voting shares of Sundance Bankshares, Inc., and thereby indirectly retain voting shares of Sundance State Bank, both of Sundance, Wyoming.

B. Federal Reserve Bank of St. Louis (Holly A. Rieser, Senior Manager) P.O. Box 442, St. Louis, Missouri 63166-2034. Comments can also be sent electronically to Comments.applications@stls.frb.org.

1. *Lambert Lynn Marshall, Little Rock, Arkansas*; to retain voting shares of MNB Bancshares, Inc., and thereby indirectly retain voting shares of The Malvern National Bank, both of Malvern, Arkansas.

C. Federal Reserve Bank of Chicago (Colette A. Fried, Assistant Vice President) 230 South LaSalle Street, Chicago, IL 60604. Comments can also be sent electronically to Comments.applications@chi.frb.org.

1. *Dairyland Bank Holding Corporation, and William Bosshard, Andrew Bosshard, Joseph Bosshard, Makenzie Bosshard, Carlista Bosshard, and John Bosshard as Tenants in Common, all of La Crosse, Wisconsin*; to join the Bosshard Family Control Group, a group acting in concert, to acquire voting shares of Bosshard Financial Group, Inc., La Crosse, Wisconsin, and thereby indirectly acquire voting shares

of One Community Bank, Oregon, Wisconsin, and Farmers State Bank-Hillsboro, Hillsboro, Wisconsin.

D. Federal Reserve Bank of San Francisco (Joseph Cuenco, Assistant Vice President) 101 Market Street, San Francisco, California. 94105-1579. Comments can also be sent electronically to: sf.fisc.comments.applications@sf.frb.org.

1. *BlackRock, Inc., New York, New York, on behalf of itself, its subsidiaries and affiliates, and the accounts, portfolios, registered and unregistered investment companies, collective investment vehicles, and other pooled investment vehicles that are sponsored, managed, or advised by BlackRock*; to acquire additional voting shares of Banner Corporation, and thereby indirectly acquire additional voting shares of Banner Bank, both of Walla Walla, Washington.

Board of Governors of the Federal Reserve System.

Michele Taylor Fennell,

Deputy Associate Secretary of the Board.

[FR Doc. 2023-12745 Filed 6-13-23; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Supplemental Evidence and Data Request on Evaluation of Dietary Protein Intake Requirements

AGENCY: Agency for Healthcare Research and Quality (AHRQ), HHS.

ACTION: Request for supplemental evidence and data submissions.

SUMMARY: The Agency for Healthcare Research and Quality (AHRQ) is seeking scientific information submissions from the public. Scientific information is being solicited to inform our review on *Evaluation of Dietary Protein Intake Requirements*, which is currently being conducted by the AHRQ's Evidence-based Practice Centers (EPC) Program. Access to published and unpublished pertinent scientific information will improve the quality of this review.

DATES: *Submission Deadline* on or before July 14, 2023.

ADDRESSES:

Email submissions: epc@ahrq.hhs.gov.

Print submissions:

Mailing Address: Center for Evidence and Practice Improvement, Agency for Healthcare Research and Quality,

ATTN: EPC SEADs Coordinator, 5600 Fishers Lane, Mail Stop 06E53A, Rockville, MD 20857.

Shipping Address (FedEx, UPS, etc.): Center for Evidence and Practice Improvement, Agency for Healthcare Research and Quality, ATTN: EPC SEADs Coordinator, 5600 Fishers Lane, Mail Stop 06E53A, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: Kelly Carper, Telephone: 301-427-1656 or Email: epc@ahrq.hhs.gov.

SUPPLEMENTARY INFORMATION: The Agency for Healthcare Research and Quality has commissioned the Evidence-based Practice Centers (EPC) Program to complete a review of the evidence for *Evaluation of Dietary Protein Intake Requirements*. AHRQ is conducting this systematic review pursuant to section 902 of the Public Health Service Act, 42 U.S.C. 299a.

The EPC Program is dedicated to identifying as many studies as possible that are relevant to the questions for each of its reviews. In order to do so, we are supplementing the usual manual and electronic database searches of the literature by requesting information from the public (e.g., details of studies conducted). We are looking for studies that report on Evaluation of Dietary Protein Intake Requirements, including those that describe adverse events. The entire research protocol is available online at: <https://>

effectivehealthcare.ahrq.gov/products/dietary-protein-intake/protocol.

This is to notify the public that the EPC Program would find the following information on Evaluation of Dietary Protein Intake Requirements helpful:

- A list of completed studies that your organization has sponsored for this indication. In the list, please *indicate whether results are available on ClinicalTrials.gov along with the ClinicalTrials.gov trial number.*

- *For completed studies that do not have results on ClinicalTrials.gov*, a summary, including the following elements: study number, study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, primary and secondary outcomes, baseline characteristics, number of patients screened/eligible/enrolled/lost to follow-up/withdrawn/analyzed, effectiveness/efficacy, and safety results.

- *A list of ongoing studies that your organization has sponsored for this indication.* In the list, please provide the *ClinicalTrials.gov* trial number or, if the trial is not registered, the protocol for the study including a study number, the study period, design, methodology, indication and diagnosis, proper use instructions, inclusion and exclusion criteria, and primary and secondary outcomes.

- Description of whether the above studies constitute *ALL Phase II and above clinical trials* sponsored by your organization for this indication and an

index outlining the relevant information in each submitted file.

Your contribution is very beneficial to the Program. Materials submitted must be publicly available or able to be made public. Materials that are considered confidential; marketing materials; study types not included in the review; or information on indications not included in the review cannot be used by the EPC Program. This is a voluntary request for information, and all costs for complying with this request must be borne by the submitter.

The draft of this review will be posted on AHRQ's EPC Program website and available for public comment for a period of 4 weeks. If you would like to be notified when the draft is posted, please sign up for the email list at: <https://www.effectivehealthcare.ahrq.gov/email-updates>.

The systematic review will answer the following questions. This information is provided as background. AHRQ is not requesting that the public provide answers to these questions.

Key Questions (KQ)

KQ 1: What is the average daily dietary protein intake requirements of apparently healthy individuals by life stage and sex?

KQ 2: What is the average daily dietary individual indispensable amino acid intake requirements of apparently healthy individuals by life stage and sex?

POPULATION, INTERVENTION, COMPARATOR, OUTCOME, TIMING, SETTING/STUDY DESIGN (PICOTS)

Element	Inclusion criteria	Exclusion criteria
Population KQ1 & 2	<ul style="list-style-type: none"> • Participants who are healthy and/or have chronic diseases or chronic disease risk factors, including those with obesity • Studies that enroll some participants diagnosed with a disease or hospitalized or in a long-term care facility with an illness or injury • Studies that enroll some participants diagnosed with a disease or with the health outcome of interest • Participants who are pregnant and lactating. • Age at intervention exposure: <ul style="list-style-type: none"> ○ Infants, children, adolescents (0–18 years). ○ Adults (19–64). ○ Older adults (65 years and older). 	<ul style="list-style-type: none"> • Studies that exclusively enroll participants diagnosed with a disease, hospitalized, or in a long-term care facility with an illness or injury (for this criterion, studies that exclusively enroll participants with obesity will not be excluded). • Studies that aim to treat participants who have already been diagnosed with the outcome of interest (except weight loss interventions in overweight or obese subjects). • Studies that exclusively enroll undernourished participants. • Studies that exclusively enroll participants with a baseline diet deficient in protein. • Studies that exclusively enroll preterm infants. • Studies that exclusively enroll post-bariatric surgery subjects. • Studies that exclusively recruit elite athletes. • Participants with existing conditions that clearly are known to alter nutrient metabolism or requirements, or those being treated with medications that alter nutrient metabolism.
Interventions KQ1 & 2	<ul style="list-style-type: none"> • Total daily protein intake level • Total daily intake of indispensable AAs (Histidine, Isoleucine, Leucine, Lysine, Methionine, Phenylalanine, Threonine, Tryptophan, Valine) 	<ul style="list-style-type: none"> • Studies that only assess protein intake via infusions (rather than the GI tract). • Studies that examine food products or dietary supplements not widely available to U.S. consumers.

POPULATION, INTERVENTION, COMPARATOR, OUTCOME, TIMING, SETTING/STUDY DESIGN (PICOTS)—Continued

Element	Inclusion criteria	Exclusion criteria
Comparison KQ1 & 2	<ul style="list-style-type: none"> • Different total daily protein intake level • Different total daily intake of indispensable AAs 	<ul style="list-style-type: none"> • Multi-component interventions that do not isolate the effect or association of protein (including protein and exercise combinations). • No comparator.
Outcomes KQ1	<p>Total protein requirement* as defined by the following indicators or criterion of adequacy, including but not limited to:</p> <ul style="list-style-type: none"> • Nitrogen balance method • Factorial method • Indicator AA oxidation method • Mean protein intake of infants fed principally human milk (0–6 months) • Mean protein content of human milk (0–6 months) • Body composition (lean mass) • Linear growth for infants, children, adolescents (0–18 years) • Activities of daily living for older adults (65 years and older) 	<ul style="list-style-type: none"> • International and government reports. • Narrative reviews. • Systematic reviews, meta-analyses, umbrella reviews, scoping reviews. • Uncontrolled trials. • Case-control studies. • Uncontrolled before-and-after studies. • Retrospective cohort studies. • N < 6 participants and without power for crossover studies. • Other studies with N < 50 participants (for RCTs—25 participants analyzed per study arm), and without power calculations. • Articles that have not been peer reviewed and are not published in peer-reviewed journals (e.g., unpublished data, manuscripts, pre-prints, reports, abstracts, conference proceedings).
Outcomes KQ2	<p>Indispensable AA requirement* as defined by the following indicators of adequacy, including but not limited to:</p> <ul style="list-style-type: none"> • Plasma AA response method • Direct AA oxidation method • 24-hour AA balance method • Indicator AA oxidation method • Mean AA intake of infants fed principally human milk (0–6 months) • Mean protein content of human milk (0–6 months) 	
Timing KQ1 & 2	<ul style="list-style-type: none"> • All duration and follow up 	
Setting KQ1 & 2	<ul style="list-style-type: none"> • All settings 	
Study Design KQ1 & 2	<ul style="list-style-type: none"> • Randomized controlled trials • Non-randomized controlled trials, including quasi-experimental and controlled before-and-after studies • Prospective cohort studies • Nested case-control studies 	
Study Size KQ1 & 2		
Language KQ1 & 2	<ul style="list-style-type: none"> • English only (due to resource limitations) 	
Geographic Location KQ1 & 2.	<ul style="list-style-type: none"> • Locations with food products or dietary supplements widely available to U.S. consumers, including those rated very high on the Human Development Index 	
Publication Date KQ1 & 2	<ul style="list-style-type: none"> • 2000 to present 	
Publication Status KQ1 & 2	<ul style="list-style-type: none"> • Articles published in peer-reviewed journals 	

* Requirement is defined as the lowest daily intake value for a nutrient that will meet the need as defined by a specified indicator or criterion of adequacy, of apparently healthy individuals.

Dated: June 8, 2023.

Marquita Cullom,

Associate Director.

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