

motivation to participation in studies involving healthy volunteers. In this current study, however, financial compensation did not appear to be the primary motivation for participation. The participants' at all 3 sites stated that the main reason for their participation was the increased knowledge about their disease and the contribution to science. Negative experiences cited were primarily discomfort with blood draw, transportation, and parking logistics. Most importantly, a majority of the participants stated they would participate in future studies and would recommend a family member or a friend for a clinical study. In our sample, there was no difference in the favorable ratings as determined by race/ethnicity. In conclusion, the findings of this study inform the community with regard to how the research participants rate their experiences, and thus motivate others to participate in clinical research. Reasons for participants to withdraw from trials may be associated to their dissatisfaction with a trial or with the study staff. Thus, the degree of satisfaction with the research staff and the trial itself is crucial to reducing drop-out rates and increasing compliance with study procedures. Hence participant satisfaction is key to increasing participation in clinical trials, particularly among African Americans and other racial and ethnic minorities.

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Should all clinical research subjects pay the same?

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OBJECTIVES/SPECIFIC AIMS: Discuss ethical and policy issues that will impact clinical research. Raise awareness of the need to understand internal policies at home institutions. Encourage further examination of ways to facilitate clinical research participation. **METHODS/STUDY POPULATION:** Ethical and policy analysis. **RESULTS/ANTICIPATED RESULTS:** Ideally, clinical research participants should not be required to pay to participate in research. However, if we go with an equity model, as opposed to an equality model, policies should be changed to allow equal access to research participation. This is a matter of justice and also will enhance the quality of the science. **DISCUSSION/SIGNIFICANCE OF IMPACT:** Unless steps are taken to make participation in clinical research less burdensome financially for participants, research may slow or results may be biased, because only those who can pay will be able to participate.

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Beyond "REACH": The Research, Education, And Community Health (REACH) coalition as an exemplar for broad-based stakeholder engagement

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OBJECTIVES/SPECIFIC AIMS: The Institute for Transnational Sciences (ITS) has developed novel methods to ethically engage stakeholders across the transnational research spectrum, up to and including public health practice and policy. **METHODS/STUDY POPULATION:** In 2014, the ITS co-founded The Research, Education, And Community Health (REACH), the mission of which was to facilitate communication, collaborative research, and service activities between faculty and scientists and area community leaders. The intent was to identify and meet the needs of our communities without gaps and/or redundancies, thus better leveraging time, funding, and efforts. **RESULTS/ANTICIPATED RESULTS:** REACH now boasts 23 Centers, Departments, and Institutes, as well as 39 community organizations, including public and mental health agencies, clinicians, policy makers, family service centers, cultural and faith-based organizations, business, and local schools/colleges. We offer 3 methods for consideration as best practices: (1) a comprehensive community health needs assessment, (2) an "Offer and Ask" community/campus partnership mechanism, and (3) Community Science Workshops, based on the European Union's Science Shops. **DISCUSSION/SIGNIFICANCE OF IMPACT:** Results of REACH's work have been used to provide guidance for enhanced, data-driven programs and allocation of resources for local and statewide initiatives. The organization has evolved into an independent coalition seeking 501(c)3 status and is planning to expand its scope to 5 counties. REACH thus serves as model for successful replication across applicable CTSA hubs.

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Participatory development of a CTSA-wide Community Advisory Board: Enhancing community engagement at the Michigan Institute for Clinical & Health Research

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OBJECTIVES/SPECIFIC AIMS: To describe how Michigan Institute for Clinical & Health Research (MICHR) has engaged communities in its leadership and governance structure. This presentation will describe these practices, how they are being evaluated, and future plans for institute-wide engagement of communities in translational research. **METHODS/STUDY POPULATION:** Engaged partners from various communities across Michigan in various ways within MICHR's Community Engagement Program. **RESULTS/ANTICIPATED RESULTS:** MICHR has utilized participatory practices in the development of the CAB to strengthen existing relationships and build new ones with potential partners. **DISCUSSION/SIGNIFICANCE OF IMPACT:** MICHR-wide Community Advisory Board (CAB) will ensure community voices are heard and utilized in leadership and strategic decisions for CTSA activities.

MECHANISTIC BASIC TO CLINICAL

2014

Identification of novel shared tumor antigens for the development of T-cell-based immunotherapies

Sherille Bradley and Greg Lizee

OBJECTIVES/SPECIFIC AIMS: The specific objective of this proposal is to identify and validate targetable tumor-associated antigens (TAAs) in ovarian and pancreatic cancer. It is our central hypothesis that the accurate identification and selection of appropriate TAAs will provide a foundation on which to develop of novel and effective cancer immunotherapies. We have formulated this hypothesis on the basis of preliminary results in which we have used high-throughput tandem mass spectrometry (MS) to successfully identify TAAs from melanoma patient tumors. We have subsequently generated TAA-specific T-cells that showed specific recognition and killing of tumor cells, and will form the basis of an upcoming clinical trial for our melanoma patients. We now have extended this antigen identification pipeline into ovarian cancer to accomplish our objective of developing effective T-cell-based immunotherapies for ovarian cancer and pancreatic patients. **METHODS/STUDY POPULATION:** We have collected patient tumor specimens, and we performed HLA immunoprecipitation, peptide elution, and completed high-throughput tandem MS on these eluted samples to identify TAAs. In addition, we have validated the safety of potential targets through the use of the publicly available RNA sequence data sources GTEX and TCGA. **RESULTS/ANTICIPATED RESULTS:** To date, we have successfully completed over 60 peptide elutions from ovarian and pancreatic patients samples. In total, we have found several potential novel tumor-associated targets. VGLL1, is one of these identified antigens, and in conjunction with our collaborators, we have successfully generated T-cells against it. Additionally, we have found that VGLL1 is a potential novel TAA for 3 other cancer types, including bladder, gastric, and triple negative breast cancers. We are now focusing our efforts on testing these T-cells against additional ovarian cancer cell lines and these cancer types to determine their specificity. We plan to continue the generation and testing other identified potential TAAs as well. We plan to use these T-cells directly in clinical trials in the future. **DISCUSSION/SIGNIFICANCE OF IMPACT:** The rationale for this proposal is that through the identification and validation of TAAs, we can open the door to a new world of therapies that can potentially increase the survival rate in a disease with a historically grim prognosis.

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Deconstructing the peptide specificity of TCR recognition

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OBJECTIVES/SPECIFIC AIMS: The off-target and organ-specific toxicities observed in cancer immunotherapy present an obstacle to T-cell-based therapeutics. A recent clinical trial underscored the need for improved