Summer 2026 Request for Applications
Immune Profiling Insights Program

BACKGROUND

Parkinson's disease (PD) affects nearly 1 million people in the U.S. and over 8 million worldwide, and those numbers are expected to rise over the coming decades. PD is highly heterogeneous: individuals experience a wide array of motor and non-motor symptoms, many of which vary with disease severity and duration. Though our understanding of PD and its causes is improving, many questions remain.

Evidence suggests that the immune system is dysregulated in PD and that increased neuroinflammation may accelerate PD progression; however, the exact nature of relevant immune changes is still under investigation. The Michael J. Fox Foundation for Parkinson's Research (MJFF), in partnership with the Aligning Science Across Parkinson's (ASAP) initiative, funds research to better define, measure, and treat Parkinson's disease as well as critical tools and other resources to advance that research. In 2025, an Immune Consortium was established to identify robust immune signatures in PD and to identify existing resources that could be utilized for this purpose. As part of that effort, this Request for Applications (RFA) has been developed to address persisting immune knowledge gaps in PD by leveraging existing cohorts and immune assays. The Immune Profiling Insights Program will fund work to identify immune changes relevant to PD biology, heterogeneity or disease progression.

PROGRAM GOAL & PRIORITIES

The goal of the Immune Profiling Insights Program is to deepen our understanding of how specific components of the immune system contribute to Parkinson's disease (PD) risk, onset and progression. The program seeks to identify immune cell populations, signaling pathways and functional immune states that are altered across the PD continuum—from individuals at risk, through early disease, to advanced stages—and to determine how these immune features relate to clinical heterogeneity and disease trajectories.

By supporting hypothesis-driven research that leverages validated immunophenotyping approaches and functional immune assays, this program will enable systematic characterization

of innate and adaptive immune dysfunction in PD. Successful applications will apply these approaches to banked biosamples from well-characterized PD cohorts with rich clinical data, allowing investigators to link immune signatures to disease risk factors, progression rates and key clinical outcomes.

Ultimately, the Immune Profiling Insights Program aims to generate actionable insights into immune mechanisms that may drive PD pathogenesis, uncover biomarkers of disease risk and progression, and highlight immune pathways that could be targeted for therapeutic intervention or patient stratification in future clinical studies.

The Immune Profiling Insights Program **will prioritize** proposals that:

- **Generate mechanistic insights into immune dysfunction across the PD continuum** by applying validated immunophenotyping and functional immune assays to banked peripheral biosamples (PBMCs, CSF-derived cells, gastrointestinal immune cells as examples). Proposals should move beyond descriptive profiling to produce hypothesis-driven experimental data that clarify how specific immune cell populations, pathways or functional states may contribute to PD risk, onset or progression.
- **Leverage and strengthen collaborations that enable access to diverse, well-characterized PD cohorts**, including individuals with genetic PD, idiopathic PD and prodromal or at-risk participants. Priority will be given to studies that take advantage of existing clinical, genetic and longitudinal data to examine immune differences across disease subtypes and stages.
- **Integrate immune functional readouts with established and emerging PD biomarkers** or other existing immune data (e.g. TSPO imaging or secreted cytokines measured in fluids) to enhance biological and clinical interpretability. This includes correlating immune signatures with relevant molecular, pathological or clinical markers (e.g. alpha-synuclein seeding activity/SAA status, dopaminergic or other imaging modalities), with the goal of identifying immune features associated with disease heterogeneity, progression or patient stratification.

For this round, MJFF **will not consider** proposals focused on:

- Primary development of new immunophenotyping assays or platforms.
- Primary discovery-focused efforts (e.g. large-scale omics in cells or fluids not driven by an underlying hypothesis).
- Prospective sample collection.
- Generation of new data using imaging or digital endpoints.
- Sole assessment in post-mortem autopsy samples or iPSCs.
- Cytokine profiling in biofluids – MJFF is already funding large-scale efforts to profile cytokines in CSF and plasma at varying stages of PD. While data generation using multiplexed cytokine panels is out of scope for this program, we will consider hypothesis-driven proposals aiming to correlate cytokine levels from existing data with other functional immune readouts.
- Immune profiling in cohorts that do not contain participants with PD.

- Analysis of existing immune datasets – *Please note that although projects solely analyzing existing immune data are out of scope for this program, you may reach out to us at grants@michaeljfox.org to discuss future opportunities.*

FUNDING AVAILABLE

Duration: 6 to 24 months
Award Amount: Requested support should be commensurate with the work proposed. MJFF plans to commit $3M in total to this program.

Budgets should include direct and indirect costs. For academic and for-profit institutions, no more than 15% or 10%, respectively, may go to indirect costs. Additional details about MJFF's indirect cost policy can be found in the Application Guidelines and FAQ.

DEADLINES & REVIEW SCHEDULE

- Full Proposals Due: May 15, 2026, 5 p.m. US ET
- Anticipated Award Announcement: Week of September 7, 2026
- Anticipated Funding: September 2026

Applicants are encouraged to apply early to allow adequate time to correct errors found during the submission process.

ELIGIBILITY REQUIREMENTS

Applications may be submitted by researchers or clinicians in:

- U.S. and non-U.S. biotechnology/pharmaceutical companies, or other publicly or privately held for-profit entities; and

- U.S. and non-U.S. public and private non-profit entities, such as universities, colleges, hospitals, laboratories, units of state and local governments and eligible agencies of the federal government.

Post-doctoral fellows are ineligible to apply as Principal Investigators for this program.

BIOSAMPLE ACCESS

For this program, applicants are expected to leverage existing biospecimen resources. Therefore, investigators must establish any necessary collaborations to enable access to existing tissue and biosamples prior to submission. As part of that process, MJFF has identified several biobanks open to collaboration that investigators without existing partnerships can reach out to, as outlined in the table below (see page 6-7). Please note that investigators are not limited to the cohorts provided, and that applicants are responsible for establishing their own collaborations with a biobank prior to submission. A letter of support from the chosen biobank is a required component of the application. This letter should be uploaded under the 'Full Proposal Other Attachments' section of the grant portal application.

DIVERSITY, EQUITY AND INCLUSION (DEI)

In pursuit of our mission to accelerate the development of better treatments and a cure for Parkinson's disease, MJFF aims to support a rigorous research agenda reflecting a wide and diverse range of perspectives on Parkinson's disease and carried out in diverse populations. Diversity may refer to characteristics including, but not limited to, race, religion, ethnicity, sex, gender identity, sexual orientation, socioeconomic circumstance, nationality, geographic background, ability and disability, political ideology and age. Parkinson's is a complex problem; the more angles from which we attack, the greater the chances of finding innovative scientific solutions to benefit everyone living with the disease. As such:

- The Foundation encourages applications from diverse investigators representing groups historically underrepresented in the research enterprise.
- Because research shows that diverse teams outperform homogeneous ones, we urge applicants to share information about the composition of the team that will carry out the funded work.

- Proposed work should seek wherever possible to include relevant diversity within their chosen cohort(s), such as inclusion of sex/gender or genetic background.

ADDITIONAL INFORMATION

The Application Guidelines provide general guidance on applying for funding from MJFF, though the RFA always supersedes information contained in the Application Guidelines.

MJFF has an Open Science Policy which governs research outputs (such as preprints, journal articles, data, code, and software) resulting from MJFF-funded work. This policy includes specific rules, timing, and format for the return of those research outputs and requires them to be shared openly, to be free to access, and with persistent identifiers.

Grantees are required to provide proof of compliance with this policy (i.e., providing a link to the data in an open repository no later than submission of the first journal manuscript based on the data), and future funding will be contingent upon adherence. Please refer to the link above for more detailed information or contact openscience@michaeljfox.org.

MJFF requires that the Principal Investigator be the primary applicant (i.e., the person who initiates and takes primary responsibility for the application). All application-related correspondence will be sent to the Principal Investigator.

For questions about the application process or project suitability for this call for applications, please email grants@michaeljfox.org.

Thank you for your interest in collaborating with MJFF and your commitment to the Parkinson's community.

Cohort	Contact	Email	Participants				Sample types	Other available data (not an exhaustive list)	PBMC storage conditions	PBMC storage density
			PD	*Controls*	*At-risk*	*Others*				
Profiling of Parkinson's (ProPARK)*	Wilma D.J. van der Berg, PhD	propark@amsterdamumc.nl	723 [a,b,c]	142 [d,e,f]	-	-	PBMC, plasma, serum, CSF, skin biopsy	Demographics, Co-morbidities, Medication, Motor & non-motor clinical scales, MRI, CSF synuclein SAA	-80°C	5M cells/vial
Instituto de Biomedicina de Sevilla (IBiS)	Pablo Mir, MD	pmir@us.es	>400 [a,b,c]	>500 [d,e,f]	>50 [g,h]	>100 [i]	PBMC, fibroblasts, plasma, serum, CSF, skin biopsy	Demographics, Co-morbidities, Medication, Motor & non-motor clinical scales, MRI, DaTscan, Genetic & transcriptomic data	Liquid nitrogen	5M cells/vial
NeuroGenomics and Informatics Center at Washington University*	Carlos Cruchaga, PhD	cruchagac@wustl.edu	350 [a,b,c]	>500 [f]	-	>500 [j]	PBMC, CSF cell pellet, plasma, CSF, brain tissue	Demographics, Co-morbidities, Medication, Motor & non-motor clinical scales, PET imaging, Multi-omics	Liquid nitrogen	5M cells/vial
Canadian Open Parkinson Network (C-OPN)	Anna Bendas, M.Sc.	anna.bendas@hec.ca	2106 [a,b,c]	295 [d,e,f]	-	134 [i]	PBMC, iPSC, plasma, serum	Demographics, Co-morbidities, Medication, Motor & cognitive clinical scales, Epidemiology, MRI, Genetic data	Liquid nitrogen	10M cells/vial
Genetic PD PBMC Cohort	Roy Alcalay, MD, M.Sc. & Julian Agin-Liebes, MD	royal@tlvmc.gov.il ja3075@cumc.columbia.edu	99 [a,c]	67 [d,e,f]	72 [g]	-	PBMC	Demographics, Co-morbidities, Medication, Motor & cognitive clinical scales, Epidemiology	Liquid nitrogen	8-10M cells/vial

[a] Idiopathic PD
[b] Young onset PD
[c] Genetic PD
[d] Blood relative to PD
[e] Care partner to PD
[f] Unrelated neurologically healthy controls
[g] Genetic non-manifesting carriers
[h] Hyposmia or REM sleep behavior disorder
[i] Atypical parkinsonism
[j] Alzheimer's disease
* Some longitudinal sampling available