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COMMITTEE ON OVERSIGHT AND ACCOUNTABILITY,
SELECT SUBCOMMITTEE ON THE CORONAVIRUS PANDEMIC,
U.S. HOUSE OF REPRESENTATIVES,
WASHINGTON, D.C.

INTERVIEW OF: EMILY ERBELDING

Tuesday, November 28, 2023

Washington, D.C.

The interview in the above matter was held in room 5480, O'Neill House Office Building, commencing at 10:00 a.m.

1 Appearances:

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4

5 For the SELECT SUBCOMMITTEE ON THE CORONAVIRUS PANDEMIC:

6

7 MITCH BENZINE, STAFF DIRECTOR.

8 ERIC OSTERHUES, CHIEF COUNSEL

9 PETER SPECTRE, PROFESSIONAL STAFF MEMBER

10 [REDACTED], MINORITY STAFF DIRECTOR

11 [REDACTED], MINORITY COUNSEL

12 [REDACTED], MINORITY SENIOR COUNSEL

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14

15 For the COMMITTEE ON ENERGY AND COMMERCE,

16 SUBCOMMITTEE ON OVERSIGHT AND INVESTIGATIONS:

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18 ALAN SLOBODIN, SENIOR INVESTIGATIVE COUNSEL

19 JOHN STROM, COUNSEL

20 [REDACTED], MINORITY CHIEF COUNSEL

21 [REDACTED], MINORITY OVERSIGHT COUNSEL

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25

1 For the U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES:

2

3 DARIA BERSTELL, LEGISLATIVE ANALYST FOR

4 OFFICE OF

5 THE ASSISTANT SECRETARY FOR LEGISLATION

6 MARTA COOK, SENIOR ADVISOR FOR OVERSIGHT,

7 NATIONAL INSTITUTES OF HEALTH

8 TARA GANAPATHY, SENIOR COUNSEL,

9 OFFICE OF THE GENERAL COUNSEL

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1 Mr. Benzine. This is a transcribed interview of Dr. Emily Erbelding conducted by
2 the House Select Subcommittee on the Coronavirus Pandemic, the Committee on
3 Oversight and Accountability, and the Committee on Energy and Commerce under the
4 authority granted to them by House Resolution 5, House Rule X, and the rules of the
5 Committee on Oversight and Accountability and Committee on Energy and Commerce.

6 This interview was requested by Chairman Brad Wenstrup, Chairman James
7 Comer, Chair Cathy McMorris Rodgers, Chairman Morgan Griffith, and Chairman Brett
8 Guthrie as part of the committee's oversight of the Federal Government's response to the
9 coronavirus pandemic.

10 Further, pursuant to House Resolution 5, the select subcommittee has
11 wide-ranging jurisdiction, but specifically to investigate the origins of the coronavirus
12 pandemic, including but not limited to the Federal Government's funding of
13 gain-of-function research.

14 Pursuant to House Rule X, the Committee on Oversight and Accountability has
15 jurisdiction to investigate any matter at any time.

16 And, pursuant to House Rule X and XI, the Committee on Energy and Commerce
17 has jurisdiction for public health service agencies, including the National Institutes of
18 Health and the entities it funds, as well as Federal biomedical research and development.

19 Can the witness please state her name and spell her last name for the record?

20 Dr. Erbelding. My name is Emily Erbelding, E-r-b-e-l-d-i-n-g.

21 Mr. Benzine. Thank you, Dr. Erbelding.

22 My name is Mitch Benzine, and I am the staff director for the majority staff of the
23 select subcommittee. I want to thank you for coming in today for this interview. We
24 recognize that you're here voluntarily and we appreciate that.

25 Under the select subcommittee and Committee on Oversight and Accountability's

1 rules, you are allowed to have an attorney present to advise you during this interview.

2 Do you have an attorney representing you in a personal capacity with you today?

3 Dr. Erbelding. I don't have a personal attorney here.

4 Mr. Benzine. Is there an attorney present representing your employer with you
5 today?

6 Dr. Erbelding. Yes.

7 Mr. Benzine. Will counsel please identify themselves?

8 Ms. Ganapathy. Sure. Tara Ganapathy, senior counsel, HHS.

9 Mr. Benzine. For the record, starting with the remainder of the majority staff,
10 can the additional staff members please introduce themselves with their name, title, and
11 affiliation?

12 Mr. Strom. John Strom, senior counsel, House Energy and Commerce
13 Committee, majority, Oversight and Investigations Subcommittee.

14 Mr. Osterhues. Eric Osterhues, chief counsel, Select Subcommittee on the
15 Coronavirus Pandemic.

16 Mr. Spectre. Peter Spectre, professional staff member, select subcommittee,
17 majority.

18 Mr. Slobodin. Alan Slobodin, chief investigative counsel, House Energy and
19 Commerce Committee, majority staff.

20 [REDACTED] [REDACTED] Democratic staff director of the select
21 subcommittee.

22 [REDACTED] [REDACTED], Democratic counsel, select subcommittee.

23 [REDACTED] [REDACTED] senior counsel, Democratic staff, select subcommittee.

24 [REDACTED] [REDACTED], chief counsel, Energy and Commerce, minority.

25 [REDACTED] [REDACTED], counsel, Energy and Commerce, minority.

1 Ms. Cook. Marta Cook, senior advisor for oversight, NIH.

2 Ms. Berstell. Daria Berstell, legislative analyst for ASL at HHS.

3 Mr. Benzine. Thank you all.

4 Before we begin, I'd like to go over the ground rules for this interview. The way
5 the interview will proceed is as follows.

6 The majority and minority staff will alternate asking you questions, one hour per
7 side per round, until each side is finished with their questioning. The majority staff will
8 begin and proceed for an hour. Then the minority staff will have an hour to ask
9 questions. We will then alternate back and forth in this manner until both sides have no
10 more questions.

11 If either side is in the middle of a specific line of questions, they may choose to
12 end a few minutes past an hour to ensure completion of that specific line of questioning,
13 including any pertinent follow-ups.

14 In this interview, while one member of the staff for each side may lead the
15 questioning, additional staff may ask questions.

16 There is a court reporter taking down everything I say and everything you say to
17 make a written record of the interview. For the record to be clear, please wait until the
18 staff who are questioning you finishes each question before you begin your answer, and
19 the staffer will wait until you finish your response before proceeding to the next question.

20 Further, to ensure the court reporter can properly record this interview, please
21 speak clearly, concisely, and slowly. As the court reporter cannot record nonverbal
22 answers, such as nodding or shaking your head, it is important that you answer each
23 question with an audible, verbal answer.

24 Exhibits may be entered into the record. Majority exhibits will be identified
25 numerically. Minority exhibits will be identified alphabetically.

1 Do you understand?

2 Dr. Erbelding. Yes.

3 Mr. Benzine. We want you to answer our questions in the most complete and
4 truthful manner possible, so we will take our time. If you have any questions or do not
5 fully understand the question, please let us know. We will attempt to clarify, add
6 context to, or rephrase our questions.

7 Do you understand?

8 Dr. Erbelding. Yes.

9 Mr. Benzine. If we ask about specific conversations or events in the past and you
10 are unable to recall the exact words or details, you should testify to the substance of
11 those conversations or events to the best of your recollection. If you recall only a part
12 of a conversation or event, you should give us your best recollection of those events or
13 parts of conversations that you do recall.

14 Do you understand?

15 Dr. Erbelding. Yes.

16 Mr. Benzine. Although you are here voluntarily and we will not swear you in,
17 you are required, pursuant to Title 18, section 1001 of the United States Code, to answer
18 questions from Congress truthfully. This also applies to questions posed by
19 congressional staff in this interview.

20 Do you understand?

21 Dr. Erbelding. Yes.

22 Mr. Benzine. If at any time you knowingly make false statements, you could be
23 subject to criminal prosecution.

24 Do you understand?

25 Dr. Erbelding. Yes.

1 Mr. Benzine. Is there any reason you're unable to provide truthful testimony
2 today?

3 Dr. Erbelding. I don't believe so, no.

4 Mr. Benzine. The select subcommittee follows the rules of the Committee on
5 Oversight and Accountability. Please note that, if you wish to assert a privilege over any
6 statement today, that assertion must comply with the rules of the Committee on
7 Oversight and Accountability.

8 Pursuant to that, committee rule 16(c)(1) states: "For the Chair to consider
9 assertions of privilege over testimony or statements, witnesses or entities must clearly
10 state the specific privilege being asserted and the reason for the assertion on or before
11 the scheduled date of testimony or appearance."

12 Do you understand?

13 Dr. Erbelding. Yes.

14 Mr. Benzine. Ordinarily we take a 5-minute break at the end of each hour of
15 questioning, but if you need a longer break or a break before that, please let us know,
16 and we are happy to accommodate. However, to the extent that there is a pending
17 question, we would ask that you finish answering the question before we take the break.

18 Do you understand?

19 Dr. Erbelding. Yes.

20 Mr. Benzine. Do you have any other questions before we begin?

21 Dr. Erbelding. Are these microphones?

22 Mr. Benzine. Yes.

23 Dr. Erbelding. Okay.

24 Mr. Benzine. They go into --

25 Dr. Erbelding. Uh-huh.

EXAMINATION

1

2

BY MR. BENZINE:

3

Q I want to start by discussing your education and experience really briefly.

4

Where did you attend undergraduate school, and what degree did you graduate

5

with?

6

A Cornell University, bachelor of arts.

7

Q In a specific concentration?

8

A Biologic sciences.

9

Q Have you received any advanced degrees? If so, from where, and in what?

10

A Yes. Cornell University, master of science, and Indiana University, doctor of

11

medicine, and Johns Hopkins University, master of public health.

12

Q Thank you.

13

Who is your current employer and your current job title?

14

A I'm employed by National Institutes of Health at the National Institute of

15

Allergy and Infectious Diseases. My title is director of the Division of Microbiology and

16

Infectious Diseases.

17

Q Very briefly, can you run through your career prior to this position?

18

A Yes. So starting with medical school? Is that -- I graduated from medical

19

school. I did an internal medicine residency. And then I was chief medical resident for

20

1 year. Then I did an infectious disease fellowship. That was 3 years. During the

21

3 years was when I got my master of public health.

22

I joined the faculty in the Division of Infectious Diseases at Johns Hopkins

23

University School of Medicine, and I worked there as an infectious disease physician for

24

about 14 -- 14 or 15 years.

25

I then took a job at National Institute of Allergy and Infectious Diseases as deputy

1 director of the Division of AIDS at NIAID. And, in 2016, I applied for my current job,
2 director of the Division of Microbiology and Infectious Diseases. And I assumed that
3 role officially in January of 2017, and I've worked in that role since then.

4 Q When did you join NIAID?

5 Ms. Ganapathy. You mean what year?

6 Mr. Benzine. Yeah.

7 Dr. Erbelding. 2010.

8 BY MR. BENZINE:

9 Q Thank you.

10 Do you currently hold any honorary positions on boards of companies or academic
11 positions?

12 A No academic positions, no.

13 As part of my official duties, I'm on the Scientific Advisory Board for the Advanced
14 Course in Vaccinology. I think that's what comes to mind. That's what I can think of
15 right now.

16 Q Okay. Can you, again briefly, elaborate more on kind of what the standard
17 day-to-day or what your duties are as director, understanding there is probably not a
18 standard day to day, but as close as you can get?

19 A Yeah. So we fund extramural research programs in all human pathogens
20 except for HIV/AIDS. That is in a different division.

21 So we have initiatives for new funding. Depending upon congressional
22 appropriations, we will fund -- we plan for the future what types of solicitations we would
23 issue for investigators to apply for.

24 For solicitations that have already come out and have been reviewed, we'd look at
25 what the reviewer said about specific applications, and we make a decision based upon

1 appropriated funds and their availability to make awards to those grantees that have the
2 most merit in the competitive review process.

3 Day to day, I go to meetings. I answer emails. Various --

4 Q Are you involved in any of the grant review processes within your division?

5 A So at NIH grants are reviewed by panels of peer reviewers, and we don't
6 participate in those reviews. Staff listen in to the reviews, but they don't have opinions
7 or they don't score applications.

8 Q Are you the final funding decision? Who makes the funding decision?

9 A I have influence over what ultimately gets funded. But the scores on peer
10 reviews -- the peer review scores are probably the heaviest influence on what drives our
11 funding decisions. And then there is additional criteria. There is many factors.

12 Q Can you explain what your influence is on the funding decisions?

13 A So, for example, if there was a request for applications and 20 applications
14 came in and the special emphasis panel, the peer review group that looked at them and
15 scored them discussed ten of them -- that would be typical; they would maybe triage out
16 another ten -- we would look at the order of scores, look at how much money was
17 available, look to see whether there were comments on the budget being appropriate by
18 the reviewers, and we would probably consider funding all the ones that the amount of
19 funding could support if their particular -- and make a budget adjustment so that it could
20 go to fund the most applications that we planned for.

21 If there happened to be something unusual about -- one reviewer seemed biased
22 or there was a tie score and the tie -- there is not enough funds available to fund down to
23 the tied set of applications, we would maybe make a budgetary adjustment or see if the
24 investigators would cut out a specific aim. And those sorts of conversations that
25 would -- will ultimately lead to a funding plan.

1 Q Do you fund -- is there like a floor funding score, that you have to get a five
2 out of ten in order to get funded, or --

3 A Yeah. Generally, we -- I mean, there is a cutoff that generally NIAID doesn't
4 fund. I mean, it's actually the lowest scores are actually the best. So above a certain
5 score.

6 Q Okay.

7 A I mean, it's weird.

8 But, yeah, generally you'd have to come up with a special reason to fund
9 something above a certain score.

10 Q I guess I'm trying to understand, like --

11 A A special -- and that special reason would have to go through approval by
12 our principal deputy, Dr. Auchincloss. That would be the SOP.

13 Q Are there any kind of, like, policies or procedures written down on how
14 you're making the balancing test when, say, you have a limited amount of funds, you have
15 so many grants? If they're unwilling to adjust their budget, how do you pick which ones
16 that you're going to --

17 A We would probably go in score order.

18 Q Okay. That's helpful.

19 Back to --

20 A And maybe I would just add, for contracts, sometimes the review panel just
21 says unacceptable or unsatisfactory, and then we don't fund it.

22 Q So you wouldn't generally say, like, this is a -- does the score take into
23 account this is a major university versus a minor university, that kind of thing?

24 A The review should have taken into consideration the capability of the team,
25 and their environment might factor in: They describe that in their application, their

1 team's capability. So a large institution may or may not be more capable.

2 Q Thank you. That's kind of what I was getting at.

3 Is the scoring process anonymous?

4 A The applicants know who was on the panel, but they don't know the
5 individual reviewers for their applications.

6 Q Do the reviewers know who the applicants are?

7 A Yes.

8 Q Okay. So it would say --

9 A Well, they know their names. I don't -- if they personally knew them or had
10 a personal relationship.

11 Q No. So the application would say: This is an application from the
12 University of North Carolina --

13 A Yes.

14 Q -- to do --

15 A Yes.

16 Q -- X, Y, and Z. Okay.

17 A Yes.

18 Q Do you -- going back to some other standard -- do you currently hold a
19 security clearance?

20 A Yes.

21 Q At what level?

22 A Top secret.

23 Q Not SCI?

24 A Correct.

25 Q Okay. How long have you held the security clearance?

1 A I think since 2017.

2 Q Okay. So when you got the director job?

3 A Correct.

4 Q And then in -- just trying to flesh out more experience -- in 2021, you
5 received a Presidential commendation for your work on Operation Warp Speed.

6 Can you explain your work on that project?

7 A I was on the vaccine -- well, I had a number of roles and responsibilities. I
8 was on the vaccine --

9 Ms. Ganapathy. I'm just going to jump in.

10 So, Mitch, that's a little outside the scope of what we agreed to. We're happy to
11 let you explore it as an accommodation. But are you going to have a lot of questions
12 about that --

13 Mr. Benzine. No, no.

14 Ms. Ganapathy. -- because that's -- okay. All right.

15 Mr. Benzine. Like one more.

16 Ms. Ganapathy. Okay. Yeah. That's fine. Okay.

17 Dr. Erbelding. I was on the vaccine development team. So meetings, looking
18 at, listening to the companies' proposals for their vaccines and how they were making
19 progress with the awards that were made through -- largely through BARDA.

20 And I was also responsible for special populations, which was pediatrics and
21 pregnant women, to generate vaccine clinical trial data or clinical studies related to
22 getting, in the case of the pediatrics, authorized vaccines for them.

23 BY MR. BENZINE:

24 Q And just generally based off your experience -- I don't want to get into the
25 details of Operation Warp Speed right now -- but you had given an interview where, I

1 think, Dr. Fauci said the goal is 18 months to get a vaccine from development to approval.

2 And you said, "Eighteen months would be about as fast as I think we could go.

3 That accelerated pace would involve not looking at all the data."

4 Do you recall giving that comment?

5 A I don't recall that.

6 Q Okay. Would there be data that you would have --

7 Ms. Ganapathy. So, Mitch, this is way outside the scope of COVID origins, and
8 you're asking -- you said two more questions, and that's now three.

9 Mr. Benzine. All right.

10 Ms. Ganapathy. So could you maybe return to the subject at hand?

11 Mr. Benzine. Yeah.

12 I want to go through a list of people and ask if you communicated with them in
13 any way regarding COVID-19, EcoHealth Alliance, or the Wuhan Institute of Virology from
14 December 1st, 2019, until present.

15 Dr. Erbelding. December 1st, 2018, to the present.

16 Ms. Ganapathy. Yeah. I mean, if you know. To the extent you remember.

17 Dr. Erbelding. Okay.

18 Mr. Benzine. As much as you can remember, and we'll try to flesh it out if there
19 is a yes answer.

20 Dr. Francis Collins?

21 Ms. Ganapathy. So also just to clarify, this is conversations regarding the Wuhan
22 Institute of Virology? Is that what you said?

23 Mr. Benzine. Or EcoHealth.

24 Ms. Ganapathy. Or EcoHealth.

25 Mr. Benzine. Yeah.

1 Ms. Ganapathy. Okay.

2 Dr. Erbelding. I don't recall specific conversations with Dr. Collins.

3 BY MR. BENZINE:

4 Q Any group conversations, any Zoom meetings that Dr. Collins was on?

5 A I don't recall.

6 Q Okay. Dr. Anthony Fauci?

7 A Yes.

8 Q Dr. Lawrence Tabak?

9 A I don't recall.

10 Q Dr. Hugh Auchincloss?

11 A Yes.

12 Q Dr. Cliff Lane?

13 A I don't believe so. I believe not.

14 Q Dr. David Morens?

15 A No.

16 Q Dr. Ping Chen?

17 A Yes.

18 Q Dr. Ian Watson?

19 A Ian Watson? No.

20 Q I'll take that as a no.

21 Dr. Andrew Pope?

22 A Andrew Pope? No.

23 Q All right. Dr. Victor Dzau?

24 A Victor Dzau? Victor Dzau? No.

25 Q Dr. Robert Redfield?

- 1 A No.
- 2 Q Dr. Michael Lauer?
- 3 A Yes.
- 4 Q Dr. David Christian Hassell?
- 5 A David Christian Hassell. Otherwise known as Christian Hassell?
- 6 Q Yeah.
- 7 A No.
- 8 Q We can roll through these next ones probably pretty quick.
- 9 Dr. Jeremy Farrar?
- 10 A No.
- 11 Q Dr. Kristian Andersen?
- 12 A No.
- 13 Q Dr. Michael Farzan?
- 14 A No.
- 15 Q Dr. Eddie Holmes?
- 16 A No.
- 17 Q Dr. Ian Lipkin?
- 18 A No. Maybe just -- can we back up to Kristian Andersen?
- 19 Q Yeah.
- 20 A He is a grantee of our division, but I don't recall specific conversations with
- 21 him. I said a flat-out no, but I would --
- 22 Q But you would have had conversations -- your kind of standard or typical
- 23 conversations --
- 24 A Yeah.
- 25 Q -- with a grantee, but not about --

- 1 A Not about Wuhan activity specifically, no.
- 2 Q Okay. Thank you.
- 3 Dr. Lipkin?
- 4 A No.
- 5 Q Dr. Andrew Rambaut?
- 6 A No.
- 7 Q Dr. Christian Drosten?
- 8 A No.
- 9 Q Dr. Ron Fouchier?
- 10 A No.
- 11 Q Dr. Marion Koopmans?
- 12 A No.
- 13 Q Dr. Peter Daszak?
- 14 A Yes.
- 15 Q Dr. Aleksei Chmura?
- 16 A Yes. I mean, I believe he would have been in on the same conversations
- 17 with Dr. Daszak.
- 18 Q Okay.
- 19 A But I don't think I exchanged words with him.
- 20 Q Dr. Kevin Olival?
- 21 A No.
- 22 Q Dr. Michael Worobey?
- 23 A Not about Wuhan specifically, no, or EcoHealth Alliance specifically, no.
- 24 I've had conversations with him, though.
- 25 Q Dr. Jonathan Pekar?

1 A Jonathan Pekar? No.

2 Q Dr. Florence Debarre?

3 A No.

4 Q Dr. James LeDuc?

5 A No.

6 Q Dr. Shi Zhengli?

7 A No.

8 Q Dr. George Gao?

9 A No.

10 Q Dr. Ralph Baric?

11 A I've had conversations with Ralph Baric. I don't recall any details specific to
12 Wuhan. But that one I'm not certain of.

13 Q Okay. Do you recall any details about those conversations?

14 A I know that we spoke of his collaborations in the past with shared reagents
15 from that institute from things that he used in his lab.

16 Q Uh-huh.

17 A That's what I recall.

18 Q Okay. Dr. Ben Hu?

19 A No.

20 Q Dr. Erik Stemmy?

21 A Yes.

22 Q All right. I want to go back to the top and ask more specifics.

23 Can you elaborate more on your conversations with Dr. Fauci?

24 A When the Wuhan subaward came into focus by the U.S. Government and
25 that particular grant, the one that we're focused on, is -- was suspended or terminated,

1 suspended, there were meetings within NIAID about the compliance issues that Dr. Lauer
2 from Office of Extramural Research, the compliance issues that he had asked them to
3 address, and we recognized that that was out of our jurisdiction because it was in his
4 domain at that time.

5 So there were conversations within NIAID about progress towards the
6 compliance -- addressing the compliance issues in a satisfactory manner, discussions on
7 whether or not this grant was ever going to become active again.

8 As I recall, Dr. Fauci was in on some of those meetings, but I don't have more
9 specific recollection of details of that conversation with him.

10 Q Do you recall about when those meetings -- it sounds like early 2020-ish,
11 but --

12 A Well, it would have been after the change in grant status, so that was, I
13 believe, April.

14 Q April.

15 A And the status didn't change back until this last April, right, officially, and
16 Dr. Fauci had separated from Federal service by then. So it was in that period of
17 time there were discussions within NIAID.

18 Q Okay. Do you recall any, like, any discussions regarding whether or not
19 Dr. Lauer had the authority to do what he did?

20 Ms. Ganapathy. So, Mitch, sorry. That question really calls for, like, some
21 deliberative communications to the extent that she would answer it, so I don't think we
22 can get into that today.

23 Mr. Benzine. It doesn't. She just said she didn't have the authority to do it.
24 Conversations regarding whether someone else did is not deliberative.

25 Ms. Ganapathy. Right. But the issue of whether someone else had authority to

1 do something, that's kind of a legal question, right? And I think any answer would
2 probably reflect discussions that were inflected with legal advice. And so I don't think
3 that's an appropriate --

4 Mr. Benzine. But you don't know.

5 Ms. Ganapathy. Well, I don't know, but just based on the question itself, I mean,
6 I think the content that it calls for is inherently deliberative. I don't think we can -- we
7 can't go there today.

8 Mr. Strom. The question itself called for whether or not the discussions took
9 place. We can talk about whether the next question is then: Who was there? If
10 there was members from OGC there, then you may have an attorney-client issue. Then
11 we can cross the deliberative process bridge after that.

12 Why don't we run through that sequence?

13 Ms. Ganapathy. Look, I think -- okay. First of all, we're here today on a
14 voluntary basis as an accommodation to you, to be helpful. So we're not going
15 to -- there are certain topics that we're not going to be able to get into.

16 Whether or not that is the process that we would ordinarily follow, I think the
17 important thing here is that -- look, I'll let her answer the question of whether or not
18 those discussions took place, but beyond that, like, we're not going to get into that today.

19 Mr. Benzine. Okay.

20 Were there discussions whether or not Michael Lauer had the authority to
21 suspend or terminate that grant?

22 Ms. Ganapathy. And these are discussions in general?

23 Mr. Benzine. Within NIAID.

24 Ms. Ganapathy. Within NIAID.

25 Dr. Erbelding. There might have been. I don't recall details.

1 Mr. Benzine. What were the contents of those discussions?

2 Ms. Ganapathy. Well, she just said she doesn't recall --

3 Dr. Erbelding. I don't recall.

4 Mr. Benzine. You don't recall. But there were conversations regarding --

5 Ms. Ganapathy. She said I don't recall whether there were discussions.

6 Mr. Benzine. Details. She said there might have been conversations.

7 Dr. Erbelding. I think it was mentioned that was this legal, I mean, but I don't
8 know that, within NIAID, anyone had a legal opinion that was valid.

9 BY MR. BENZINE:

10 Q Were there any conversations with Dr. Fauci on whether or not the grant
11 should have been terminated?

12 A I did not have those conversations.

13 Q Okay.

14 A I don't have personal knowledge.

15 Q Were there any other conversations with Dr. Fauci regarding the grant or the
16 Wuhan Institute of Virology that you recall?

17 A Not that I was involved in.

18 Q Any -- let me ask it more specifically, and if it's the same answer, it's the
19 same answer.

20 Were there any conversations regarding the research occurring at the Wuhan
21 Institute of Virology outside of the grant itself?

22 A Research that was happening that wasn't in the grant proposal?

23 Q Or could have been in the grant -- conversations regarding the Wuhan
24 Institute of Virology that were not regarding the suspension, termination, or otherwise
25 renegotiation of the grant.

1 A There were conversations about the experiments that they proposed -- that
2 were in the grant application that they applied for funding to do.

3 Q Were there, in the course of these conversations, were there any concerns
4 raised regarding those proposals?

5 A Concerns raised?

6 Q In 2020.

7 Ms. Ganapathy. Can you be a little more specific? What do you mean by
8 concerns?

9 Mr. Benzine. Were there ever concerns that this research was dangerous,
10 Wuhan was operating at too low a biosafety level?

11 Ms. Ganapathy. And these are conversations within NIAID that you're asking
12 about right now?

13 Mr. Benzine. Any conversation that she took place in.

14 Ms. Ganapathy. Any conversation that she can recall period?

15 Mr. Benzine. Yeah.

16 Ms. Ganapathy. With anyone?

17 Mr. Benzine. Yeah.

18 Ms. Ganapathy. At all? Okay.

19 Dr. Erbelding. So not with Dr. Fauci present, but I did have -- we had
20 conversations about whether or not the competitive renewal of the grant -- so that would
21 have been year 6 actually -- whether the experiments that they proposed met any
22 definition of using pathogens of pandemic potential or enhancing their transmissibility or
23 pathogenesis in some way. We did not believe that they did.

24 So those conversations happened.

25 BY MR. BENZINE:

1 Q Okay. Were those with Dr. Auchincloss? We can get to it in more detail
2 later, but if you recall right now.

3 A I believe we discussed that with Dr. Auchincloss, yes.

4 Q All right.

5 A It was like a retrospective look.

6 Q Yeah.

7 So shifting to Dr. Auchincloss, maybe putting that conversation aside, did you have
8 any other conversations -- or what is your recollection of your conversations with him
9 regarding the EcoHealth Alliance grant or the Wuhan Institute of Virology?

10 Ms. Ganapathy. All right. And, once again, I'm going to just remind you that
11 specifics of who said what in a specific conversation that is internal to NIAID and
12 deliberative, we are not going to be able to get into that today. I will allow her to
13 respond.

14 Mr. Benzine. Who said what is not deliberative?

15 Ms. Ganapathy. It is.

16 Mr. Benzine. She can --

17 Mr. Osterhues. Factual information is deliberative?

18 Mr. Benzine. We need -- can we go off the record?

19 Ms. Ganapathy. Yeah.

20 [Discussion off the record.]

1 Mr. Benzine. We can go back on the record?

2 BY MR. BENZINE:

3 Q I'll re-ask the question.

4 Can you go into -- elaborate a little bit more on your conversations with
5 Dr. Auchincloss regarding the EcoHealth grant or the Wuhan Institute of Virology?

6 A So whether or not they were going to be able to make progress towards
7 compliance, satisfactory compliance in the eyes of Dr. Lauer, was a general theme. So
8 there was that.

9 And then, probably on one occasion, what the experiments that were in the grant
10 proposal, whether or not they met the definition of using a pathogen of pandemic
11 potential and enhancing it in some way.

12 Beyond that -- and then the timeline for coming into compliance, because, if it
13 took 10 years then there was -- and that would be essentially not coming -- it would kill
14 the whole project.

15 Q Yeah.

16 A So talking about those uncertainties generally, I remember that as a
17 conversation.

18 Q Any conversations regarding what was happening at the Wuhan Institute, if
19 it was potentially dangerous or --

20 A I don't --

21 Q -- their biosafety levels?

22 A No.

23 Q No?

24 Dr. Chen, can you elaborate a little bit more on your conversations with her?

25 A This is Ping Chen?

1 Q Yes.

2 A I think my conversations with her began when you asked for the --

3 Ms. Ganapathy. Oh. So to the extent that those relate to ongoing
4 congressional inquiries, that's absolutely deliberative. We're not going to get into that
5 today.

6 Dr. Erbelding. Yeah, but prior to your --

7 Ms. Ganapathy. Yeah.

8 Dr. Erbelding. -- scheduled interview --

9 Ms. Ganapathy. Yes.

10 Dr. Erbelding. -- I didn't discuss Wuhan or any events there, but --

11 Mr. Benzine. Okay. I want to --

12 Ms. Ganapathy. Yeah.

13 Mr. Benzine. I want to flesh out, like, the dates on this a little bit --

14 Ms. Ganapathy. Right, right, right.

15 Mr. Benzine. -- just so I understand what she's saying.

16 Ms. Ganapathy. Right. So yeah. What is your question exactly? What is the
17 time limitation around it?

18 Mr. Benzine. Well, we can do, did you have any discussions with Dr. Chen from
19 December 1st, 2019, up until we requested her interview?

20 Ms. Ganapathy. Okay. But concerning COVID origins, concerning Wuhan?

21 Mr. Benzine. Yeah. Concerning Wuhan, concerning --

22 Ms. Ganapathy. Okay.

23 Dr. Erbelding. No. No.

24 Mr. Benzine. No. Okay. So no conversations about her trip to the Wuhan
25 Institute of Virology, no conversations surrounding that?

1 Dr. Erbelding. No.

2 Mr. Benzine. All right.

3 Dr. Erbelding. Not until she was asked to speak to this committee.

4 Ms. Ganapathy. Yeah.

5 Mr. Benzine. Okay. That's fair. Thank you.

6 BY MR. BENZINE:

7 Q A potentially obvious and long one.

8 Dr. Lauer, can you elaborate a little bit more on those conversations?

9 A So the conversations that I had with him -- and they were -- I mean, all
10 surrounded the visit, I think it was in July, where we came not to -- was it to this building?

11 No. It wasn't. It was in some other building.

12 Q To brief --

13 A Yeah.

14 Q -- committees?

15 A It was a briefing.

16 Ms. Ganapathy. Oh, to the extent that your conversations related to a briefing,
17 that's not something that --

18 Mr. Benzine. Yeah, that's fine.

19 Dr. Erbelding. Okay.

20 Mr. Benzine. That's all. We just need the structure.

21 Dr. Erbelding. But beyond that, no, I didn't have conversations with him about
22 Wuhan or about EcoHealth Alliance.

23 BY MR. BENZINE:

24 Q Did you have conversations with him about any of the letters that he sent
25 post-April 2020?

1 A No.

2 Q No?

3 Can you elaborate a little bit more on your conversations with Dr. Daszak?

4 A Daszak? When he received the letter from Dr. Lauer -- so I think that was
5 around April 2020 -- he asked for a meeting -- he asked Erik Stemmy for a meeting, and I
6 was included in that meeting. He asked us -- it was generally asked for advice: How
7 can I respond to this?

8 I think he thought that it was improbable that he could give any response to some
9 of the items in the letter. He talked about getting death threats, because things were
10 heating up really seriously then for him and his agency,

11 So that was the gist of the conversation.

12 Q Did you or -- to the best of your recollection -- did you or Dr. Stemmy
13 provide any advice on how to respond to that letter?

14 A Well, we suggested that he do the best he could. I mean, that he not
15 ignore it. That was what we said.

16 Q What does "the best you could" mean?

17 A Well, meaning item by item. If you can't provide any information on the
18 missing person or -- I mean, that was one of the items that was alluded to in
19 that letter -- just state that you asked and got no information on the -- you can't
20 provide -- you have no knowledge of that. I mean, that he should give as complete and
21 honest answer as he could. That was our advice.

22 Q All right. Was it common to get grantees to ask your advice on NIH
23 compliance efforts or was this the first time?

24 A Well, this was an uncommon situation. Normally compliance issues people
25 wouldn't ask me for advice on, but I don't recall anybody being -- having a grant

1 suspended for that reason.

2 Q All right. And then the last one. Can you elaborate a little bit more on
3 your conversations with Dr. Stemmy?

4 Ms. Ganapathy. And, once again, I'd just counsel the witness to respond in a way
5 that doesn't disclose internal deliberations.

6 Dr. Erbelding. Yeah.

7 Ms. Ganapathy. To the best you can. Yeah.

8 Dr. Erbelding. I mean, Erik Stemmy is in my division, so I --

9 Ms. Ganapathy. You can speak in generalities.

10 BY MR. BENZINE:

11 Q In general --

12 A Right.

13 Q -- regarding the grant, not his day to day, but regarding the grant --

14 A Yeah.

15 Q -- or the Wuhan Institute of Virology.

16 A Yeah. I mean, as I mentioned, we had discussions about whether or not
17 any of their activities that we had proposals for involved using pathogens of pandemic
18 potential. So there was that discussion.

19 He was in the rooms, Zoom rooms probably, when we discussed at a general level
20 whether or not they were making progress towards compliance, so that was several
21 different meetings probably.

22 I don't -- he was -- when I had the discussion with Peter Daszak, both -- I
23 mentioned the -- after he got the letter from Dr. Lauer, but there was a follow-up one
24 after Dr. Lauer deemed them to be -- have addressed the compliance issues in a
25 satisfactory way. And then we talked about the science, what else they could do if they

1 eliminated China and additional activities in China from their proposal, because it was
2 clear that they couldn't have Wuhan Institute of Virology as a collaborator anymore.

3 So in that meeting -- so there were two meetings with Peter Daszak, and in both
4 meetings Erik Stemmy was involved. And we probably discussed in advance what the
5 likely topics for discussion would be, at least for the latter one.

6 So that's the general theme of my interactions with Erik Stemmy on this particular
7 issue.

8 Q About when did the ePPP conversation have -- you said maybe going into
9 year 6?

10 A Not -- not in advance -- you mean before the award was made?

11 Ms. Ganapathy. Can you clarify which ePPP?

12 Dr. Erbelding. Yeah. What --

13 Ms. Ganapathy. What your question --

14 BY MR. BENZINE:

15 Q You said that you had conversations with Dr. Stemmy about whether or not
16 EcoHealth was using or involved --

17 A After --

18 Q -- in enhanced pathogen.

19 A After April of 2020.

20 Q Okay. Why --

21 A Well, because that was what people were saying, like, that we had been
22 sloppy. And we examined U.S. policy, we examined what they proposed to do, and did
23 not think that there had -- we did not deem it necessary to go to additional level of
24 review. So it was a retrospective look at what decisions had been made.

25 Q Okay. So it would have been in addition to the review being made at the

1 time of proposal?

2 Ms. Ganapathy. So just to clarify, Mitch, you haven't actually asked her about
3 any review that happened at the time of proposal. But, I mean, you're free to, if you
4 would like to, but --

5 Mr. Benzine. Was there a review for --

6 Dr. Erbelding. So there was a study section that reviewed the grant, and it got a
7 very good score.

8 Mr. Strom. Just to be clear, are we talking about the -- just to be clear for
9 everybody here, are you referencing, Mitch, the renewal of the grant in --

10 Ms. Ganapathy. I think you're --

11 Mr. Strom. So between year 5 and 6 or year 1, pre-year 1?

12 BY MR. BENZINE:

13 Q I think any reviews of the grant from 2014 forward where the subject of the
14 review was whether or not it was gain-of-function or subsequently using an ePPP.

15 A So I became division director in 2017, so I wouldn't -- I don't think I knew
16 who Erik Stemmy was before then.

17 So the program officer, Erik Stemmy, at the time that a funding decision was
18 pending -- and this would be for the renewal, like, not year 1 of the grant, not the first
19 initial application -- he told me -- now, I'm telling you what -- not what I personally was
20 involved in, but what he told me -- he looked at the viruses that they were using that had
21 been isolated from bats, recognized that it wasn't a human pathogen, which is the
22 criteria -- part of the criteria for the P3CO framework, it has to cause disease in humans,
23 and he did not think that it needed additional review.

24 Q Okay.

25 A So I had subsequent conversations -- I had conversations subsequent to

1 April 2020 with him about those thoughts, that determination, and I concurred with him.

2 Q Okay. Thank you.

3 I want to ask if you ever had official communications, so in your course of duty,
4 regarding the same issues with a subset of the people.

5 Did that question make sense?

6 Ms. Ganapathy. Which people?

7 Mr. Benzine. I'm going to run through them.

8 Ms. Ganapathy. Oh, okay. All right.

9 Dr. Erbelding. Oh.

10 Ms. Ganapathy. Can you just repeat it one more time so I --

11 Mr. Benzine. Any official communications on these individuals' personal email or
12 personal cell phone.

13 Ms. Ganapathy. By official communication, what do you mean by that?

14 Mr. Benzine. Anything conducting her standard course of duty.

15 Ms. Ganapathy. Agency business?

16 Mr. Benzine. Yeah.

17 Ms. Ganapathy. So where the recipient was using their personal?

18 Mr. Benzine. Yeah.

19 Ms. Ganapathy. Okay. So the question is communications where --

20 Dr. Erbelding. Did I communicate officially with people on their personal emails
21 or text or --

22 Mr. Benzine. Correct.

23 Dr. Erbelding. So you're going to name people or --

24 Mr. Benzine. Yes.

25 Dr. Erbelding. Oh, okay.

1 BY MR. BENZINE:

2 Q Dr. Collins?

3 A No.

4 Q Dr. Fauci?

5 A No.

6 Q Dr. Tabak?

7 A No.

8 Q Dr. Auchincloss?

9 A No.

10 Q Dr. Lane?

11 A No.

12 Q Dr. Morens?

13 A Morens? No.

14 Q Dr. Chen?

15 A No.

16 Q All right. Well, Dr. Lauer?

17 A No.

18 Q Or Dr. Stemmy?

19 A No.

20 Q I want to go ahead a little bit and run through some questions regarding
21 EcoHealth Alliance and your work overseeing Dr. Stemmy, but also any individuals that
22 you had with EcoHealth Alliance.

23 Have you ever met Dr. Daszak?

24 A Yes.

25 Q In person?

1 A Yes.

2 Q When was that?

3 A So at the -- I believe it was at the end of 2016. I was on the scientific board
4 for the Forum for Microbial Threats at the National Academies of Science, Engineering,
5 and Medicine, and he was also on the board.

6 I was on the board for probably about 3 years after that, and so we had meetings
7 on a -- it was probably semiannual basis or so. So I interacted with him then personally
8 and other board members, too. That's when my relationship with him -- my collegial
9 relationship with him began.

10 Q All right. Did you have any in-person interactions with him regarding
11 grants?

12 A So not until April 2020.

13 Q With the --

14 A Right.

15 Q -- Zoom calls?

16 A Right.

17 Q Okay.

18 A And -- yeah. So, I mean, that would have been the times that we spoke
19 specifically about grants. And I have seen him at meetings not related to the forum that
20 were large network meetings where he contributed as a scientist.

21 Mr. Benzine. I want to introduce majority exhibit 1. Apologies for the very tiny
22 font.

23 [Erbelding Majority Exhibit No. 1
24 was marked for identification.]

25 Mr. Benzine. This is a call and meeting log provided to us by EcoHealth Alliance

1 of Dr. Daszak's meetings. You're listed as a participant on four calls.

2 Ms. Ganapathy. Could you just give the witness a moment to --

3 Mr. Benzine. Yeah.

4 Ms. Ganapathy. -- familiarize herself with the exhibit?

5 Just take your time and read through it.

6 Mr. Benzine. I'll be calling out specific ones.

7 Dr. Erbelding. So it starts in November of 2019.

8 Mr. Benzine. 2019.

9 Dr. Erbelding. And then it goes all the way through --

10 Mr. Benzine. You can ignore the really tiny font.

11 Ms. Ganapathy. Yeah, it's very small.

12 Dr. Erbelding. So this page.

13 Mr. Benzine. Yeah. You can ignore that page.

14 Ms. Ganapathy. Oh, my gosh. Okay.

15 Mr. Benzine. It runs through 31 August, 2023.

16 Dr. Erbelding. Yeah. You didn't even highlight my name for me.

17 Ms. Ganapathy. Sorry. We just need a minute.

18 Mr. Benzine. I'll, like, call them out.

19 Ms. Ganapathy. Right. Right. But just a minute to familiarize herself with this

20 document that she's never seen before -- or presumably, because it looks like it was

21 compiled by EcoHealth.

22 Mr. Benzine. Uh-huh.

23 Dr. Erbelding. Did you say four?

24 Mr. Benzine. Yes, I believe so. I can point them out to you if that's helpful.

25 Ms. Ganapathy. Yeah. Whenever you're ready.

1 Mr. Benzine. Yeah.

2 Dr. Erbelding. Yeah. Okay.

3 Mr. Benzine. The first one is 27 April, 2020. So it's --

4 Dr. Erbelding. Okay.

5 Mr. Benzine. It says, "EHA," EcoHealth, "& NIAID, NIH Geographic Expansion
6 Call."

7 Do you recall what that call was about?

8 Dr. Erbelding. Well, I believe that was surrounding the time that he got that
9 letter from -- I'm piecing this together now -- got the letter from --

10 Ms. Ganapathy. Oh, I would counsel the witness not to speculate.

11 Dr. Erbelding. Okay.

12 Ms. Ganapathy. So only talk about what you're not speculating about.

13 Dr. Erbelding. I don't -- I don't know. I can't distinguish that one and what the
14 topic was from the title.

15 BY MR. BENZINE:

16 Q Okay. The next one is 3 March, 2021.

17 A Yes.

18 Q It says, "Confirmed -- call with EcoHealth Alliance." You're listed as a
19 participant.

20 Do you recall that meeting?

21 A I have no reason to think I wasn't present, but I don't know exactly what the
22 topic was.

23 Q Okay. And then, flipping to the second page. The first one is 28
24 September, 2022, and the subject is, "Aim Renegotiation Discussion."

25 A Yes.

1 Q Do you recall what that meeting was about?

2 A It was about whether or not activities on their grant could resume. I think
3 it was after they'd come into compliance according to Dr. Lauer.

4 Q What were the -- can you elaborate a little bit more on that discussion?

5 A Well, they needed to address -- generally address the specific aims of their
6 grant, the one that had been awarded several years prior but then had been suspended.

7 And they needed to come up with a plan. If it was going to renew activities, they
8 needed to come up with a plan that didn't involve collecting specimens in China, didn't
9 involve Wuhan Institute of Virology, and still addressed the scientific aims.

10 So that was the -- part of the -- that was what the call was about, as I recall.

11 Q Was EcoHealth receptive to those changes?

12 A Well, they were the ones that had to propose the changes.

13 Q Okay. And then the last one, 18 October, 2022, it says, "Aim Renegotiation
14 Discussion," again.

15 A Yeah.

16 Q Same --

17 A Right.

18 Q -- general concept?

19 A Yes.

20 Q Okay. We can put this away.

21 During Dr. Daszak's interview with us, he told us that he briefed NIH and NIAID
22 staff in April or May of 2021 after his trip with the WHO to the Wuhan Institute of
23 Virology.

24 Were you on that meeting?

25 Ms. Ganapathy. Sorry. Could you repeat the question?

1 BY MR. BENZINE:

2 Q Dr. Daszak testified that he briefed NIH and NIAID staff in April or May
3 of 2021 about his trip to the Wuhan Institute of Virology under the umbrella of the WHO.

4 Were you involved in that meeting?

5 A I don't believe I was briefed on the WHO meeting.

6 Q Okay.

7 A I don't--

8 Q Were you aware that that meeting occurred?

9 A That the NIAID meeting occurred or that the --

10 Q That Dr. Daszak briefed NIAID on his trip to the WIV.

11 A I don't recall that I knew that, no.

12 Q Okay.

13 Mr. Benzine. This is a good stopping point. We're a little bit before our hour,
14 but this is a good stopping point to take a break.

15 [Recess.]

16 [REDACTED]. Good morning, Dr. Erbelding. My name is [REDACTED]. I am senior
17 counsel for the Democrats on the select subcommittee. Thank you very much for being
18 here today and agreeing to voluntarily answer some questions for us.

19 EXAMINATION

20 BY [REDACTED]:

21 Q I'd like to turn our attention to the current status of EcoHealth Alliance as an
22 awardee of NIAID.

23 Can you please tell us briefly about the work that EcoHealth Alliance is presently
24 doing under their NIAID award?

25 A So you're talking about the R01 grant to Peter Daszak?

1 Q Correct.

2 A So they are currently using a lab in Singapore, the Duke -- I don't exactly
3 know. It's affiliated with Duke University, but it's Singapore University, Duke University,
4 something -- some title like that.

5 And they're looking at whether or not historical serologic specimens, so these are
6 samples that were drawn from humans that have either wildlife exposure, work in caves,
7 may have been exposed to bats, whether their serology binds with different components
8 of viruses that were previously acquired.

9 So some of those are just known sequences of bat viruses, coronaviruses. Some
10 of them are, you know, so in silico, meaning just by computer sequence that can generate
11 one specific protein from that sequence. Some of them are specimens that were
12 collected from bats. Some of them, as I understand it, came from China, but some are
13 from other Asian countries.

14 So they're seeing whether or not there is evidence by serology of exposure and
15 potential infection in individuals who may have been exposed to those bats.

16 Q Thank you.

17 And can you explain a little bit about what the scientific significance of this work
18 is?

19 A Well, we think bats are a reservoir for zoonotic spillover events that lead to
20 outbreaks in humans and, at times, pandemics. So that was true with the first SARS
21 virus in 2003, and MERS, which was a larger outbreak. It's a coronavirus, it's believed,
22 although it hasn't been directly traced to a bat reservoir, but it's believed that that's its
23 source.

24 And so understanding how these spillover events occur and what human
25 behaviors or human -- what's required for humans to interact with wildlife in order to

1 have them become infected, that's probably important for preventing future coronavirus
2 pandemics.

3 Q And is there anything else that makes the research specifically important for
4 NIAID beyond what you have already told us?

5 A Well, preventing pandemics is pretty important. I don't know that I can
6 rate anything higher than that.

7 Q I agree.

8 And just to clarify, is there a difference between this current work that EcoHealth
9 Alliance is conducting now and what they were working on previously with the Wuhan
10 Institute of Virology?

11 A The objectives are the same scientifically, but they're not using -- they're not
12 collecting specimens in China in the current version of their approved plan.

13 Q All right. Switching topics a little bit, we're going to go back to EcoHealth
14 Alliance's previous work, so their work with the Wuhan Institute of Virology.

15 And let me preface this by we're mostly lawyers around this table, not scientists,
16 so if I say anything that is inaccurate in any way, please correct me. We want the record
17 to be as accurate as possible. And I admit I will probably get things wrong, so let me
18 know.

19 But it is our understanding that, and as you alluded to just now, EcoHealth
20 Alliance's research in general has involved collecting samples and then analyzing those
21 samples for viruses. Is that right?

22 A Or just determining the sequence of what was a fragment of a virus, for
23 example, something -- yeah, something that came from wildlife and might be a virus
24 fragment.

25 Q Okay. And samples that they're looking at are generally collected in the

1 wild?

2 A Yes.

3 Q Okay. For example; bat guano in the caves near Wuhan?

4 A Yes.

5 Q Okay. Is bat guano the only way that EcoHealth Alliance was collecting
6 samples?

7 A I think they were swabbing bat respiratory tract as well.

8 Q Okay. And this is going to get a little more into the science.

9 So once that sample is brought back to a laboratory, what's done to it?

10 Ms. Ganapathy. Are you asking her what -- so Dr. Erbeling wasn't doing the
11 research herself. Is this just her understanding of the general area, or her
12 understanding of what EcoHealth was doing, or what was in the grant application? Like,
13 can you be more specific?

14 BY [REDACTED]:

15 Q Just a general understanding of how a sequence is taken from the sample,
16 what that process is. Just a general understanding.

17 A Well, the samples would be put into a genetic sequencer --

18 Q Okay.

19 A -- which tells you the nucleic acid sequence of the viral genome. So that
20 would be the step for generating data.

21 Q Okay. And would every sample taken have some virus present in it?

22 A Maybe not.

23 Q Okay.

24 A You don't -- I don't think they know until they look.

25 Q What happens to the sample after the sequence -- or after the genetic

1 sequence is taken?

2 A What happens to it?

3 Q Again, in general.

4 A I imagine it gets stored in a freezer. I'm guessing here.

5 Ms. Ganapathy. So, yeah, I'd counsel the witness not to speculate.

6 [REDACTED]. That's fine.

7 Ms. Ganapathy. You should not be guessing.

8 [REDACTED] Do you believe that the samples are maintained after the sequence is
9 taken?

10 Ms. Ganapathy. Are you just asking her if she believes --

11 [REDACTED] In best practices.

12 Ms. Ganapathy. In best practices. Okay. What company X would ordinarily
13 do?

14 [REDACTED] Yes.

15 Ms. Ganapathy. Okay.

16 Dr. Erbelding. It would be common practice for a virology lab to at least keep the
17 remnants of a sample, whatever was left, in a freezer. It would be common practice to
18 do that if there was remaining -- if the sample had some remaining volume.

19 [REDACTED] Specifically about EcoHealth -- and if you don't know, that's
20 fine -- when they are doing the sequencing, is anything other than virus genetic sequence
21 taken? Would they take a sequence of anything else present in the sample?

22 Dr. Erbelding. Well, it wouldn't be logical -- if it came from a bat, I don't
23 know -- it's not -- they're not going to get human DNA from that sample.

24 [REDACTED] Thank you.

25 Dr. Erbelding. I'm speculating.

1 Ms. Ganapathy. Yeah. I'd ask you not to speculate.

2 [REDACTED] And we've been told on multiple occasions that the sequence is shared
3 with research partners via email. Is that your understanding?

4 Dr. Erbelding. I don't know.

5 [REDACTED] Okay. Do you know what information is shared or is contained in the
6 sequence and is it data that can be emailed?

7 Ms. Ganapathy. Is this just anytime someone extracts a genetic sequence in a
8 lab?

9 [REDACTED] Yes.

10 Ms. Ganapathy. Okay. So it's -- is it the case that it's always done the same? I
11 mean, I --

12 Dr. Erbelding. No.

13 Ms. Ganapathy. Okay.

14 Dr. Erbelding. It would be -- there might be a server that a whole bunch of
15 people have access to. There might be gated access. You have -- it's only a lab -- it
16 could be uploaded to a public database. All those things are possible.

17 [REDACTED] Okay.

18 Dr. Erbelding. Or it could be just emailed to somebody.

19 [REDACTED]

20 Q And are you aware of how many genetic sequences EcoHealth Alliance's
21 work with -- in general, not just with WIV, but all of their work has discovered?

22 A I couldn't enumerate. It's probably a lot.

23 Q We spoke about best practices or common practices being to maintain
24 whatever is left of a sample after the genetic sequence is taken. Similarly, best practices
25 or common practice, do research partners generally share that sample?

1 A Yes. They might if they had a specific collaborative project or an idea that
2 those samples would be useful for. There would be opportunities to share. Some
3 people would take advantage of those opportunities.

4 Q And, again, I'm going to get into some specific questions here about
5 EcoHealth Alliance's work with their samples. Just answer to the best of your ability.

6 Are you aware of where EcoHealth Alliance's physical samples are?

7 A No.

8 Q Do you know if EcoHealth Alliance has the sequences for all of the samples
9 that were taken at the Wuhan Institute of Virology?

10 A I don't know.

11 Q Do you know if EcoHealth Alliance has the physical samples that were taken
12 at the Wuhan Institute of Virology?

13 A I don't know.

14 Q It is our understanding that, as part of their previous work as a subawardee
15 of EcoHealth Alliance, the Wuhan Institute of Virology collected novel strains of bat
16 SARS-related CoVs and sequenced the genomes for the samples that were collected
17 working with EcoHealth Alliance.

18 Is that your understanding?

1 [11:10 a.m.]

2 Dr. Erbelding. Yes.

3 [REDACTED]

4 Q In 2020, Dr. Daszak told The Economist that there were around 100 of these
5 samples. It is our understanding that the samples are still at the Wuhan Institute of
6 Virology and that EcoHealth Alliance only has the sequences.

7 Do you have any knowledge about that?

8 A I have no knowledge.

9 Q Samples that the Wuhan Institute of Virology collected as part of their
10 EcoHealth Alliance award were done with funding through that award. Is that correct?

11 A Were done with funding to --

12 Ms. Ganapathy. Yeah, I think -- sorry, just could you clarify that question?

13 [REDACTED] Sure.

14 [REDACTED]:

15 Q When the Wuhan Institute of Virology and EcoHealth Alliance were working
16 together and collecting samples, was that work funded by the NIAID award?

17 A It was funded through a subaward to Wuhan Institute of Virology from
18 EcoHealth Alliance, yes.

19 Q And that would be with taxpayer money, correct?

20 A Yes.

21 Q And it is our understanding that the Wuhan Institute of Virology has since
22 been debarred?

23 A Yes.

24 Q So EcoHealth Alliance is no longer working with the Wuhan Institute of
25 Virology?

1 A That is correct.

2 Q Neither is any other NIH grantee?

3 A That should be true, yes.

4 Q So if the Wuhan Institute of Virology still has physical samples that were
5 collected during their work with EcoHealth Alliance, would there be any way for the U.S.
6 Government, for NIH, or for EcoHealth to obtain those physical samples?

7 Ms. Ganapathy. Sorry. Just to clarify, so you're asking about a hypothetical in
8 which WIV still has physical samples and how would the U.S. go about acquiring, or
9 seizing those samples?

10 [REDACTED] Or gaining access to the samples.

11 Ms. Ganapathy. Gaining access. Okay. Yes, to the best --

12 Dr. Erbelding. I don't know. I don't know how they would.

13 [REDACTED]

14 Q Okay. And are all of the samples that EcoHealth Alliance worked on with
15 the Wuhan Institute of Virology bat-related samples?

16 Ms. Ganapathy. To the extent, you know, you can answer.

17 Dr. Erbelding. Well, they -- I think I mentioned that there's serologic samples
18 from people that handled wildlife. So that's, you know, blood from human beings. So
19 not bat samples, but from people that were in proximity with bats or with other wildlife.
20 So those also are samples that were collected.

21 [REDACTED]

22 Q And are you aware of other viruses that are not SARS-related that were
23 sequenced through these samples?

24 A So I don't know the details, but it's plausible, and probably likely that there
25 were coronaviruses that didn't have SARS 1 as part of their ancestral phylogeny, but were

1 still coronaviruses. So I think there might be a broad range of coronaviruses in those
2 bats that weren't necessarily related to SARS.

3 Q And, to your knowledge, is there scientific value in having the physical
4 samples rather than only the sequences?

5 Ms. Ganapathy. Sorry. Are you asking, as a general matter, is it better to have
6 a physical sample, or would it be better for -- in this instance, with respect to EcoHealth to
7 have the physical samples? Could you just rephrase?

8

9 Q Both. I mean, just in general, is there scientific value to having the samples
10 rather than just the sequence? And then specifically, if you have any thoughts about
11 EcoHealth Alliance and having samples rather than just the sequence.

12 A There is general value in having actual samples. It allows you to, you know,
13 test the reproducibility of your results, do experiments along -- and then there might be
14 some entirely different experiment that somebody wants to do on those samples. So
15 yeah, you'd rather have them.

16 Q Thank you. Changing topics again, we're aware that NIH and NIAID have, in
17 recent years, made changes to the award process, specifically as it relates to
18 subawardees. Can you tell us about some of these changes?

19 A So that would be something an officer related to compliance, such as
20 Dr. Lauer, would be able to speak to. I don't know -- I can't speak to specific details of
21 those changes.

22 Q Okay.

23 Ms. Ganapathy. I thought you were trying to confer with me. Okay.

24

25 Q But you are aware that changes have been made?

1 A I'm aware that changes have been proposed. I don't know if they've
2 actually been enacted. I don't have specific knowledge of their enactment.

3 Q It is also our understanding that EcoHealth Alliance's current award with
4 NIAID has additional conditions that have been placed on it. Are you aware of these
5 additional conditions?

6 A Yes.

7 Q Okay. Can you explain some of these conditions that have been placed on
8 the EcoHealth Alliance award?

9 A So, my general understanding is that rather than getting the money up front,
10 which is -- or access to the money, which is the typical approach for an NIH institute to a
11 grantee, it's my understanding that they have to do the work and then justify how much it
12 costs -- it's sort of like invoicing if it were a contract -- in order to draw down the dollars.
13 So it puts them in a very different situation than if they just got the money up front.

14 Q To the best of our knowledge, we also know that EcoHealth Alliance has to
15 share its subaward agreements with NIH. Is that a unique condition?

16 A I think it's called a special condition.

17 Q A special condition?

18 A There are other special conditions. I can't speak to all of them, because it's
19 not my role to know them in detail.

20 Q And does a special condition mean it does not apply across the board to all
21 awardees?

22 A Correct.

23 Q Is EcoHealth Alliance also required to have a third-party audit to go over
24 their financial systems?

25 A I believe that is also something that they're going to be -- either are required

1 to do or will have done. I don't -- yes, yes, that's part of their special conditions.

2 Q And lastly, is EcoHealth Alliance required to provide progress reports twice a
3 year on their work?

4 A I believe that's part of their special conditions, yes.

5 Q And just to reiterate, all of those conditions are specific to EcoHealth
6 Alliance?

7 A There may be other grantees, not in my domain, but elsewhere in the NIH
8 system that also have similar special conditions, but I only know of EcoHealth Alliance
9 having those.

10 Q Okay. And what is the purpose of these conditions on the EcoHealth
11 Alliance award?

12 Ms. Ganapathy. I'm sorry. So she said earlier that, you know, it's not her role
13 to know them in detail. So I'll allow her to speak, obviously, to her understanding of
14 that, but just want to make that known.

15 Dr. Erbelding. Yeah. I believe that it was the determination of Dr. Lauer in the
16 Office of Extramural Research that they needed, I'd say, more oversight than usual to
17 ensure that -- well, the work was being done on a timeline that was satisfactory, and also
18 that their handling of government funds was satisfactory. And so, those were the
19 special -- that was the reason for the special conditions.

20

21 Q And are you aware of who is monitoring these specific conditions for
22 compliance?

23 A I'm sure that Office of Extramural Research is involved. NIAID has a grants
24 management team, different division than mine, but they're measuring activities against
25 the terms of the award. And then for progress reports, which are scientific progress, it

1 would be the responsibility of the program officer.

2 Q And that is in your office?

3 A Yes, or in my division.

4 [REDACTED] We can go off the record.

5 [Discussion held off the record.]

6 [REDACTED] We reserve the remainder of our time, but we are done with our
7 questions for now.

8 BY MR. BENZINE:

9 Q So I want to ask a couple more questions kind of where the minority left off,
10 specifically about the reinstatement and some general questions to start with.

11 Who is responsible to providing information to the NIH, the prime award, or the
12 subaward?

13 A The prime.

14 Q In this case, did EcoHealth provide all the information that was requested of
15 it?

16 A At what time?

17 Ms. Ganapathy. Could you be a little more specific?

18 BY MR. BENZINE:

19 Q Prior to the reinstatement, had they provided everything that had been
20 requested?

21 Ms. Ganapathy. To your understanding, if you know.

22 Dr. Erbelding. To the best of my knowledge, I -- it would have been addressed in
23 the compliance issues, which would have been Dr. Lauer's determination to make, but
24 since he made that determination, to the best of my knowledge, they must have
25 adequately addressed what they -- what he wanted.

1 BY MR. BENZINE:

2 Q Were you involved or aware of the request for lab notebooks and other data
3 from the Wuhan Institute of Virology?

4 A Yes.

5 Q Did EcoHealth provide lab notebooks?

6 A No.

7 Q So they haven't provided everything that was requested?

8 A That is correct.

9 Q Thank you.

10 During the course of awarding a grant, do you review who the subawards will be?

11 A Do I personally?

12 Q Does NIAID review who the subawards will be?

13 A Yes.

14 Q Can you elaborate on that review?

15 A The review is actually focused -- and this would be at the program officer
16 level -- on foreign components, because they require State Department clearance. And
17 if that doesn't happen in time, the award isn't made. So I don't know if you want the -- I
18 just --

19 Q Well, is there like a list of previously cleared foreign collaborators?

20 A No. It's every -- every award gets its own, has to have its own steps to
21 clear.

22 Mr. Strom. So for a foreign subawardee, does NIAID rely on the State
23 Department?

24 Dr. Erbelding. All of NIH relies on the State Department for that, yeah.

25 BY MR. BENZINE:

1 Q Do you have any insight onto what that review looks like?

2 A What the State Department FACTS clearance looks like?

3 Q Uh-huh.

4 A I would have to be speculating.

5 Ms. Ganapathy. I would counsel the witness not to speculate.

6 BY MR. BENZINE:

7 Q You've never had conversations with the State Department regarding that?

8 A No.

9 Q Does -- outside of the State Department, does NIH or NIAID review, like, the
10 biosafety practices of the foreign subawardees? Whose responsibility is it to ensure the
11 subawardee is following the proper biosafety and biosecurity?

12 A So it's an institutional responsibility to make sure that -- are we talking about
13 lab safety here?

14 Q Yeah.

15 A To make sure that the experiments, the proposal is conducted according to
16 biosafety practices.

17 Q So it would fall on the prime awardee?

18 A Yes.

19 Q NIH or NIAID doesn't do an individual --

20 A I mean, unless they had a relationship with -- I mean, it would be on them to
21 have a relationship with some institutional biosafety committee if they don't have their
22 own.

23 Q But it's the prime awardee's job to ensure the subawardees are following
24 biosafety regulations?

25 A Yes.

1 Mr. Strom. So the BMBL and all that stuff --

2 Dr. Erbelding. Yes.

3 Mr. Strom. -- that they're complying with like NIH's guidance.

4 BY MR. BENZINE:

5 Q NIH doesn't do an independent assessment?

6 Ms. Ganapathy. I'm sorry, independent assessment of what exactly?

7 Mr. Benzine. Of foreign labs' biosafety.

8 Ms. Ganapathy. Of whether the research being conducted, oversee --

9 Mr. Benzine. No, just whether or not the lab follows BMBL standards.

10 Dr. Erbelding. I would -- I believe that there's registration required for all labs,
11 not -- I mean, I think both domestic and foreign, with NIH to be certified in order to be a
12 biosafety committee.

13 BY MR. BENZINE:

14 Q Okay. Does NIAID review the subaward agreements during the course of
15 awarding a grant?

16 A I don't believe they do, no.

17 Q Whose responsibility is it to ensure the subaward agreements --

18 A The grantee institution. They might upon request, but as a routine, as a
19 matter of routine, no.

20 Q Standard practice is the prime award monitors all action at the subaward?

21 Ms. Ganapathy. So you said -- so earlier you asked --

22 BY MR. BENZINE:

23 Q Or -- sorry. The standard course of practice is the prime awardee is in
24 charge of ensuring the subaward agreements comply with NIH standards?

25 A Yes.

1 Q Okay. In this case, were subaward agreements requested from EcoHealth?

2 Ms. Ganapathy. Are you asking about a specific point in time? At the onset of
3 the grant? During the lifecycle of the grant?

4 Mr. Benzine. During any course of the grant.

5 A I don't know. I believe that OER did look into that. That's what I believe,
6 but I don't -- I can't give you any more details.

7 BY MR. BENZINE:

8 Q Okay. As an expert and someone who's been involved in grants, do you
9 think NIAID should review subaward agreements prior to them being executed?

10 A I -- we rely upon institutional assurances, so I don't -- I don't know that I have
11 an opinion on that.

12 Q Do you -- again, to your knowledge, do you know if, by accepting Federal
13 funds, EcoHealth agrees to follow all applicable NIH grant policy statements?

14 Ms. Ganapathy. Sorry. Are you asking if she's aware of whether that's like a
15 requirement for all grantees or --

16 BY MR. BENZINE:

17 Q If it's a requirement for grantees to follow the NIH grants policy statements.

18 A I think that in the terms of award, there's references to grants policy. I
19 don't know if it's worded exactly as you said. So it would have to -- it would go to the
20 terms of their particular award --

21 Q Okay.

22 A -- what they're required to do.

23 Q You were asked this a little bit, but since EcoHealth, the EcoHealth grant has
24 been reinstated, is EcoHealth in compliance with their current conditions?

25 A I don't have knowledge that they aren't at this time.

1 Q And then I want to somewhat briefly parse out a little bit more on the
2 samples. So you referenced earlier you and Dr. Lauer provided a briefing to a number of
3 committees over the summer on the EcoHealth Alliance reinstatement.

4 And one of the reasons given for reinstating the grant were that there were these
5 bat samples collected from China and Southeast Asia with funding that still needed to be
6 tested or sequenced, or I forget the exact language that was used.

7 Is that correct?

8 A Is it correct that I said that to the committee --

9 Q Yes.

10 A -- or --

11 Mr. Strom. Is that your understanding of the grant, the reason for the grant
12 reinstatement?

13 Dr. Erbelding. That was part of the reason, yes, that we wanted to get the most
14 out of existing sequences from prior work. We wanted to get the most out of prior
15 work.

16 BY MR. BENZINE:

17 Q What were the other rationales?

18 A Well, that they could address a scientific priority of NIAID in understanding
19 how pandemics occur. I think that it would be -- that they had been scientifically
20 productive in the past. That was another part of the rationale for reinstatement.

21 Q If you know, at the time of reinstatement, how many samples did EcoHealth
22 have access to that remained untested?

23 A I don't know the number.

24 Q Did EcoHealth -- was it EcoHealth that told you that they had samples?

25 A They did -- they did give an approximate number. I don't recall what it was.

1 Q Did they tell you that the samples were in their possession?

2 A I believe I asked, You have access to these samples? Do you have access to
3 these samples? I think that, to my -- to the best of my recollection, that's how I phrased
4 the question. And I got an affirmative answer. That was, I think, the conversation.

5 Q You asked, do you have access, and they responded yes?

6 A This was Peter Daszak. Yes.

7 Q There wasn't an elaboration on the yes?

8 A I did not ask further questions. I took his representation as truthful.

9 Q Dr. Daszak testified he was asked, who is the custodian for these samples
10 presently; and he said, right now they are in the Wuhan Institute of Virology.

11 He never told you that?

12 A I don't recall that being said.

13 Q That was his testimony as of a week ago. So the samples are still in the
14 custody of the Wuhan Institute of Virology.

15 A But probably -- I mean, did he say all the samples?

16 Mr. Strom. Do you want to make an exhibit?

17 Mr. Benzine. Yes.

18 [Erbelding Majority Exhibit No. 2

19 was marked for identification.

20 BY MR. STROM:

21 Q And I think this will be majority exhibit 2. It's the excerpt of a transcribed
22 interview of Peter Daszak.

23 The question is, and this is on line 18 of the first page: "Who is the custodian for
24 those samples presently?

25 "Right now, they are in the Wuhan Institute of Virology." And then he mentions

1 that the samples likely belong to the Chinese Government.

2 And so, looking at that, we had some confusion and you'll see in the subsequent
3 parts of that transcript, that the WIV has been debarred. They can't participate. So
4 how are they -- it seems like a major portion of the reinstatement is based on being able
5 to get unknown samples, or unknown virus information from the WIV, which then can't
6 be compensated for that.

7 Ms. Ganapathy. So just for the record, you know, you're making this
8 representation to the witness and, you know, we obviously --

9 Mr. Strom. Well, if you would read the transcript --

10 Ms. Ganapathy. No, no, I did read it. I have no doubt that this is an accurate
11 transcription of the series of events. But, you know, these are all events that someone
12 else said in a room that the witness was not in.

13 So just to the extent that you're going to ask her to speak to them, I don't think
14 that would be appropriate, because that would be speculation.

15 Mr. Strom. So we've done a couple of these transcribed interviews, and this is
16 the first time that we have been consistently interrupted by agency counsel.

17 I don't know what your instructions are regarding obstructing us asking questions,
18 preventing us from getting the information we want, but all we're doing is asking her.
19 She, as the head of the division responsible for this grant, has approved the
20 reinstatement of the grant.

21 BY MR. STROM:

22 Q My understanding from talking with Dr. Lauer in his transcribed interview is
23 that is NIAID's -- or NIH's department-wide policy is to try to get people back on track, try
24 to get the funding and the research done.

25 And, ma'am, if you want to -- if that's your understanding.

1 A That's my understanding, yes.

2 Ms. Ganapathy. Also just, John, I'm not trying to obstruct anything. I'm trying
3 to clarify the question so the witness can actually provide answers or -- we're trying to
4 facilitate this. I -- at no point in time have I been trying to obstruct you from getting any
5 information.

6 Mr. Strom. The transcript will show what it will show. So the flexibility of a
7 transcribed interview in lieu of a deposition is that it maybe is a little more
8 conversational, and so, it would be helpful if you kept that in mind.

9 BY MR. STROM:

10 Q So Dr. Daszak, his understanding of the reinstatement of the work that he
11 was going to do involves a large portion of getting previously collected samples from the
12 WIV, but he can't pay the WIV because they're debarred.

13 And your recollection -- and correct me if I'm wrong, by all means -- is that he
14 never mentioned that the bulk of the samples, the bulk of the data resides at the WIV?

15 A He did not mention that the bulk of the samples resides at the WIV. There
16 may be other samples from other parts of Asia. There might be serologic samples that
17 weren't collected by the WIV that aren't the focus of line 18.

18 I mean, I'm just -- I'm just saying what might be true. I don't know.

19 Q And so, again -- and this is maybe the difference between sort of the law and
20 the scientific community -- is that it's sort of fundamentally the honor system, and that
21 you said on a number of occasions that, you know, this is the representation he made and
22 take it at sort of -- at face value that he's not, I guess, committing a False Claims Act
23 violation to get Federal funds.

24 Is that -- so when you're -- I guess what we're struggling with is, you've reinstated
25 this grant but -- and we've gotten a different answer from Dr. Stemmy, we've gotten a

1 different answer from Dr. Daszak.

2 What was the rationale for reinstating it, one? And then, two --

3 Ms. Ganapathy. Why don't we take your questions in turn.

4 Mr. Strom. Sure.

5 BY MR. STROM:

6 Q Okay. Go ahead with that.

7 A The rationale for reinstating: Based upon his presentation to us, we
8 believed that there were existing sequences and samples collected from China and, as I
9 believe, collected from other parts of Asia too, that could, with his experimental
10 approach, address the specific aims of understanding spillover from bats, spillover events
11 from bats or to wildlife or to humans that might help us understand and predict
12 pandemics.

13 Q Sure.

14 A So that was the understanding, that it could be important research that
15 would build on what previously had been done, sequences that had been gained, and
16 samples that had been collected.

17 Q And what was your understanding of his -- I guess maybe the phrase earlier
18 was his capacity to do this work?

19 A Capability.

20 Q Capability. It just strikes me again as odd that we've officially debarred the
21 WIV, but they're still like a silent partner in this grant.

22 So what kind of -- and this is just for my own knowledge. What is the process for
23 assessing sort of a primary awardee's capacity or capability to do the work proposed?

24 A Well, we look at what they have done, along with the team that they
25 propose to be coinvestigators, what they produced in the past. That's a large part of our

1 assessment of capability, whether it's us or the study section that is reviewing their
2 application.

3 Q And, to your recollection, did the reinstatement go through a full study
4 session for --

5 A No, it did not.

6 Q So you've been here on the process for the initial grant. When you have a
7 situation like this, I guess where they're making either a major change, or it's coming off
8 of this sort of inter-reinstatement, what is the process for reviewing their new research
9 proposal to make sure that it's within scope, and that it all makes sense?

10 A There isn't a standard process, because it's so ir -- this situation was so
11 irregular. So it's a -- it was a NIAID decision, program decision.

12 Q And is that decision made -- I guess who within -- who are the people at the
13 table at NIAID that make that decision?

14 Ms. Ganapathy. Who makes the decision to reinstate the grant?

15 Mr. Strom. Yes. Because if there's no process -- I mean, somebody's got to say,
16 yes, we will fund this.

17 Dr. Erbelding. Yes. The people, Erik Stemmy was certainly involved in
18 conversations, probably the one with the most involvement in conversations. His
19 section chief.

20 BY MR. STROM:

21 Q And who is that?

22 A Diane Post.

23 Q And then do they have -- would they have the authority to green light the
24 reinstatement?

25 A No.

1 Q So who holds that?

2 A I would be involved, and I would discuss it with Hugh Auchincloss.

3 Q Okay.

4 A He's the principal deputy -- I think you know that -- of NIAID.

5 Q Thank you.

6 BY MR. BENZINE:

7 Q I just want to, just so it's clear in the record, throughout your discussions
8 with Dr. Daszak about reinstating the grant, he never mentioned that the samples or
9 sequences that he had access to were stored at the Wuhan Institute of Virology?

10 A I don't recall him saying that, no. But it could just be a subset. I'll just say
11 there could be many samples that were not in China that he did have access to. But no,
12 I don't recall him saying that there were any at the WIV.

13 BY MR. SLOBODIN:

14 Q Do you have a breakdown on that, the samples that were in China and the
15 samples that were outside of China?

16 A I do not.

17 Q So you had said earlier that when there was a conversation with EcoHealth
18 and NIAID after they had received a termination letter in April, and -- oh, no, excuse me,
19 the suspension letter, and there were a series of questions, and he was seeking advice on
20 what to do. Said, I don't have any another on the missing person, for example.

21 At what point -- well, first of all, do you agree with EcoHealth's representation that
22 they didn't have the ability to get information, cooperation with Wuhan Institute of
23 Virology at that point in time?

24 A I wouldn't have a basis for having an opinion on that, on their ability to get
25 cooperation in April of 2020. I wouldn't have a basis for making any -- forming any

1 opinion.

2 Q Okay. So -- but you later learned that they tried to get laboratory
3 notebooks and electronic data files that were associated with transgenic mice
4 experiments. There was an interest on behalf of NIH in getting those materials because
5 they still had questions about that. And EcoHealth reported back, said, We tried. We
6 asked them and they didn't respond.

7 Were you aware of that?

8 A I believe that would have been Dr. Lauer's request and his --

9 Q Well, I mean, it's a matter of public knowledge.

10 Ms. Ganapathy. Are you asking her if she is aware that there was a request for
11 notebooks and that they did not provide those?

12 Mr. Slobodin. Right.

13 Ms. Ganapathy. Because I think we covered that earlier.

14 Mr. Slobodin. No, I haven't gotten a straight answer.

15 Dr. Erbelding. Yes, I'm aware. Yes, I'm aware. It's public knowledge, I think.

16 BY MR. SLOBODIN:

17 Q So my question is then, if you know, and let's say EcoHealth is telling the
18 truth, and they cannot get this information, then wouldn't there be a serious question in
19 their ability to get the samples from this institute that now has been debarred by Health
20 and Human Services?

21 Ms. Ganapathy. Sorry. Can you clarify what the question pending is? There's
22 just a lot in there.

23 BY MR. SLOBODIN:

24 Q Do you think EcoHealth could get the samples out of the Wuhan Institute of
25 Virology, given the fact that EcoHealth is saying, we can't get cooperation with Wuhan

1 Institute of Virology to get lab notebooks and electronic files? Would there be any
2 reason to believe, notwithstanding that, they could still get the samples from Wuhan
3 Institute of Virology?

4 A So I wasn't aware that there were samples that they were trying to get until
5 this exhibit, whatever it is, was put in front of me. So that was my --

6 Q No. I thought at the briefing -- I was at this briefing with you and Dr. Lauer.
7 Ms. Ganapathy. Sorry, Alan, this is actually in the transcript, that she said she did
8 not like -- we can read the transcript back, but I think there's a very clear record of her
9 saying that she wasn't told what is written in here, right?

10 Mr. Slobodin. I'm not asking about the Daszak transcript at this point. I'm
11 asking about the basis for thinking that EcoHealth -- or not.

12 You reinstated the grant because you wanted -- you said earlier you're trying to
13 get the most -- you know, get the most out of the prior work, right? And that means
14 getting the samples. There were samples in China and there were samples outside of
15 China.

16 Now, we have a question, can we get the samples out of China. There's a real
17 question of that, given the fact that the Wuhan Institute of Virology got debarred by the
18 Department of Health and Human Services because they weren't cooperating with the
19 grantee.

20 So what would be the basis to think that you could get the access to the samples
21 from the Wuhan Institute of Virology, given that set of facts, given that premise?

22 A So when I had a conversation with Dr. Daszak about reinstating the grant
23 and how -- what they would do, what they would propose to do in order to begin
24 activities again funded through that grant, I asked him, Do you have access to the
25 samples? And he said yes.

1 Q And when was this conversation?

2 Mr. Strom. Just approximately, if you recall.

3 Dr. Erbelding. 2022, fall-ish maybe, fall, meaning the season.

4 Mr. Benzine. And then one question real quick, Alan, and then I'll let you --

5 Mr. Slobodin. Yeah. No. My question, though, is how many samples, why did
6 NIAID -- did you have any concerns about EcoHealth's ability to get the samples out of
7 China?

8 Dr. Erbelding. Can you say that again, please?

9 Mr. Strom. Did NIAID, in reviewing the reinstatement, have any concerns about
10 EcoHealth's ability to get historically collected samples out of China?

11 Dr. Erbelding. I asked him if he had access to the samples, and he said yes.

12 BY MR. BENZINE:

13 Q You said -- you used the word, Dr. Daszak gave you a presentation during the
14 renewal. Was there -- was there -- or during the reinstatement, excuse me.

15 Were there any documents associated with those meetings?

16 A It's possible.

17 Q Would they have been --

18 A I mean, he would have had to write something down in order for us to
19 review it, or for subsequent weeks. So there's something, yes.

20 Q So they would have been sent to a NIAID email address?

21 A Yes.

22 Q Okay. Thank you.

23 I want to -- I'm going to go back in time a little. And just so we have something
24 to look at when I ask the questions, I want to introduce majority exhibit 3.

25 [Erbelding Majority Exhibit No. 3

1 was marked for identification.]

2 BY MR. BENZINE:

3 Q This is the year-one notice of award to EcoHealth. And I'm sure I asked it in
4 a very convoluted way before, but on the first page, the second paragraph -- it's one
5 sentence -- says, "Acceptance of this award including the 'Terms and Conditions' is
6 acknowledged by the grantee when funds are drawn down or otherwise obtained from
7 the grant payment system."

8 Is that language standard throughout notice of awards?

9 A I believe it is, yes.

10 Q What are some of the kind of standard, run-of-the-mill terms and conditions
11 that grantees have to follow?

12 A They differ, you know, if there's a human subject's involvement. I think
13 institutional review/approval. I don't know. I can't, off the top of my head, come up
14 with exact language or --

15 Q Does it include submitting timely progress reports?

16 A That would be standard, yes.

17 Q Does it include disclosing subgrantees on the SAM system?

18 A On what system?

19 Q Either like on the website. It's -- I believe it's SAM.gov.

20 A I don't know if that's a term or condition.

21 Q Does it include disclosing subgrantees generally?

22 A I don't know, actually.

23 Q And we discussed this a little bit, but it includes monitoring and the oversight
24 of subgrantees?

25 A I believe so, yes.

1 Q And it says, "Finally, as proposed above for the MERS-like viruses, should any
2 of these recombinants show evidence of enhanced virus growth >1 log in cells expressing
3 the human, bat, mouse or civet receptor over wildtype parental backbone SARS-CoV
4 strain or grow more efficiently in human airway epithelial cells, we will immediately stop
5 all experiments with the mutant, inform our NIAID Program Officer and the UNC
6 IBC" -- that's a typo. They corrected it. It is the Wuhan Institute of Virology IBC -- "of
7 these results and participate in decision-making trees to decide appropriate paths
8 forward."

9 I want to ask about the 1 log condition. First, is it standard practice to kind of
10 have grantees suggesting award conditions?

11 A They provide information that might help NIAID decide what award terms
12 are appropriate. No, it's not standard for them to -- to tell us what the terms of their
13 award are.

14 Q Is the 1 log growth -- to the best of your knowledge, is the 1 log growth
15 condition standard amongst NIAID grants?

16 A For -- currently, I'll just say since I've been director, so that is after this. We
17 have been applying that term to award, that please notify us when this happens in grants
18 that use recombinant viruses.

19 So if they're not enhanced, they're not pathogens of pandemic potential or
20 enhanced, but there could be unpredictable things happen, it's a guardrail. We just
21 want to know what's happening with this experiment. That's basically what the term is
22 saying.

23 Q Does it apply to all the grants that have recombinant -- that propose
24 recombinant viruses, some? What's the decision-making tree on applying this
25 condition?

1 A It would probably be considered in grants that focus on viruses with
2 respiratory route of spread.

3 Q Dr. Daszak testified that he received the language for this condition from
4 Dr. Baric at UNC. Were you aware of that?

5 A It's possible that Dr. Baric had that term in one of his awards around this
6 same time, and maybe even currently.

7 Q Okay. One of the things that has been claimed or out there is that
8 EcoHealth didn't understand the condition very well, that it doesn't say that you have to
9 measure in logs. It doesn't say how or when you measure. It doesn't say like when
10 to -- what "immediately notify" means. They've had some concerns about that.

11 Is the expectation, considering that the condition says measure greater than 1 log,
12 that experiments would be conducted in a way that can measure in logs?

13 A I think it's pretty routine virology measurement to assess logarithmic growth
14 in an experiment. I mean, that's what I can say.

15 Q Would you conduct that measurement throughout the course of the
16 experiment or at the end?

17 A Probably at defined intervals and at the end.

18 Q Were those, to the best of your knowledge -- and this has been on notice of
19 award since you became division director. Are those expectations communicated?

20 A So it's not -- I don't think we use these exact words anymore.

21 Q No.

22 A But are those expectations communicated?

23 Q Does the award condition now say --

24 A Now have approvals, have specific --

25 Q Say intervals and you have to measure in logs and --

1 A No, I don't think so, because it would be -- you know, every experiment
2 might be conducted different. The intervals might be different, so we wouldn't spell
3 that out to them. It wouldn't make sense.

4 Q Would it make sense to say, measure in interval -- like undefined intervals?
5 Because what we're seeing is that if you only measure at the end, the potential unknown
6 gain-of-function has already happened. So they've -- if you're only measuring the
7 experiment at the end, you're violating --

8 Mr. Strom. What was in the pause.

9 BY MR. BENZINE:

10 Q -- at that point, the gain-of-function pause, now potentially the P3
11 framework, depending on what you're working on, on purpose, in essence. If you
12 measure in the middle of the experiment and it shows growth, and measure at the end of
13 the experiment and it shows no growth, you still -- if you only measure at the end, you
14 conducted an experiment that grew a virus without reporting it.

15 A You also might have an experiment that is completely meaningless because
16 you have no data, right? I mean, I don't know how -- I don't think that the terms that we
17 currently use spell out intervals,

18 Q Okay.

19 A That's -- but a virology experiment I don't think would be conducted the way
20 that you just described.

21 Q Okay. I don't have the exact page, but Dr. Daszak testified that they
22 measured in I think it was like genome copies or something and --

23 A Yeah, that would be a quantity of viruses.

24 Q And they measured at the end of the experiment, specifically because NIAID
25 never told them otherwise.

1 A Okay.

2 Q Do you see that as problematic?

3 A I don't know the particulars of the experiment he was talking about.

4 Q Is there a difference between -- what's the difference between genome
5 copies and measuring in log?

6 Mr. Slobodin. I think he's referring to viral titers --

7 Mr. Benzine. Oh, yeah. What's the difference between --

8 Mr. Slobodin. -- versus genome copies per gram.

9 Dr. Erbelding. So total number of viruses would be total number of genomes. I
10 think people would accept that. Then -- and then the gram in the denominator, is it
11 grams of mouse or grams of tissue or -- I don't know. I don't know what the gram refers
12 to.

13 BY MR. BENZINE:

14 Q Viral titers versus genome copies.

15 A I think that would be the same thing.

16 Q They would be the same thing?

17 A The same number, to the best of my knowledge. I would equate those
18 two.

19 Q Do you -- it's -- you testified it's used now. Do you remember, or has
20 anyone told you how it came about, why the 1 log versus 2 logs versus half a log versus --

21 A I think, you know, half a log isn't very much in a virus replicating. No, I
22 don't know how it came -- how -- I don't know the discussions that surrounded the
23 particular details of this term of award.

24 Q Is it -- is this term written in any policies or practice manuals at NIAID now?

25 A Practice manuals? It might be in --

1 Q Like if I'm a program officer and there's a recombinant virus in a respiratory
2 tract experiment, is there a book I can pull off the shelf that says, this is the term and
3 award that -- term of award that I put in here?

4 A No, I don't think there's a book to pull off the shelf on that.

5 Q Is it written in any policy that this is the go-to language?

6 A There are PPP and EPPP standard operating procedures. A term might be
7 in that. The term might be modified, depending upon the exact experiments. I don't
8 recall the details.

9 Q Are those -- are the PPP and EPPP procedures online? Are they publicly
10 available?

11 A No, I don't believe they are.

12 BY MR. STROM:

13 Q So, understanding that you became director in 2017, in 2014, the Obama
14 administration paused gain-of-function research. And so -- and it applied to -- I guess it
15 came about because of concerns about the ferret influenza experiments and some other
16 things.

17 So, first of all, do you recall that 2014 announcement? I know you weren't at
18 NIAID or --

19 A I was at NIAID, but I wasn't in --

20 Q Oh, you were in HIV.

21 A -- my current division, yeah. I did hear about it, yeah. I mean, I read in
22 Science News.

23 Q It seems to us that NIAID attempted to sort of come up with a process that
24 would -- you know, you have your existing portfolio of grants and experiments, and you
25 had to make a decision as to what was gain-of-function, and had to be subject to the

1 pause versus what was not gain-of-function and could continue.

2 And I was wondering if that was something that still occurred when you
3 were -- became director in 2017?

4 A So the policy in 2017, January, became definition of a pathogen of pandemic
5 potential, because GoF is too generic.

6 Q Right.

7 A And then, a definition of what enhanced pathogen, what those types of
8 experiments, what met the definition of enhancement.

9 And so, subsequent to the framework that was developed by OSTP, HHS
10 developed a policy. And so, that became what we had to follow in our definitions for
11 what required review.

12 Q Sure. So what's the process in 2017-2018 for reviewing experiments to
13 making that initial determination the proposed experiment could involve an EPPP or a
14 gain-of-function research of concern?

15 A What was the process?

16 Q Uh-huh.

17 A So investigator-initiated proposals come in. They get reviewed by a study
18 section at the Center for Scientific Review. So that's the peer-reviewed step.
19 Sometimes the reviewers, in their summary statement, might flag something that they
20 thought fit a definition, but it's not primarily their responsibility to do so.

21 So if an application scores well enough to be in the fundable range, a program
22 officer would review the abstract, look at the viruses and the experiments that were
23 being proposed -- that would actually probably mean delving deeper than just the
24 abstract -- and see whether anything might meet the definition of a pathogen of
25 pandemic potential or -- and, if it did, enhancing pathogenicity or transmissibility.

1 So if they were concerned or even if they just wanted to talk about it further, they
2 would bring it to a group of NIAID program staff to discuss it further and talk about
3 whether or not it met the definition of a PPP, whether it was creating an EPPP, or
4 whether we couldn't determine it and we needed to go back and ask the investigator who
5 wrote the application for more information.

6 Q And then -- and I think Mitch was asking about this, but what the PO has to
7 review, what the program officer has to review, my understanding is that there is not any,
8 sort of, subguidance documents that say, here's the test you would apply, help like to
9 provide him some landmarks for his determination.

10 I mean, he obviously has a scientific background. Is that correct?

11 A Well, there's the policy document that HHS created, which is what we have
12 to follow. So there's definitions in there.

13 Q And so, going back to the terms of the award a little bit, the immediately
14 notify provisions that require when they find out, what is your sort of understanding of
15 that requirement? Because, again, Dr. Daszak has made a big issue --

16 A Right, his like staff page. We don't do that.

17 Probably -- we recognize that there's ambiguity there. It would probably be,
18 Notify us within a business day. I mean, we would think that that would be reasonable.
19 Some scientists might say it would be better if we reproduced the results and then told
20 you.

21 Q Sure.

22 A -- within a business day. And that would still be a short period of time.
23 That still might be a matter of just a few days.

24 Mr. Slobodin. But in one business day of what?

25 Dr. Erbelding. Of the data being available, the observation of enhanced virus

1 growth greater than 1 log.

2 Mr. Benzine. But it wouldn't be waiting for the next progress report?

3 Immediately notify would be --

4 Dr. Erbelding. Yes, that would be beyond immediate -- well, beyond the
5 definition of immediately. That would be stretching it too far.

6 Mr. Strom. So in 2018 -- I'll make this majority exhibit 5.

7 [Erbelding Majority Exhibit No. 5
8 was marked for identification.]

9 BY MR. STROM:

10 Q This is 5. It is a July 5th, 2018, email correspondence between Dr. Daszak
11 and a number of people at NIAID, including yourself.

12 I wanted to turn to the second page. This is a July 5th, 2018 letter, directed to
13 Aleksei Chmura, informing them that under the P3CO Framework, their research is not
14 going to be subject, that it is outside the scope of that policy.

15 Do you recall -- I imagine this is probably one of several that your division had to
16 send out to grantees.

17 A That is correct. That's my understanding as well.

18 Q And in the last paragraph on the first page, second sentence, "NIAID
19 re-reviewed the grant application and other information provided by you, and made the
20 following assessment." And that assessment is that it's not subject to the P3CO
21 Framework.

22 Do you recall that process?

23 A Yeah, generally. It's familiar. So it would have been after HHS had their
24 guidance document for how funders were supposed to approach the issue of possible PPP
25 and experiments that enhanced PPP.

1 comes just as a perspective that's different.

2 Q Sure.

3 A Yeah. I'm not -- I'm thinking that for the other names here, even if they've
4 moved on, it would be the replacement person that is stepping in.

5 Q And how are these meetings typically run?

6 A So there's an executive secretary, Andrew Ford. He's listed here and he's
7 still functioning in that role, who has -- there's a distribution, an email distribution list for
8 this.

9 There are program officers that contact them that they want to discuss something
10 and put it on the agenda. Whatever documents exist related to the problem that they
11 want to present are attached. So, similar to what you see here, the PDF with Daszak in
12 the title.

13 Q Correct.

14 A That's usually sent out in advance of the meeting.

1 [12:11 p.m.]

2 BY MR. STROM:

3 Q And then how does the meeting proceed?

4 A So there's an agenda. There's items for discussion. And item by item, the
5 program officers give background and raise questions, and people who are in the meeting
6 discuss, ask questions, give opinions.

7 Q So what would happen -- I guess one of the questions we have -- what would
8 happen if the program officer is concerned that this is a gray area? He goes to this
9 meeting. The informed opinion of the majority, everybody else but him maybe says,
10 "Oh, there's no problem here."

11 If he is still reluctant to proceed, is there -- I guess, who is the final adjudicator?

12 A Reluctant to proceed with funding or reluctant to --

13 Q Reluctant to make the determination that it's not covered by the P3CO
14 process.

15 Who is sort of the final adjudicator of, "Yes, this policy does not apply, go
16 forward," or, "Yes, it does apply, and we actually do need to do the review"?

17 A We come to -- we try to come to a consensus. So if someone spoke up and
18 said, "I don't feel comfortable with this, I think this is possible creation of an ePPP," or,
19 "This does fall under the guidance," then we would say, "Okay, we'll put it forward to HHS
20 for review," usually.

21 But then there's steps that have to happen before that. I mean, the institution
22 has to come up with a whole lot of documents. The investigator probably has to fill
23 out -- has to give more description of what exactly they're doing and maybe provide
24 background data.

25 Q Okay. And so if it trips over into the opinion that it's P3CO, ultimately it's

1 the program officer who has to be comfortable proceeding that it's not?

2 A No, I think everybody has to be comfortable that it's not.

3 Q Okay. And then if you submit it up, if you say, "Yep, we need to flag this
4 one for departmental review," it sounds like it creates a lot more work for the
5 investigator to then get his experiment through?

6 A It does, yes.

7 Q Okay. How many -- what is -- first of all, I should have asked this earlier.
8 How many grants does your division issue in a year?

9 A About 1,400 in the most recent fiscal year.

10 Q Is that more during COVID and tapering off now or --

11 A It's always more than a thousand, I think.

12 Q Okay.

13 A But, yeah, we're a big division.

14 Q Sure. And then how many, to the best of your recollection and experience,
15 how many experiments are subject to this sort of internal review process?

16 A It's increased in the past few years, really just because of where science is
17 with regard to coronavirus research.

18 So there's usually, like, I would just say at least two matters for discussion on the
19 agenda, but some of them are follow-ons, like the last time we decided get more
20 information and then they come back with more information. So it's an agenda item,
21 but it's a carryover from a prior meeting.

22 Q So you're looking at two dozen proposals maybe?

23 A Two dozen, you're saying, a year?

24 Q A year, yeah.

25 A That sounds plausible in the recent years, yes.

1 Q Okay. And then it's obviously been reported that only three have ever
2 been referred for P3CO review. Does that sound correct?

3 A Yes.

4 Q Maybe four now.

5 A Yes. Three.

6 Q Three? Okay.

7 So turning back to the prior exhibit from 2018, when you guys were transitioning
8 from the pause to the P3CO, is it correct to assume that the transition from the pause to
9 the P3CO, that this re-reviewing followed the process we just discussed?

10 A Yes.

11 Mr. Strom. Okay. Yes is a good answer. So that's all I've got.

12 Mr. Slobodin. Just a quick follow-up on looking at that email list and the names.

13 Dr. Erbelding. This?

14 Mr. Slobodin. Yes.

15 Dr. Erbelding. It's 3373. The email list?

16 Ms. Ganapathy. Are you talking about the July --

17 Mr. Slobodin. Exhibit 6.

18 Mr. Strom. Exhibit 6. The 2016 meeting.

19 Ms. Ganapathy. So 2968.

20 Dr. Erbelding. 2968. Okay.

21 Mr. Slobodin. If you could, Doctor, I'd appreciate it.

22 Could you point out who on that list would be the subject matter experts to
23 review coronavirus research, such as this EcoHealth research item that was in on the
24 agenda? But who would be your top people, your top experts on that list that you
25 would look to to help steer and analyze --

1 Ms. Ganapathy. Sorry. Alan, are you asking -- you're not asking who, in fact,
2 reviewed it. You're asking who, in her opinion, would be most best-suited to review
3 that so that you can --

4 Mr. Slobodin. Well, we know she wasn't at the meeting.

5 Ms. Ganapathy. Yeah.

6 BY MR. SLOBODIN:

7 Q But I do want to understand -- I want to know who were the subject matter
8 experts that would have been included in this meeting, because some of them are
9 still -- would have continued at NIAID when Dr. Erbeiding assumed her position.

10 A So the corona portfolio, the coronavirus portfolio was relatively small back
11 then. So Erik Stemmy would have had the most experience in coronavirus virology. So
12 I would consider him a subject matter expert.

13 Q Well, he was the one who referred it to the review committee because he
14 wanted --

15 A Yes.

16 Q -- he told us he wanted subject matter experts to review it.

17 A Yes.

18 Q So he obviously thought there were people with greater expertise than he,
19 that he wanted to have them also look at it.

20 So who would those people be on that list?

21 A So there is a viral section -- respiratory virus section chief.

22 Q Who is that?

23 A In 2016, it was David Spiro. It's interesting that Fogarty International
24 Center is after his email name right now. He still works at NIH. But in 2016, he was
25 definitely a NIAID employee.

1 And then other program officers that maybe had more of an influenza virus
2 portfolio, that would include Teresa Hauguel, who is on this list.

3 So section chief, branch chief, the branch chief is Linda Lambert, who's listed here.

4 So people in those roles had experience in evaluating the criteria for whatever at
5 the time was considered gain-of-function research of concern.

6 Mr. Slobodin. Okay. Thank you.

7 Mr. Strom. And then who replaced Dr. Spiro as section chief?

8 Dr. Erbelding. Diane Post, who is also listed here, but she wasn't section chief at
9 the time.

10 Mr. Benzine. And then we're at the end of our hour, but I have one more
11 question.

12 Is there anyone from the NIAID Office of Biodefense that comes to those
13 meetings?

14 Dr. Erbelding. Office of Biodefense and Translational Research Resources in my
15 division?

16 Mr. Benzine. Yeah.

17 Ms. Ganapathy. If you know.

18 Dr. Erbelding. They don't --

19 Ms. Ganapathy. I would counsel you not to speculate based on --

20 Dr. Erbelding. There is no one on this list.

21 BY MR. BENZINE:

22 Q Currently. No, currently.

23 When you do a gain-of-function or a P3CO determination, are there individuals
24 from the Office of Biodefense?

25 A Yeah, they do, because they are involved in managing this type of research.

1 Q Do you discuss -- and this will be my last question, and then we can go -- do
2 you discuss any of these proposals with other agencies?

3 A Outside of NIAID?

4 Q Yeah.

5 A No, this is a NIAID group.

6 Q Okay.

7 A If somebody outside of NIAID happened -- at NIH happened to call us and ask
8 us for advice on something, which they might, we would help them.

9 Q But you don't get a proposal and go, "Maybe we should talk to the
10 Department of Defense or the State Department"?

11 A No.

12 Q No? Okay.

13 Mr. Benzine. We can go off the record.

14 [Recess.]

1 [1:03 p.m.]

2 [REDACTED] On the record.

3 [REDACTED]

4 Q Good afternoon, Dr. Erbeling. I just have a few questions for you to clarify
5 a couple of things that have come up, and then I'm going to turn it over to my colleague,

6 [REDACTED]

7 My first question is, in the previous round of questions you mentioned sitting on
8 the P3CO committee. Is that correct?

9 A The NIAID P3CO DURC committee, yes.

10 Q Okay. And when research is brought before that committee it's because
11 there are questions about whether it falls under the P3CO framework --

12 A Yes.

13 Q -- or DURC framework, correct?

14 A Yes.

15 Q And as you spoke about, very few instances have actually been referred out
16 to HHS?

17 A Yes.

18 Q So that means that most of the cases before you were not found to fall
19 under the framework?

20 A There were some reviewed that fell under the framework, and when we
21 went back to the investigator they decided to use -- they proposed different methodology
22 that didn't fall under the framework.

23 Q Okay. So when there is research that is proceeding because it has not
24 fallen under the P3CO framework, does the committee do any follow-up with those
25 research projects?

1 A It would probably be a progress report or maybe a report, not in the annual
2 interview, but just something that happened that the program officer became aware of
3 that might trigger a discussion at those meetings.

4 Q Okay. So the program officer might bring --

5 A Yes.

6 Q -- active research --

7 A Yes.

8 Q -- to the committee.

9 Speaking of progress reports, based on EcoHealth Alliance's current reinstated
10 grant, they are providing two progress reports per year, correct?

11 A Yes.

12 Q Would those be at 6-month intervals?

13 A I believe so.

14 Q Okay. And the grant was reinstated April 26th, 2023, correct?

15 A Sounds correct, yes.

16 Q Which would make their first progress report due at the end of October
17 2023.

18 A They have an interval after whatever the agreed-upon date is. There's a
19 certain interval of time --

20 Q Okay.

21 A -- to produce a progress report.

22 Q But 6 months from the end of April 2023 would be end of October 2023?

23 A That sounds right to me, yes.

24 Q Do you know if that first progress report has been submitted?

25 A I don't know.

1 ██████████ Okay. Thank you.

2 And I will turn it over to ██████████

3 ██████████ Yes. Thank you.

4 ██

5 Q Dr. Erbeling, my name is ██████████ I'm on the Energy and Commerce
6 Committee minority staff. And like my colleagues have done, thank you for being here
7 voluntarily, answering our questions, being patient with our lack of understanding of
8 science -- at least I will speak for myself, as you're about to hear on some of these,
9 maybe.

10 I just had a couple other questions about the reinstated grant. So as I
11 understand it, one of the special conditions is that expenses for this grant -- money for
12 this grant under reinstatement is essentially not all given to the grantee for EcoHealth to
13 spend down, right? Instead, in this, as one of the special conditions, EcoHealth
14 essentially fronts expenses, pays its own expenses, and then submits those for
15 reimbursement, and then that is approved. Is that correct?

16 A Correct.

17 Q And who is responsible for the review and approval of EcoHealth expenses?
18 Is that you or is that somebody else?

19 A It's not me.

20 Q Okay.

21 A It would be the program officer and the grants management specialist.
22 And then, of course, they might consult with others if there happened to be a question
23 about allowability of an expense.

24 Q Okay. So there is both -- for thinking of it in sort of the terms that we've
25 discussed it before -- there is somebody who is looking at, I guess, the scientific

1 component of it and then, I guess, the administrative component of it --

2 A Yes.

3 Q -- and they're talking together --

4 A Yes.

5 Q -- about those expenses.

6 A Yes.

7 Q So because the -- we talked a little bit about what the reinstated grant is
8 supposed to accomplish, and I think there are a few different buckets at work. And
9 please correct me if I get any of these wrong.

10 But some of it relies on taking and analyzing samples that were collected
11 pre-pandemic to review for any potential exposure to viruses and what those viruses
12 might be, broadly speaking, correct?

13 A That's my understanding, yes.

14 Q Okay. And then there's also work to be done analyzing sequences that had
15 already been sort of run but not analyzed in terms of potential threat for human spillover,
16 correct?

17 A Yes.

18 Q Okay. So there is some work that can be done -- at least some work under
19 this grant that can be done without actually possessing physical samples, right?

20 A I believe so, yes.

21 Q Okay. So I guess my question -- the reason for that -- I'm not trying to trap
22 you into anything. But the reason I'm asking is because, if there was work -- because
23 EcoHealth Alliance has to pay for whatever it is doing first -- paying for its expenses -- and
24 then submit that to NIH for approval, there should be somebody who is reviewing those
25 expenses who understands the work that is being done, the scientific validity of it, that

1 would be able to say, "How did you do this work, how did you accrue these expenses, if
2 you don't actually have samples to analyze?" Is that right?

3 A Right.

4 Q Okay. So --

5 A And they might say, "Where did these samples come from?"

6 Q Sure. So point being, there is somebody in this process that, because
7 taxpayer funds are not first going to EcoHealth, that would have the knowledge and
8 ability and competence to be able to scrutinize what work was being done and how it was
9 being done based on possession of samples or the lack of possession of certain samples,
10 right?

11 A I believe so, yes.

12 Q Okay. So the system should catch, if EcoHealth Alliance purports to be
13 doing work on samples that come from Wuhan Institute or somewhere else, somebody
14 should be able to question, "Do you actually have these? How did you get these? How
15 were they provided to you?" and then either approve or reject whatever --

16 A Yes.

17 Q -- expenses were based on that work accordingly?

18 A Agree. I agree with that reasoning.

19 [REDACTED] Okay. Great.

20 That was all I had, [REDACTED] Anything else from you?

21 [REDACTED] Nothing else.

22 We will reserve the rest of our time and go off the record.

23 [Discussion off the record.]

24 Mr. Benzine. We can go on the record.

25 BY MR. BENZINE:

1 Q I have one quick follow-up question, and then I'm going to ask some more
2 about EcoHealth and their various efforts.

3 If Dr. Daszak had told you that samples were still in the custody and control of the
4 Wuhan Institute of Virology, would that have changed your calculus in reinstating the
5 grant?

6 A I think it depends on -- we would have said those samples, we can't assume
7 that they're going to be used. It would have depended upon what other samples he did
8 have access to or he did have in other locations that were accessible.

9 Q So it would have at least prompted some follow-up questions or more
10 information?

11 A Yes.

12 Q All right. Thank you.

13 A I think so.

14 Q I want to go back to some of the notice of awards and the 1 log condition,
15 and start by introducing majority exhibit 7.

16 [Erbelding Majority Exhibit No. 7
17 was marked for identification.]

18 Mr. Benzine. And, again, I'll flip. I'll tell you where to look.

19 This is the year 3 revised notice of award. And if we flip to page 5, is where the
20 special terms and conditions are.

21 Ms. Ganapathy. Could she have just a minute to read through it?

22 Mr. Benzine. Yeah.

23 So on page 5, under "Special Terms and Conditions," there's a line that says this
24 supersedes the previous notice of award. And then the next two paragraphs discuss the
25 1 log special condition.

1 Dr. Erbelding. Okay.

2 Mr. Benzine. And then I want to introduce the year 4 notice of award.

3 [Erbelding Majority Exhibit No. 8
4 was marked for identification.]

5 Dr. Erbelding. So this is -- I'm sorry. This was year 3? Is that --

6 BY MR. BENZINE:

7 Q Correct.

8 A Okay.

9 Q The year 3 revised. I think it might have been an original year 3, and then
10 they revised it for the special award condition.

11 A Okay.

12 Q This is the year 4. And I'll give you the chance to flip through this one.
13 But while you're flipping through, in the year 4 notice of award, the special awards -- the
14 special terms and conditions start at the very bottom of page 4 --

15 A Okay.

16 Q -- and flow onto page 5. And as I'm reading it, I don't see the 1 log
17 condition in here.

18 A I don't see it either.

19 Q And then I'll introduce the year 5 notice of award as exhibit No. 9.

20 [Erbelding Majority Exhibit No. 9
21 was marked for identification.]

22 BY MR. BENZINE:

23 Q And I hate to run you through the same exercise, but again, flipping to page
24 5 is where the special terms and conditions start, flowing onto page 6. And at the very
25 top of page 6 is the 1 log condition again.

1 Do you have any knowledge as to why the discrepancy between years 3, 4, and 5?

2 A No.

3 Q Dr. Stemmy testified that, for the year 4 report, he put the 1 log growth
4 condition on his checklist, but then between his checklist and it being issued, it was taken
5 off.

6 Can you explain what the program officer checklists are and then who has access
7 to them prior to an award being issued?

8 A So the issuance of an award -- a notice of award -- is by grants management
9 staff in NIAID. I don't know how the checklist prompts -- I mean, it might have been an
10 oversight. He doesn't issue terms of award.

11 Q So who within your division would have the ability to take something off a
12 program officer's checklist?

13 A Nobody. I mean, it wouldn't be a conscious decision that anybody would
14 make for any reason.

15 Q So someone just kind of mistakenly didn't include that condition in the
16 award?

17 A Well, in a different division. The grants management staff, I think, would
18 have had responsibility. I don't know if there's any intermediate steps where that
19 intention to add that term could have been lost.

20 Q Without that condition, could EcoHealth have conducted an experiment that
21 would have violated the pause and not reported it?

22 A In 2017, the pause wasn't in effect.

23 Q Or could they have conducted an experiment that would have been
24 potentially P3 eligible and not reported it because of a failure to include that term
25 condition?

1 A I don't -- so this is year 4 we're talking about, right?

2 Q Yes.

3 A This is year 4.

4 I don't believe that the work that they described in their application would have
5 met the definition of pathogen of pandemic potential, human pathogen.

6 So would something have been done that would have met that definition? It
7 wouldn't have been in the application. It would have not been consistent with what
8 they applied to do and were approved to do.

9 Q So --

10 A 1 log or not --

11 Q Yeah. Yeah.

12 A -- it doesn't --

13 Q That condition being left out of year 4 has, I mean, pretty much no bearing
14 on --

15 A It doesn't make an experiment PPP. It just --

16 Q It would mean that you didn't know if it was --

17 A The guardrail was there because we want to keep closer tabs on those types
18 of experiments.

19 Q Okay. And you don't know how it would have gotten dropped off? It
20 would have been in the grants management office versus the program officer office?

21 A I don't know how it would have gotten dropped off.

22 Q Okay. I want to introduce majority exhibit 10.

23 [Erbelding Majority Exhibit No. 10
24 was marked for identification.]

25 BY MR. BENZINE:

1 Q And I think we've maybe discussed around the outside of this one, but we'll
2 talk about it now.

3 It's an email chain with Dr. Auchincloss and Dr. Fauci on it. And Dr. Auchincloss
4 writes to Dr. Fauci, "The paper you sent me says the experiments were performed before
5 the gain of function pause but have since been reviewed and approved by NIH. Not sure
6 what that means since Emily is sure that no Coronavirus work has gone through the P3
7 framework. She will try to determine if we have any distant ties to this work abroad."

8 First, are you the Emily that he is referring to here?

9 A Yes. I believe I am, yes.

10 Q Do you recall Dr. Auchincloss asking you to review any papers to see if it
11 would have been P3 eligible?

12 A I do recall.

13 Q Which paper did he ask you to review?

14 A I believe it was a Nature Communications paper from -- well, sometime
15 before 20-- I mean, the pause was around 2016. So it was, I think, probably a few
16 years -- the work was probably done a few years before that.

17 And I believe it was a collaboration between Ralph Baric -- I don't know who the
18 first author was. But the collaborator -- the scientist, Dr. Shi, from Wuhan Institute of
19 Virology, was listed as a coauthor. I recall that much. I know it was about
20 coronaviruses.

21 Q Coronaviruses.

22 He wrote that you're sure that no coronavirus work has gone through the P3
23 framework. What did you do to be sure of that? Like, do you have a record of what
24 you refer up? Do you have a record of what your DURC committee reviews?

25 A So we were talking about the HHS-convened committee. So that examines

1 enhanced -- work that would -- that might meet the definition of enhanced pathogen
2 pandemic potential.

3 And the only grants that we went forward for review were high path avian
4 influenza grants. I knew that. I mean, it's now posted on the ASPR website. I don't
5 know if it was at the time of this email.

6 Q And then he writes, "She," meaning you, "will try to determine if we have
7 any distant ties to this work abroad."

8 Did you make a determination?

9 A I believe I -- yeah, I went back to the grants, and I think we believed that all
10 of the virus work was done in Ralph Baric's lab, which is in North Carolina. So I believe
11 that's what we concluded, to the best of my recollection now.

12 Q Did Dr. Auchincloss ever give you any context for this request?

13 A Well, there was -- I think there was a media splash, let's just say.
14 Somebody in the media landed on this paper. I think that's what happened. And he
15 asked me to look into what the facts really were.

16 Q Okay. There wasn't concern about NIH funding coronavirus work abroad?

17 A I don't recall that that was in the discussions at that time.

18 Q At that time? Were there ever discussions regarding --

19 A Well, later. I mean, when people focused on Wuhan Institute of Virology
20 being an EcoHealth Alliance collaborator.

21 Q Did Dr. Auchincloss ever express any concern regarding the potential origins
22 or a laboratory accident of a coronavirus?

23 A Did he express concern? No.

24 Q Okay. Not when he asked you to do this?

25 A No.

1 Q Did you ever follow up with -- did Dr. Auchincloss ever follow up with you
2 regarding this?

3 A I think we had subsequent discussions, yes.

4 Q And what were those?

5 A What -- the grants that the authors cited, what was actually involved in the
6 work, and what -- where the coronavirus work was done, which I think I indicated I
7 believe it was done in North Carolina, not in anywhere in Asia. So we had those
8 follow-up discussions, but I don't recall more than that.

9 Q Okay. Did you ever have any discussions with Dr. Fauci about your
10 determination or review of that paper?

11 A He might have been involved in my discussions with Dr. Auchincloss. There
12 might have been a discussion with both of them. I don't remember.

13 Q Okay. Do you recall when the kind of -- like, did that discussion occur
14 before February 1st or after February 1st?

15 A Well, it was definitely after February 1st. Like, there was the request to
16 read this paper and tell us what the grants that they cited proposed to do on Saturday.
17 Sunday was Super Bowl weekend. So I remember that. I don't think we had
18 discussions on Sunday.

19 But in the course of the next week there were more discussions about exactly the
20 details of the grants and the details of what we thought were the collaborations among
21 the coauthors.

22 Q Do you ever recall -- in the post-February 1st discussions, do you ever recall
23 Dr. Fauci mentioning anything about gain-of-function happening in the Wuhan Institute of
24 Virology?

25 A No.

1 Q No? Do you ever recall him mentioning a call that he had with Jeremy
2 Farrar and a couple others on February 1st?

3 A No.

4 Q No?

5 A I mean, I heard about -- it was in -- a lot of discussion happened later, but at
6 the time I did not get any -- I certainly didn't hear about it from Dr. Fauci.

7 Q Okay. Thank you.

8 Mr. Strom. You said you were asked to sort of look into what the facts were.

9 Do you recall what you did after -- like, how you went about determining the
10 research ties between EcoHealth and the WIV?

11 Dr. Erbelding. So my first step -- I kind of have methods here -- to look at the
12 paper itself, look at the resources that they cite, which usually is a contract number or a
13 grant number if it is funded by us.

14 And then I look at what the proposal in that grant was meant to -- what they
15 proposed to do and try to ascertain what the relationship was between the collaborators.

16 Sometimes they're co-investigators listed on a grant, and sometimes they're not
17 because the relationship is established after the grant is funded -- or after the grant is
18 written, I guess you'd say.

19 Mr. Benzine. I'd like to shift gears then and introduce majority exhibit 11.

20 [Erbelding Majority Exhibit No. 11
21 was marked for identification.]

22 Mr. Benzine. While you're flipping through it, this is a letter from Dr. Lauer to
23 EcoHealth from July 23rd, 2021. And in it there's a lot, and it continues to request in
24 order to review the WIV's records validating certain expenditures and monitoring safety
25 and financial specifics.

1 But then also on the second page indicates that EcoHealth has not submitted their
2 year 5 annual report yet.

3 Ms. Ganapathy. Sorry. Can you just point to what part you're talking about?

4 Mr. Benzine. It says, number 2, "Reports."

5 Ms. Ganapathy. Okay.

6 BY MR. BENZINE:

7 Q "We are also writing to notify you that a review of our records for R01
8 indicates that EcoHealth Alliance is out of compliance with requirements to submit the
9 following reports," a financial report and then the Interim Research Performance Progress
10 report.

11 A Okay. I see the paragraph you're referring to.

12 Q Were you involved at all in the drafting of this letter?

13 A No.

14 Q When did you first learn that the year 5 report was late?

15 A I believe I learned of it when it came in, which was about a month after the
16 date on this letter.

17 Q By the time this letter was sent, the report was 22 months late. Is that
18 common?

19 A No. I think -- and I think that people have asked why that is, and I believe
20 because it was suspended, which was in April of 2020, the system cue for program
21 officers to hear that their grantee has passed the deadline, something about that wasn't
22 working because it was terminated, suspended, whatever. So Erik Stemmy didn't nudge
23 Peter Daszak or whatever he would have ordinarily done because he didn't recognize the
24 lateness of year 5.

25 Q I just -- I find it -- I struggle to believe that, like, after 12 months, after 18

1 months, after 20 months, like, you're not like, "Whoa. Maybe this is late." And Dr.
2 Stemmy notifies his superiors and you start compliance efforts. Like, beyond a system
3 notifying you, it's kind of just human nature to be like, well, the report is due end of fiscal
4 year. It's now April. I mean, at that point, it was already 4 months late.

5 So would he have not gotten a notification that it was 30 days late, 60 days late,
6 90 days late, 120 days late?

7 A Yeah, I heard -- I mean, I'm telling you what I heard, that the system cueing
8 wasn't working because of the suspension of the grant. Like, whatever the switch was
9 that was flipped with that action, the cueing stopped.

10 Q When a grant is suspended, does the prime awardee no longer have to
11 comply with the terms of the grant?

12 Ms. Ganapathy. After a grant is suspended, the grantee --

13 Dr. Erbelding. I don't know. It's such an irregular occurrence. I don't know
14 what the requirements become.

15 BY MR. BENZINE:

16 Q But, I mean, you would theoretically know, if a grant is suspended or
17 terminated and there is outstanding work product, does the prime awardee still have to
18 submit the work product?

19 A I don't know what NIH requires in the case of a terminated grant.

20 Q Okay.

21 So they submitted the year 5 progress report on August 3rd, and that's when you
22 became aware that it was late?

23 A Sometime during that -- subsequent to that.

24 Q Who told you?

25 A I think Erik Stemmy did, I think, as I recall, or maybe his branch chief.

1 Somebody who was in the Respiratory Disease Branch if not Erik Stemmy.

2 Q Have you reviewed the progress report since?

3 A No.

4 Q No?

5 A I mean, I've had the pieces of paper, but I haven't looked at any detail.

6 Q Okay. So one of the -- I'll avoid introducing an exhibit and giving you more
7 paper if the answer is "I don't know."

8 A Thank you.

9 Q One of the claims from Dr. Lauer and EcoHealth is Dr. Lauer claims the year 5
10 report had an experiment that exhibited greater than 1 log growth. EcoHealth is
11 claiming it was also in the year 4 report, but NIH's position, as Dr. Lauer has told us, is that
12 those are two separate and distinct experiments.

13 Have you reviewed those grants to make a determination for yourself whether or
14 not those are two different experiments?

15 A Have I reviewed the reports?

16 Q Or the progress reports.

17 A I have not.

18 Q Okay. Doctor -- it's probably the same answer -- but Dr. Daszak testified
19 that when he got asked about whether or not they were different experiments or the
20 same experiment, he called Dr. Shi at the Wuhan Institute of Virology and asked her
21 whether or not they were two separate experiments, and she assured him that it was just
22 one.

23 Are you -- were you previously aware of that?

24 A No.

25 Q Dr. Daszak also testified that the majority of the progress reports are written

1 by the subgrantees. Is that common?

2 A I would anticipate that, if they did the work, they would draft it, and it would
3 be reviewed and edited by other investigators. That would be what I would anticipate
4 would happen.

5 Q Okay. So it wouldn't be necessarily uncommon for -- if work was
6 conducted at the Wuhan Institute, those scientists draft that portion of the report, and
7 the prime awardee then edits their portion?

8 A I would think that would be a common approach.

9 Q Okay. We've talked a little bit about the lab notebooks that Dr. Lauer
10 requested and have not been provided to the NIH.

11 What would be in a lab notebook like that stereotypically?

12 A Well, I don't know if they actually have notebooks or if they have electronic.

13 Q Yeah.

14 A I'm sort of imagining it's computerized. Maybe it's an electronic notebook.

15 Whatever their measure is of a virus over time in the mouse experiments, I would
16 imagine that those data -- you know, dates, time that the mice were inoculated, virus
17 titers -- over time, I imagine that those -- I assume they're printouts from some sort of a
18 reader, an electronic reader -- would be in the lab notebook.

19 Probably things for the mouse experiments like -- you know, mice have a
20 pedigree. So what the names -- the names? -- the serial numbers of the mice are and
21 probably the sequences of the viruses because over time you have to follow those.

22 Q Would that data help NIH or NIAID determine whether or not it was one or
23 two experiments or whether the experiment violated the 1 log policy?

24 A It should be -- you should be able to determine whether -- because it's
25 never -- even if it was -- I mean, they would have been done on a different date

1 presumably. That would make sense. And you never have exact numbers that would
2 be exactly the same, even if they were similar experiments. So, yes, I believe that they
3 would.

4 Q So Dr. Lauer asking for those notes, electronic or otherwise, to kind of verify
5 EcoHealth's claims is not, like, scientifically inaccurate.

6 A I agree.

7 Q Okay.

8 A Yeah. It wouldn't be an obvious dead-end. I think that's what you mean.

9 Q Well, I'm saying like --

10 A It might help clarify a situation in a discrepancy in the progress reports.

11 Q Thank you. Yes. That's what I was asking.

12 When Dr. Lauer -- he's asked for the notebooks a couple times. We've already
13 discussed EcoHealth hasn't produced them. And it is EcoHealth's responsibility to
14 produce them when requested. Is that correct?

15 A [Nonverbal response.]

16 Q You have to give an audible answer.

17 A Yes. Oh, I'm sorry. Yes.

18 Mr. Strom. Should EcoHealth have already had the lab books, like, in their
19 possession or more of the underlying data in their possession when they submit -- just
20 when they submit the annual progress report?

21 I guess we're struggling with he's sort of taking his collaborators and subgrantees
22 at their word that this is what they did, and then he's submitting this progress report.
23 It's sort of nonverifiable from his standpoint.

24 Dr. Erbelding. Right. I mean, I think it's common for laboratory-based
25 collaborations when people are in different parts to have access to a common repository

1 of data like a box or -- so that everybody that has -- that should have rights to access can
2 look at them and interpret the data. So it sounds like --

3 Mr. Strom. So if he didn't have that, it would be a concern?

4 Dr. Erbelding. It sounds like he didn't have access, or maybe he did at one time
5 and it was taken away. You know, I don't -- he didn't have access at the time that he
6 was expected to produce the data for Dr. Lauer.

7 BY MR. BENZINE:

8 Q EcoHealth's excuse, if you haven't seen, is -- and I'm quoting from a
9 letter -- "We do not have copies of those which were created and retained by the Wuhan
10 Institute of Virology. Nonetheless, I have forwarded your letter to the Wuhan Institute
11 of Virology and will let them know their response" -- "will let you know their response as
12 soon as they respond to our request."

13 Is that kind of common? That feels, like John was saying, kind of a shirking of
14 their oversight responsibility. Is that a common approach? Or like you just said,
15 should they have had access to the data originally?

16 A Well, I think sharing of data is often the standard. In this particular case,
17 everything is uncommon and irregular. So I don't know what to say in response to that.

18 Q Is it kind of surprising that EcoHealth would say, we just forwarded your
19 letter to the Wuhan Institute and they said no, so you don't get it?

20 A I don't know what the relationship was between him and his collaborators at
21 that time. I don't know what the relationship was between the scientists and the
22 Government of China at that time. So I can't speak to what he's saying as being
23 reasonable or anything.

24 Q But, again, it would be his -- it's his duty to provide the notebooks?

25 A It's the prime grantee's responsibility, yes.

1 Mr. Benzine. All right.

2 Do you have more on this?

3 BY MR. STROM:

4 Q Yeah. So just before we get too far down the road, on the delayed year 5
5 report, EcoHealth has claimed -- I think OIG has looked into this, Dr. Lauer has looked into
6 this -- that they were locked out of the system when they attempted to submit their year
7 5 progress report in a timely fashion. Something to do with how the renewal was
8 processed and backdated to continue funding.

9 Has that, to your knowledge, happened to anybody else? I mean, you got 1,400
10 grants a year.

11 A I haven't heard of that before, no. This is the only one that -- well, it's not
12 the only one. But the suspension is the irregular circumstance here.

13 Q But you haven't -- this is prior to the suspension. This would have been in
14 2019.

15 A Oh, you're right.

16 Q But you're not aware of other grantees having a problem uploading an RPPR
17 to the eRA Commons?

18 A I have not heard that as a problem before, no.

19 Q Okay. Do you have any issues with grantees reporting that the eRA
20 Commons altered or modified the grant documents in an automatic fashion?

21 A No.

22 Q Real quickly. And these are just related to some remarks -- some
23 exchanges earlier.

24 You mentioned that the Office of Biodefense at NIAID is involved in the P3CO
25 DURC committee. Could you elaborate on their involvement?

1 A So the Office of Biodefense and Translational Research Resources in my
2 division, that's what you're --

3 Q I think so, yes.

4 A There's program officers who have training in virology and drug
5 development primarily who do have grants on antiviral drug development. And
6 sometimes -- and some of those -- some of the science proposed has been discussed with
7 regard to whether or not it would be a pathogen -- involve a pathogen of pandemic
8 potential or an ePPP. So they participate in those discussions.

9 Q Okay. And then in those meetings is it typical for the participants to, like,
10 weigh the cost-benefits of the proposed experiment? I know it's already been scored.
11 It's already been reviewed. But as I understand it, in the scientific community,
12 there's -- well, okay. This experiment has certain risks, but the risks are worth it because
13 of the potential knowledge gain.

14 Is that done at those meetings?

15 A No. We don't weigh -- I mean, if it was PPP or ePPP proposed or something
16 close that we couldn't determine, if there wasn't a consensus surrounding those
17 definitions, we would recommend that the package go forward for review by the
18 HHS-convened committee.

19 Q Okay.

20 A And they do have, on their criteria list, social value or scientific value.

21 Q Sure. Social value.

22 A But we don't -- that doesn't impact our decisions.

23 Q And then are there minutes kept of these meetings?

24 A There's agendas, and there's action items. Minutes recorded, like who said
25 what.

1 Q Yeah. Even just roughly -- like a rough transcript.

2 A They're not transcripts. They're like actions to be taken sort of as minutes.

3 Q Okay. But nothing on the -- like, so-and-so brought this -- you know,
4 summarizing what took place at the meeting, almost like a --

5 Ms. Ganapathy. Are there meeting minutes in the conventional sense of the
6 term, to your knowledge?

7 Mr. Strom. Yeah.

8 Dr. Erbelding. There's an agenda that has names of program officers. You've
9 seen that because it's in one of your exhibits here.

10 Ms. Ganapathy. To your knowledge. If you --

11 Dr. Erbelding. The minutes do not describe -- the notes that are taken do not
12 describe who said what.

13 Mr. Strom. Okay.

14 Ms. Ganapathy. And the notes, is that the action items you mentioned earlier?

15 Dr. Erbelding. Action items.

16 Mr. Ganapathy. Okay. Yeah.

17 BY MR. BENZINE:

18 Q Are there assignments to the action items?

19 A For individuals to take action? It's almost always the program officer that
20 has to go get more information.

21 Q Okay.

22 A And if there's -- if we decide that we want to put it forward for review, and if
23 the investigator that applied for that grant or is in charge of that project agrees that they
24 want to and they're not going to modify their experiments, then there would have to be a
25 letter generated back to the institution, and that would be the exec secretary that would

1 write that letter.

2 Q Is there an attendance list for each meeting?

3 A I believe there is now. I don't believe that was always operational.

4 Q Okay.

5 Mr. Slobodin. Just to confirm or to clarify, so what you seem to be describing is
6 that there is no documentation for how the consensus of the committee is arrived at on a
7 given question about whether a research proposal is subject to P3CO framework. Is that
8 correct?

9 Ms. Ganapathy. I think that's not correct. She said there is action items --

10 Mr. Slobodin. The documentation of the decision. The reasoning. Not
11 so-and-so was in attendance, we discussed this grant. But we decided that research
12 proposal A, B, and C is not subject to the P3CO framework because, one, the viruses
13 weren't a threat to human health, or two -- you know, et cetera, et cetera.

14 Is there documentation or not documentation on that -- on these determinations
15 of whether or not there's an ePPP involved?

16 Dr. Erbelding. There is documentation. I mean, the inference would be, if
17 there is an ePPP involved, the action would be to move it forward for review by an
18 HHS-convened committee.

19 The reasoning for not moving something forward or for not taking that action is,
20 to my knowledge, not in the -- recorded in any --

21 Mr. Slobodin. So there's documentation for yes, but no documentation for no.
22 The question is, is it subject to P3CO?

23 Dr. Erbelding. The reason isn't described, to my knowledge.

24 Ms. Ganapathy. I also just -- I didn't mean to jump in there, but I just thought
25 you misframed it. But I didn't mean to answer the question for the witness.

1 Apologies.

2 Mr. Slobodin. Sure.

3 BY MR. STROM:

4 Q So you also mentioned, I think it was maybe in the first hour, that foreign
5 IBCs have to be registered with NIAID or NIH. I can't tell from my notes which one is the
6 case. Could you elaborate on that process a little bit?

7 A I think it's all. I don't think it's just foreign.

8 Q Okay.

9 A I think any institutional biosafety committee in an institution that receives
10 NIH grant or contract funding, I believe, has to meet a certain standard to be certified.
11 That's my --

12 Q Sure. Do you know what office that would fall under?

13 A Not off the top of my head, no.

14 Q And do you have a sense of what that registration process entails?

15 A No.

16 Q One thing that would help me would be to try to get a better understanding
17 of the division of labor on this issue, but also more generally as it may apply, between
18 sort of your office and then Dr. Lauer's office, because there seem to be instances where
19 you guys were sort of working at cross-purposes.

20 So how is an issue that would be handled by Dr. Lauer's office -- do they reach out
21 to you guys if they're the originator of the concern or the person -- the concern was
22 raised to them? Is there a process for sort of initiating that review?

23 A You're talking about grants in general?

24 Q Yes.

25 A Well, if they got a report of a problem with an NIAID grant, then, yeah, I

1 think they would refer the matter to NIAID for follow-up.

2 Q Do they have access to NIAID's grant files?

3 A Yes.

4 Q Okay. So they're able -- they have their own sort of log-ins and things like
5 that?

6 A I believe so, yes.

7 Q Okay. And then I guess I can make this an exhibit here. But there's a
8 couple of instances where, during the time that the review was going on and EcoHealth is
9 not, as we realized, not in compliance. This is just a 1-page exhibit. It's an email from
10 May of 2020 from Peter Daszak to you. Excuse me. An email exchange.

11 [Erbelding Majority Exhibit No. 12
12 was marked for identification.]

13 BY MR. STROM:

14 Q So this is May of 2020. So this is right after the grant's been suspended.
15 EcoHealth hasn't assuaged Dr. Lauer's concerns.

16 And if you look at the second email -- so the lower email on that page -- you note
17 that there's a new funding opportunity that would allow EcoHealth to continue progress
18 under another grant number.

19 So that's why I ask sort of the division of labor here because it seems like, on one
20 hand, Dr. Lauer is going through this review process and has some concerns about things
21 like the OIG highlighted as well as the documentation. And then on the other hand,
22 there's a couple other instances where you or Dr. Stemmy are actively pointing EcoHealth
23 into new funding opportunities.

24 So if you can elaborate on that or help me understand the different roles of the
25 offices, that would be helpful.

1 A Well, we point every scientist that comes to us to funding opportunities that
2 we think they might be competitive for or be interested in. So I think my
3 communication on that front was just, "Hey, we have, in case you haven't seen it, this is a
4 highly -- probably a highly competitive announcement that's out there, and you should
5 look at it." That was probably all I was saying.

6 I don't think -- I mean, I think that they were, at the time, planning to respond to
7 Dr. Lauer's -- to Dr. Lauer's compliance, to satisfactorily address the issues of
8 noncompliance that he asked them to. And, I mean, that was a separate domain from
9 what NIAID would have been interested in in terms of moving science forward.

10 So does that answer your question?

11 Q Yeah, I think so. It's just because at other times -- there's no reason you
12 should remember this -- but Dr. Stemmy will say, "Well, I've been told" -- this is to
13 EcoHealth and Dr. Daszak -- "you've got to -- your communications should be through Dr.
14 Lauer's office now."

15 And so I was just wondering if, as often happens when people are under sort of
16 investigational review, is there an, "Okay, this is sort of frozen, we're handing it away
17 from the program officer to Dr. Lauer's office as the point of contact"?

18 A The point of contact for compliance on the R01 grant, the one that had been
19 suspended, he was not deemed ineligible for other funding opportunities, which was
20 what he was telling us about, and I was pointing him to a specific funding opportunity
21 announcement.

22 Q Okay. Thank you.

23 Go ahead.

24 BY MR. BENZINE:

25 Q I think we're pretty close. Some, like, baseline questions before I forget to

1 ask them.

2 Do principal investigators or researchers generally routinely publish every virus
3 they sequence or collect?

4 A I think they're encouraged to share data on publicly accessible databases
5 whenever possible.

6 Q But there's --

7 A I don't know if there is a regulation that requires everything. And it's in a
8 certain period of time, too. You know, it might be -- they publish the primary work that
9 they were funded to do, and then they make available the sequences for sharing publicly.

10 Q One of the questions we get a lot when looking at the origins of this virus is,
11 well, there wasn't any published -- there weren't any published viruses that could have
12 possibly been a parental strain of COVID-19.

13 Would it be possible that someone -- you just said there's a time gap -- possible
14 that someone sequenced, experimented on, did whatever to a virus in the fall of 2019
15 that would still today not be published?

16 Ms. Ganapathy. Is it -- sorry. Is it possible?

17 Mr. Benzine. Yeah.

18 Dr. Erbelding. It's possible.

19 BY MR. BENZINE:

20 Q Okay. The same question. Do principal investigators or researchers
21 routinely publish every experiment that they conduct?

22 A No.

23 Q And then, in your experience, do principal investigators start -- preliminarily
24 start work prior to getting a grant from a funding agency? Do they submit preliminary
25 data with their proposal?

1 A Yes. I mean, they don't have to, but it makes it -- it makes it more likely
2 that the reviewers are going to take their proposal seriously if they have pilot data to back
3 up the concept of what --

4 Q What kind of data would they start with?

5 A It depends on the experiments that they want to do.

6 Q But it would be the kind of, like, common approach to start some of the
7 work, prove that you're capable of doing it, propose it --

8 A Right.

9 Q -- and then get funding?

10 A Yes.

11 Mr. Benzine. Okay. I have a few at the very end, but they're not -- they're
12 outside this kind of line. So if you have some, you can go.

13 BY MR. STROM:

14 Q So when EcoHealth said that they were locked out of the NIAID system, I
15 believe Dr. Lauer did a forensic audit to try to verify that that was the case.

16 Have you -- has NIAID done anything similar to understand how you could sort of
17 lose track of the year 5 progress report for a 2-year period?

18 A I don't understand the question.

19 Q So Dr. Lauer ran a forensic audit to determine whether or not he could verify
20 that EcoHealth was locked out.

21 A Okay.

22 Q Have you sought any sort of, like, accounting as to why NIAID or as to why
23 your division wasn't -- you weren't able to determine that the year 5 was missing for 22
24 months? Like, why it didn't come to your attention sooner. I believe you described
25 some sort of after-action review.

1 A I believe it was actually done by Dr. Lauer's office.

2 Q Okay.

3 A I believe -- because it's an NIH-wide system. It's not -- the grants and
4 reports coming in are in an NIH system, not a NIAID-specific system.

5 Mr. Slobodin. But what's your understanding of why the program officer, Dr. Erik
6 Stemmy, didn't know in 2019? The deadline for the year 5 report was September 30th,
7 2019.

8 Now, I understand there were issues maybe involving -- later on when Dr. Lauer's
9 office got involved, and there was a proposed determination that was later turned into
10 reinstatement. That ended, and then that turned into a suspension. It sounds like that
11 impacted things in the system.

12 But from the end of September 2019 until April of 2020, why didn't he know
13 during that interval that it was late?

1 [1:54 p.m.]

2

3 Ms. Ganapathy. Are you asking about process issues that could have led to that,
4 or are you asking about Dr. Stemmy's knowledge, because she couldn't supply the latter.

5 Mr. Slobodin. Well, I want her to understand our question.

6 Our question is that this report didn't wind up getting actually submitted to NIH
7 until nearly 2 years after the deadline.

8 So you've just told us that part of the problem was the suspension status, and
9 somehow that did something in the system that switched it off, or somehow led it not to
10 be detected, that the year 5 progress report had been submitted. But that doesn't
11 account for the entirety of the 22 months that elapsed before it had been submitted. It
12 accounts for a good chunk of it, but there is a couple of months at the beginning before
13 the Office of Extramural Research was sending letters impacting the EcoHealth grant.
14 There was an interval where, you know, there was no switch.

15 Ms. Ganapathy. Just --

16 Mr. Slobodin. Just trying to understand. First of all, did you even -- do you
17 understand what I'm talking -- do you understand --

18 Ms. Ganapathy. Is the time period you're asking about fall of 2019 until the
19 suspension?

20 Mr. Strom. It's about a 7-month period between --

21 Mr. Slobodin. Right.

22 Mr. Strom. -- when the report is due --

23 BY MR. SLOBODIN:

24 Q So the switching off because of the compliance actions don't fully account
25 for the delay. So we're asking: Well, what is your understanding of why, and what's

1 the story with the first couple of months?

2 A So it's not due at the last day of the grant. It's due 120 days later, but there
3 is still --

4 Q Right.

5 A -- a few months in there.

6 Q Which turned out to be, in this case, September 30th, 2019. They had
7 gotten renewed. They had gotten their money. They got their R02?

8 A R01. R01.

9 Q Well, no. They -- this R01 was renewed.

10 A Yes.

11 Q Because R02 --

12 A It's still an R01. It's still an R01. It's just a different year.

13 Q All right. Sometimes it's O6 or whatever. But, in any event, whatever the
14 numbering is, what's -- what's the source?

15 A So I'm --

16 Ms. Ganapathy. Just so there is an accurate record, can you just, like, rephrase
17 the question present with the time period precisely, because there is a lot in there.

18 Mr. Strom. From 120 days after the grant ends, when the report is due, which is
19 September, until April, when it's suspended, that's a 7-month, give or take, period.

20 How did Dr. Stemmy -- what is your understanding of how Dr. Stemmy missed
21 that?

22 Dr. Erbelding. So, grant -- I don't think any program officer actively -- I think they
23 wait for cues, which I think the system is supposed to cue them, and I just relayed to you
24 that I believe the system didn't cue him. I can't explain the reason why.

25 Most program officers have -- you know, they might have 100 grants in their

1 portfolio, so they don't actively ping the investigators if they happen to miss a deadline,
2 because they rely upon a system telling them to.

3 Mr. Benzine. Do you know when the first cue was supposed to happen?

4 Dr. Erbelding. I don't know. It's knowable, but not by me at this time.

5 Mr. Slobodin. But you had a situation beginning in 2020 where this -- you know,
6 the beginning of the pandemic where suddenly this EcoHealth grant had new visibility,
7 and Dr. Fauci had to brief Senators, and you were part of a group of senior officials at
8 NIAID trying to get him background information very quickly about the EcoHealth grant.

9 So I'm trying to understand: How is it -- and that was one instance, and we could
10 pick two other instances, you know, later on after The Washington Post column comes
11 out, after the White House press conference, the termination. NIAID was busy drilling
12 down trying to get information about the EcoHealth grant.

13 I'm trying to understand: With such an intensive search to get background
14 information on this grant, how is it that nobody knew that the year 5 report hadn't even
15 been submitted?

16 Ms. Ganapathy. If you -- to the extent --

17 Dr. Erbelding. I don't have a response to that. I don't even recall those events
18 that you -- I don't think a Senator asked Dr. Fauci specifically about progress on the
19 EcoHealth Alliance grant. I don't recall that happening.

20 Mr. Slobodin. Well, okay.

21 BY MR. STROM:

22 Q Just to be clear, we're saying, in the process of arming Dr. Fauci with facts,
23 Dr. Collins to talk about the kind of research -- the coronavirus research that, you know,
24 NIH was involved with in China, presumably somebody at NIAID is going back into the
25 grant file to say, Okay, what are they up to, so that I can accurately say, This is what this

1 grant does. And it's just -- it's kind of extraordinary to us that you wouldn't notice the
2 most recent -- not you -- you as a -- collectively at NIAID wouldn't notice that the most
3 recent progress report is missing. And if you don't know --

4 A I don't have a response to that.

5 Q -- you don't know. So you just don't -- you don't know?

6 A I don't know.

7 Q Okay.

8 Mr. Strom. Thank you.

9 Mr. Benzine. Do you guys have anything else?

10 Mr. Strom. No, that's fine.

11 BY MR. BENZINE:

12 Q I'm going to ask you a couple of last questions.

13 At any point since the beginning of the pandemic -- so we'll say January-ish --

14 A 2020.

15 Q January 2020, were you contacted by the intelligence community to assist
16 with their assessments and their review of the origins?

17 A No.

18 Q At any point, did you receive or take part in any classified briefings regarding
19 the Wuhan Institute of Virology, EcoHealth, or the origins?

20 A No.

21 Q It's been publicly suggested that Dr. Daszak and/or EcoHealth have a
22 relationship with the intelligence community. Do you have any knowledge about that?

23 A No.

24 Q Okay.

25 Mr. Benzine. I'm good. We can go off the record.

1 [Whereupon, at 2:01 p.m., the interview was concluded.]

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Certificate of Deponent/Interviewee

I have read the foregoing ____ pages, which contain the correct transcript of the answers made by me to the questions therein recorded.

Witness Name

Date