

1 HOUSE COMMITTEE ON OVERSIGHT AND REFORM

2 UNITED STATES HOUSE OF REPRESENTATIVES

3 WASHINGTON, D.C.

4 SELECT COMMITTEE ON CORONAVIRUS CRISIS

5 INTERVIEW

6 INTERVIEW OF: DR. HUGH AUCHINCLOSS

7 WEDNESDAY, DECEMBER 20, 2023

8 The interview in this matter was held at O'Neill House Office  
9 Building, 200 C Street, S.W., Room 5480, Washington, D.C., commencing  
10 at 10:02 a.m.

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102 P R O C E E D I N G S

103 MR. BENZINE: This is a transcribed interview of Dr. Hugh  
104 Auchincloss conducted by the House Select Subcommittee on the  
105 Coronavirus Pandemic, the Committee on Oversight and Accountability  
106 and the Committee on Energy and Commerce under the authority granted  
107 to them by House Resolution 5, House Rule 10, and the rules of the  
108 Committee on Oversight and Accountability and the Committee on Energy  
109 and Commerce.

110 This interview was requested by Chairman Brad Wenstrup,  
111 Chairman James Comer, Chairman Cathy McMorris Rodgers, Chairman Morgan  
112 Griffith, and Chairman Brett Guthrie as part of the Committee's  
113 oversight of the Federal Government's response to the Coronavirus  
114 Pandemic.

115 Pursuant to House Resolution 5, the Select Subcommittee has  
116 wide-ranging jurisdiction, but specifically to investigate the origins  
117 of the Coronavirus Pandemic, including but not limited to the Federal  
118 Government's funding of gain-of-function research and Executive Branch  
119 policies, deliberations, decisions, activities, and internal and  
120 external communications related to the Coronavirus pandemic.

121 Pursuant to House Rule 10, the Committee on Oversight and  
122 Accountability has jurisdiction to investigate any matter at any time,  
123 and pursuant to House Rule 10 and 11, the Committee on Energy and  
124 Commerce has jurisdiction for public health service agencies,  
125 including the National Institutes of Health and the entities it funds  
126 as well as federal biomedical research and development.

127 Can the witness please state his name and spell his last  
128 name for the record.

129 THE WITNESS: My name is Hugh Auchincloss, and the spelling  
130 of the last name is A-U-C-H-I-N-C-L-O-S-S.

131 MR. BENZINE: Thank you.

132 Dr. Auchincloss, my name is Mitch Benzine and I am the  
133 staff director for the Majority staff of the Select Subcommittee. I  
134 want to thank you for coming in today. We recognize that you're here  
135 voluntarily and appreciate that.

136 Under the Select Subcommittee and Committee on Oversight  
137 and Accountability's rules, you are allowed to have an attorney  
138 present to advise during this interview. Do you have an attorney  
139 representing you in a personal capacity with you today?

140 THE WITNESS: I do not.

141 MR. BENZINE: Is there an attorney present representing  
142 your employer?

143 THE WITNESS: Yes.

144 MR. BENZINE: Will counsel identify themselves.

145 MS. GANAPATHY: Tara Ganapathy, senior counsel, HHS.

146 MR. BENZINE: For the record, starting to my left, will the  
147 rest of the individuals in the room please introduce themselves, name,  
148 title, and affiliation.

149 CONGRESSMAN JORDAN: Jim Jordan, Ohio 4.

150 MR. STROM: John Strom, Senior Counsel, House Energy and  
151 Commerce, Majority, Subcommittee on Oversight and Investigations.



152 MR. SLOBODIN: Alan Slobodin, Chief Investigative Counsel,  
153 House Energy and Commerce Committee, staff oversight.

154 MR. OSTERHUES: Eric Osterhues, Chief Counsel, Select  
155 Subcommittee on the Coronavirus Pandemic, Majority staff.

156 MR. CIPOLLONE: Joseph Cipollone, Counsel on the Select  
157 Subcommittee on the Coronavirus Pandemic, Majority.

158 [REDACTED] [REDACTED] Senior Counsel, House  
159 Energy and Commerce Subcommittee on Oversight and Investigations,  
160 Minority.

161 [REDACTED] [REDACTED] Chief Counsel, Energy and  
162 Commerce Committee, Subcommittee on Oversight and Investigations,  
163 Democratic staff.

164 [REDACTED] [REDACTED] Democratic Staff Director of  
165 the Select Subcommittee.

166 [REDACTED] [REDACTED] Democratic counsel.

167 [REDACTED] [REDACTED], Democratic Senior Counsel, Select  
168 Subcommittee.

169 MS. COOK: Marta Cook, Senior Advisor for Oversight, NIH.

170 MS. BERSTELL: Daria Berstell, Office of the Assistant  
171 Secretary of Legislation, HHS.

172 MR. BENZINE: Thank you all.

173 Dr. Auchincloss, before we begin, I'd like to go over the  
174 ground rules for the interview. The way this interview will proceed  
175 is as follows:

176 The Majority and Minority staff will alternate asking you

177 questions one hour per side per round until each side is finished with  
178 their questioning. The Majority staff will begin and proceed for an  
179 hour and then the Minority staff will have an hour to ask questions.  
180 We will then alternate back and forth in this manner until both sides  
181 have no more questions. If either side is in the middle of a specific  
182 line of questions, they may choose to end a few minutes past an hour  
183 to ensure completion of that specific line of questioning, including  
184 any pertinent followups.

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

187           There is a court reporter taking down everything I say and  
188 everything you say to make a written record of the interview. For the  
189 record to be clear, please wait until the staffer questioning you  
190 finishes each question before you begin your answer and the staffer  
191 will wait until you finish your response before proceeding to the next  
192 question.

193           Further, to ensure the court reporter can properly record  
194 this interview, please speak clearly, concisely, and slowly. Also,  
195 the court reporter cannot record nonverbal answers, such as nodding or  
196 shaking your head. So it's important that you answer each question  
197 with an audible verbal answer.

198           Exhibits may be entered into the record. Majority exhibits  
199 will be identified numerically. Minority exhibits will be identified  
200 alphabetically. Do you understand?

201           THE WITNESS: I do.

202 MR. BENZINE: We want you to answer our questions in the  
203 most complete and truthful manner possible. So we will take our time.  
204 If you have any questions or do not fully understand the question,  
205 please let us know and we will attempt to clarify, add context to, or  
206 rephrase our questions. Do you understand?

207 THE WITNESS: I do.

208 MR. BENZINE: If we ask about specific conversations or  
209 events in the past and you are unable to recall exact words or  
210 details, you should testify to the substance of those conversations or  
211 events to the best of your recollection. If you recall only a part of  
212 a conversation or event, you should give us your best recollection of  
213 those events or parts of conversations that you do recall. Do you  
214 understand?

215 THE WITNESS: I do.

216 MR. BENZINE: Although you are here voluntarily and we will  
217 not swear you in, you are required pursuant to Title 18, Section 1001  
218 of the United States Code to answer questions from Congress  
219 truthfully. This also applies to questions posed by congressional  
220 staff in this interview.

221 Do you understand?

222 THE WITNESS: I do.

223 MR. BENZINE: If, at any time, you knowingly make false  
224 statements, you could be subject to criminal prosecution. Do you  
225 understand?

226 THE WITNESS: I do.

227 MR. BENZINE: Is there any reason you are unable to provide  
228 truthful testimony today?

229 THE WITNESS: No reason.

230 MR. BENZINE: This Select Subcommittee follows the rules of  
231 the Committee on Oversight and Accountability. Please note that if  
232 you wish to assert a privilege over any statement today, that  
233 assertion must comply with the rules of the Committee on Oversight and  
234 Accountability. Pursuant to that, Committee Rule 16(c)(1) states for  
235 the chair to consider assertions of privilege over testimony or  
236 statements, witnesses or entities must clearly state the specific  
237 privilege being asserted and the reason for the assertion on or before  
238 the scheduled date of testimony or appearance.

239 Do you understand?

240 THE WITNESS: I do.

241 MR. BENZINE: Ordinarily, we take a five-minute break at  
242 the end of each hour of questioning, but if you need a longer break  
243 before that, please let us know and will be happy to accommodate;  
244 however, to the extent there is a pending question, we would ask that  
245 you finish answering the question before we take the break. Do you  
246 understand?

247 THE WITNESS: I do.

248 MR. BENZINE: Do you have any other questions before we  
249 begin?

250 THE WITNESS: I do not.

251 EXAMINATION BY THE MAJORITY

252 BY MR. BENZINE:

253 Q. I again want to thank you for being here and thank you for  
254 your work over multiple decades in public health. I want to start  
255 briefly just going through your education and experience up until now.

256 Where did you attend undergraduate school and what degree  
257 did you graduate with?

258 A. I attended Yale University and I received a B.A. and then a  
259 master's degree also.

260 Q. Was the master degree in any specialty?

261 A. In economics.

262 Q. And then where did you get your medical degree?

263 A. Harvard Medical School.

264 Q. Who is your current employer and your current job title?

265 A. I work of the National Institute of Allergy and Infectious  
266 Diseases, part of the National Institutes of Health. My position is  
267 principal deputy director at NIAID.

268 Q. Understanding day-to-days are probably wildly different,  
269 can you give us kind of like your stereotypical roles and  
270 responsibilities or what your day-to-day looks like?

271 A. In general, it's a little more than trying to keep the  
272 trains running on time, but that's the gist of the kind of  
273 responsibilities that I have. We have seven major divisions in our  
274 institute and dozens of freestanding offices, and my job is basically  
275 to coordinate the activities of those various activities.

276 Q. Is it more -- so we also talked to Mr. Folkers, who is the

277 chief of staff. How did you differentiate between your role and the  
278 chief of staff role?

279 A. So the word "chief of staff" was used in our office  
280 slightly differently from the way many people think of a chief of  
281 staff. Literally, he was the chief of the immediate staff to the  
282 director.

283 He assigned a variety of assignments, speaking assignments,  
284 etc. So he managed a group of maybe five or six people and made sure  
285 that everybody knew what their responsibilities were.

286 His responsibilities did not go outside the Office of the  
287 Director.

288 Q. So you're kind of more the stereotypical chief of staff of  
289 NIAID; is that fair?

290 A. I think that's a fair statement.

291 Q. All right. Thank you.

292 Do you currently hold any honorary and academic positions  
293 in addition to your government role?

294 A. No, I do not.

295 Q. What about any positions on boards of companies or  
296 nonprofits?

297 A. I do not.

298 Q. When did you become principal deputy director?

299 A. In 2006.

300 Q. And do you report directly to the director?

301 A. I do.

302 Q. There was a period of time you were acting director?

303 A. That is true, from January of 2023 to September of 2023.

304 Q. And as principal deputy director, are there decisions that  
305 you can make on your own, on your own autonomy?

306 A. Yes. There were decisions that I would make. If I thought  
307 they were important, I would bring them up to Dr. Fauci to make sure  
308 he was aware of them.

309 Q. Can you elaborate on kind of what the standard decisions  
310 that you're allowed to make on your own would be?

311 A. Oh, it would be a wide range of things. I'd hear from the  
312 division directors about things that they were pursuing, and I say  
313 that sounds reasonable and okay it.

314 Q. Could you make funding decisions on grants?

315 A. Yes, again, subject to review by Dr. Fauci if I felt he  
316 needed to see it, but for the most part -- let me clear -- no  
317 individual funding decision on a grant was made in the front office.

318 Q. Can you explain that a little bit?

319 A. The process of funding grants at NIH, as I think you know,  
320 involves, first of all, peer review and a score and then a review and  
321 council. So the decision to fund grants is really made through a  
322 process that ends up with the division directors. I am aware of what  
323 grants we're funding, but I don't actually review each individual  
324 grant to make a decision.

325 Q. When would a funding decision elevate to your level versus  
326 being done at the division level?

327 A. Very rarely, perhaps involving something that might be  
328 controversial from the point of view of the institute.

329 Q. To the best of your recollection, any funding decisions  
330 that you awarded a grant even though it didn't get an awardable score?

331 A. There was a process for paying above the pay line. It's  
332 called select pay. That was nominated by division directors, reviewed  
333 by council members, and approved by them. So there was a process for  
334 paying beyond the formal pay line.

335 So yes. Some grants would be paid above the stated cutoff.

336 Q. Were there any grant funding decisions that, in your  
337 experience, Dr. Fauci made?

338 A. None.

339 Q. You discussed a little bit of if it was -- if you deemed it  
340 an important enough or a big enough issue that you would elevate some  
341 issues to Dr. Fauci. Were there any decision points that only the  
342 director of the institute can make?

343 A. I'm sure I could have imagined some situations where I  
344 would not have made a decision without taking it to Dr. Fauci, but it  
345 would be pretty unusual that I wouldn't feel pretty comfortable.

346 Q. Any decisions that needed to be elevated to department  
347 level or the White House level?

348 A. As you know, there's a review process for the so-called  
349 P3CO framework, which elevated the review of certain grant  
350 applications to a department-level review.

351 Q. Are you involved in referring proposals to NIAID to the



352 P3CO?

353 A. The decision to refer to the P3CO framework came out of the  
354 Division of Microbiology and Infectious Diseases. I would be notified  
355 by them of we think this one needs to go downtown for the following  
356 reason, and I would agree to that.

357 Q. Were there -- just to the best of your knowledge, have you  
358 made any determinations outside of what DMID made?

359 Have you ever seen a grant and go, Hey, this needs to go to  
360 the P3?

361 A. None that I can recall.

362 BY CONGRESSMAN JORDAN:

363 Q. What do you mean by going downtown?

364 A. To send it down to the department-level review to a  
365 committee at the HHS level that would review these applications.

366 CONGRESSMAN JORDAN: Okay.

367 BY MR. BENZINE:

368 Q. Do you currently hold a security clearance?

369 A. Yes.

370 Q. What level?

371 A. Top secret.

372 Q. Not SCI?

373 A. I don't even know what that is.

374 Q. During the pandemic, did you receive any classified  
375 briefings on the virus or China?

376 A. I don't believe so, although, I'm not certain about that,

377 because I know I've been in the SCIF once during the past three years,  
378 but I don't recall what that briefing was about.

379 Q. In the early days of 2020, when the task force was being  
380 stood up, were you ever in the White House Situation Room for any of  
381 those meetings?

382 A. No, never.

383 Q. That was just Dr. Fauci representing NIAID in those?

384 A. Well, I can't recall all the people that were there, but  
385 certainly Dr. Fauci was frequently present.

386 Q. All right. I'm going to -- bear with me while I run  
387 through a list of people, and for now, just yes or no of whether or  
388 not you had any communications with any of these individuals, and  
389 we're going start with just on the origins of COVID generally and weed  
390 down a little bit.

391 Vice President Pence?

392 A. I have no recollection of ever talking to him.

393 Q. Mick Mulvaney?

394 A. Again, no recollection of any conversations.

395 Q. Matthew Pottinger?

396 A. No recollection of any conversations.

397 Q. Joe Grogan?

398 A. No again.

399 Q. Mark Short?

400 A. No again.

401 Q. Deborah Birx?

402 A. I am reasonably certain that I had some conversations  
403 during the course of time with Debbie Birx. I know her pretty well,  
404 but I don't recall specific conversations with her.

405 Q. Mark Meadows?

406 A. Never.

407 Q. Francis Collins?

408 A. I have been in meetings when Dr. Collins was present, but I  
409 don't recall any specific conversations between me and him.

410 Q. Meetings discussing the origins of COVID?

411 A. Or anything else.

412 Q. Dr. Fauci?

413 A. Regularly.

414 Q. Dr. Tabak?

415 A. Again, I don't recall any specific conversations with  
416 Dr. Tabak about origins. I've certainly been in many meetings with  
417 Dr. Tabak.

418 Q. Dr. Lane?

419 A. I talked regularly with Dr. Lane.

420 Q. Dr. David Morens?

421 A. I periodically see Dr. Morens.

422 Q. Dr. Ping Chen?

423 A. I met her, I think about six years ago when I was in China,  
424 but I have not had contact with her since.

425 Q. Dr. Victor Dzau?

426 A. I have met Victor Dzau in the course of my career, but I

427 can't think the last time that I saw him or talked to him.

428 Q. Dr. Redfield?

429 A. I don't believe I've ever had a conversation with  
430 Dr. Redfield.

431 Q. Dr. Michael Lauer?

432 A. I have had conversations with Dr. Lauer not specifically  
433 about the origins of the virus.

434 Q. But EcoHealth?

435 A. I don't think I've discussed EcoHealth with Dr. Lauer.

436 Q. Well, I'll ask more specifics.

437 A. Yeah, I'm sure.

438 Q. Dr. David Christian Hassell, Chris Hassell?

439 A. Hassell.

440 Q. Yeah.

441 A. I don't recall that name.

442 Q. He's the chairman of the P3CO?

443 A. Oh. No. I have not had any conversations with him.

444 Q. Dr. Erik Stemmy?

445 A. I have met Dr. Stemmy.

446 Q. Mr. Gray Handley?

447 A. Frequently discussed with Dr. Handley or Mr. Handley.

448 Q. Mr. Folkers?

449 A. Yes. We regularly had contact.

450 Q. Dr. Jeremy Farrar?

451 A. I've met Dr. Farrar once when he came to visit the NIH.

452                   Let me back up for a second. I've said yes to  
453 conversations that I've had with many of the people that you brought  
454 up there, but if your specific question was did I talk to them about  
455 origins of virus --

456           Q.    Yes.

457           A.    -- the answer might be different.

458           Q.    So I'll run back through really quick then, origins, if you  
459 had conversations regarding the origin of the virus.

460                   So I think the answer to Dr. Birx is no?

461           A.    That would be no.

462           Q.    Dr. Fauci?

463           A.    I have been in meetings where the origin question was  
464 discussed. I don't recall any conversations that I had one on one  
465 with Dr. Fauci about origins.

466           Q.    All right. We'll come back to those meetings.

467                   Dr. Lane?

468           A.    We probably did talk about origins following his trip to  
469 China.

470           Q.    Dr. Morens?

471           A.    I don't recall any conversations about origin with him.

472           Q.    Dr. Lauer?

473           A.    No conversations with Dr. Lauer about origins.

474           Q.    Dr. Stemmy?

475           A.    I don't recall any conversations with Dr. Stemmy about  
476 origins.

477 Q. Mr. Handley?

478 A. Again, no.

479 Q. Mr. Folkers?

480 A. Again, no.

481 Q. I'm going to run through just a few private sector names.

482 I'm going to cut some off the list.

483 Any direct conversations Dr. Kirstian Andersen?

484 A. No.

485 Q. Dr. Michael Farzam?

486 A. No.

487 Q. Dr. Eddie Holmes?

488 A. No.

489 Q. Dr. Ian Lipkin?

490 A. I probably have talked to Dr. Lipkin, but not about

491 origins.

492 Q. Dr. Andrew Rambaut?

493 A. No.

494 Q. Dr. Ron Fouchier?

495 A. I last talked with Ron Fouchier, probably, in 2013. It

496 wouldn't have about origins of this virus.

497 Q. Would it been about the ferret avian influenza experiment?

498 A. It would have.

499 Q. That kind of touches on some other topics. So do you mind,

500 if you recall back to 2013, understanding it's a decade ago, do you

501 care to elaborate on that conversation with Dr. Fouchier.

502           A.    As I'm sure you're aware, he almost initiated the whole  
503 conversation of gain-of-function research by holding up a vial of bird  
504 flu that he had modified to make it more transmissible in humans, and  
505 many people thought that was not a very smart experiment.

506           Q.    Did you reach out to him about that or was it within the  
507 course of the gain-of-function pause conversation?

508           A.    It would be the latter.

509           Q.    Okay.  Dr. Peter Daszak?

510           A.    I don't believe I've ever had a conversation with Peter  
511 Daszak.

512           Q.    Dr. James LeDuc?

513           A.    I have had a number of conversations with Jim LeDuc, not  
514 specifically about the origins, however.

515           Q.    Dr. Shi Zhengli?

516           A.    I'm not sure who that is.  So the answer is no.

517           Q.    Dr. George Gao?

518           A.    George Gao, I have met once or twice, but I've never had a  
519 conversation with him about origins.

520           Q.    And Dr. Ralph Baric?

521           A.    I have, again, met him several times.  I don't believe  
522 we've ever discussed the origins of SARS-CoV-2.

523           Q.    I want to go back before moving onto EcoHealth and WIV-type  
524 questions.

525           A.    Can I make one comment?

526           Q.    Yes.

527           A.     For the most part there, you've heard me say that I did not  
528 have conversations about origins with any of those people. Now,  
529 understand my background was that I was a transplant surgeon. I'm not  
530 the subject matter expert. People weren't coming to me and saying we  
531 need to talk about the sequence that shows that this is or isn't a  
532 manmade or a laboratory leak.

533                     So I wasn't part of the kind of conversations that I think  
534 you're talking about.

535           Q.     Absolutely. I understand. I'm just trying to get the kind  
536 of universe of what happened so we can maybe eliminate some questions  
537 later on.

538           A.     Okay.

539           Q.     You said maybe a few meetings where Dr. Fauci was present  
540 that the origins question came up. Do you remember a rough date range  
541 of those meetings?

542           A.     I don't recall specific meetings at all, but the  
543 conversation about origins that he was having with the two subject  
544 matter experts were taking place regularly over the course of several  
545 years.

546           Q.     Who were the two subject matter experts?

547           A.     Well, there were many. Some of them were the people that  
548 you mentioned there, but I wasn't part of the conversation there, but  
549 I'm trying to remember exactly what kind of meetings we had.

550                     We had regular, fairly regular, meetings with his immediate  
551 staff of the experts on virology where that kind of conversation would



552 come up and I would be present.

553 Q. Do you recall who the virology experts were on the  
554 immediate staff?

555 A. They would have the director of the Division of  
556 Microbiology, the director of the Division of the Vaccine Research  
557 Center, and I'm sure there were others as well.

558 Q. So Emily Erbelding being the director of the division?

559 A. She is now. She has not always been the director of that  
560 division.

561 Q. Was she during -- when did she become director?

562 A. Well, I don't actually remember exactly, but it was in the  
563 range of 2016 or '17.

564 Q. So she would have been the director for the period of the  
565 pandemic?

566 A. For the period of the pandemic, yes.

567 Q. I want to ask specifically regarding --

568 MR. STROM: Mitch, can I ask --

569 MR. BENZINE: Yes.

570 BY MR. STROM:

571 Q. Would Dr. Morens also be considered an expert?

572 I understand he has an epidemiology background.

573 A. He would have had opinions for sure.

574 Q. Okay. You mentioned two experts, and would those be, from  
575 an in-house perspective, Morens and Erbelding?

576 A. Who was the second one?

577 Q. Dr. Erbeliding?

578 A. Dr. Erbeliding, Dr. Mascola from the Vaccine Research  
579 Center.

580 MR. STROM: Thank you.

581 THE WITNESS: And Dr. Lane would have had opinions, I'm  
582 sure.

583 BY MR. BENZINE:

584 Q. So the kind of like -- to the best of your recollection,  
585 the kind of universe of individuals that origins would come up around  
586 are Dr. Erbeliding, Dr. Mascola, Dr. Lane, and Dr. Morens?

587 A. Yes, that I was part of.

588 Q. Okay. I want to ask specifically conversations regarding  
589 EcoHealth or the Wuhan Institute of Virology. They're kind of lumped  
590 together. So I'm going to lump them together.

591 Dr. Collins?

592 A. I'm sorry. Now the question is did I talk to Dr. Collins  
593 about Wuhan or about EcoHealth?

594 Q. Yes, sir.

595 A. I don't believe ever doing so.

596 Q. Dr. Fauci?

597 A. We had conversations about EcoHealth and certainly about  
598 Wuhan.

599 Q. Dr. Tabak?

600 A. I don't recall any conversation with Dr. Tabak about either  
601 of those.

602 Q. Dr. Lane?

603 A. I have to imagine we had some conversations after his trip  
604 to China that probably involved his view of Wuhan.

605 Q. And excuse me if I'm being redundant a little bit, but  
606 Dr. Morens?

607 A. I can recall conversations with Dr. Morens about EcoHealth,  
608 yes.

609 Q. You said you -- Dr. Chen, I assume it's no.

610 A. No.

611 Q. Dr. Lauer?

612 A. No.

613 Q. Dr. Stemmy?

614 A. We must have had conversations about EcoHealth for sure.

615 Q. Mr. Handley?

616 A. I don't recall any conversation with Mr. Handley  
617 specifically about EcoHealth. We, I'm sure, talked about Wuhan.

618 Q. Mr. Folkers?

619 A. I wouldn't have been in any conversations with Mr. Folkers.

620 Q. Dr. LeDuc?

621 A. We had conversations about Wuhan.

622 Q. And just for the record, Dr. Baric?

623 A. Yes. I had conversations with Dr. Baric about Wuhan. I  
624 don't recall conversations about EcoHealth with him.

625 Q. Okay. Let's start there. What were the -- can you  
626 elaborate on your conversations with Dr. Baric about Wuhan?

627 A. He had collaborated with Dr. Shi, I think is how she says  
628 it, who is a noted Coronavirus expert who works the Wuhan Institute of  
629 Virology. Dr. Baric is also a noted Coronavirus expert, and I know  
630 the two of them collaborated together.

631 Q. Was it -- did you initiate the conversation with him? Was  
632 it to see if he had information about the Coronavirus or about -- I  
633 guess let's start about when did the conversations take place?

634 A. The primary conversation I recall with Dr. Baric was when  
635 he came to visit us at NIAID and a group of people met with him to  
636 discuss his research with Coronaviruses. It was actually a more  
637 general conversation about Coronaviruses and immunology related to  
638 Coronaviruses, but he did talk about his work in collaboration with  
639 Dr. Shi at the Wuhan Institute of Virology.

640 Q. Was Dr. Fauci at that meeting?

641 A. I don't actually recall. I would not be surprised if he  
642 was not, but I don't recall.

643 Q. To the best of your recollection, did he get any deeper in  
644 the conversations other than I collaborate with Dr. Shi at the WIV?

645 Did he talk about their capabilities or any research that  
646 knew that they were doing?

647 A. Both Dr. Baric and Dr. LeDuc were very complimentary about  
648 Dr. Shi and the quality of the research that she had done. They did  
649 specifically mention that to me.

650 Q. Did Dr. Baric ever express any concerns about the  
651 possibility of a lab leak?

652 A. I don't recall lab leak being specifically discussed with  
653 him. So no. I guess the answer is no. I don't recall any such.

654 Q. Did he express any concerns about any of the research in  
655 Wuhan possibly sparking the pandemic?

656 A. No.

657 BY MR. SLOBODIN:

658 Q. Did he ever talk about the fact that he conducted  
659 Coronavirus research about Biosafety Level 3?

660 A. I don't recall any conversations about what biosafety level  
661 one should use when working with Coronaviruses.

662 Q. Thank you.

663 A. I don't know. Did I answer your question?

664 Q. Well, I was just seeing if it came up. I mean, he's talked  
665 about it publicly, about how the research they do is done at Biosafety  
666 Level 3, and in interviews -- this is after the pandemic -- Dr. Baric  
667 has expressed concern about the biosafety practices of laboratories in  
668 China, not specifically the WIV, but talk about that. So I was  
669 wondering whether that came up in --

670 A. I don't recall that coming up in any conversation I was  
671 part of.

672 MS. GANAPATHY: Dr. Auchincloss, you need to let them  
673 finish, just a reminder --

674 THE WITNESS: I'm sorry.

675 MS. GANAPATHY: -- finish the question before you start to  
676 answer.

677 THE WITNESS: Excuse me.

678 BY MR. BENZINE:

679 Q. Dr. LeDuc, can you elaborate more on the nature of those  
680 conversations?

681 A. Dr. LeDuc was at -- I'm forgetting the name of the  
682 institution in Galveston.

683 Q. Texas Medical Branch?

684 A. Thank you very much.

685 Anyway, we ended up having several phone conversations in  
686 which he described for me the training that they had been doing for  
687 people who were working at Wuhan. He was very proud of the training  
688 that he had provided and he thought it really brought them up to speed  
689 as a result of the efforts that he made.

690 Q. To the best of your recollection, any conversations with  
691 him regarding trying to get access to samples in China or access to  
692 the Wuhan database or anything like that?

693 A. I don't recall any conversations with him on that. In  
694 fact, I don't recall any conversations with anybody about access to  
695 the virus, but it was certainly a topic that people were discussing.

696 Q. Moving up to Mr. Handley, can you elaborate a little bit  
697 more on those?

698 I think you said Wuhan specific, not EcoHealth.

699 A. So Mr. Handley's position is the associate director for  
700 international research. So he would have been very interested in what  
701 our relationship was with the Wuhan Institute of Virology. So,

702 undoubtedly, we discussed that, I'm sure many times.

703 Q. Do you recall any conversations or regarding a possible lab  
704 leak with Mr. Handley?

705 A. Not specifically.

706 Q. Any conversations regarding concerns about federally-funded  
707 research at Wuhan or the perception of that research?

708 A. No.

709 Q. Dr. Stemmy, I think you said, maybe EcoHealth to the best  
710 of your recollection?

711 A. I think he was the project officer for -- the program  
712 officer for the EcoHealth Alliance grant. So he certainly would have  
713 been very familiar with it.

714 Q. When, to the best of your recollection, when did those  
715 conversations occur?

716 A. The first time I learned of our involvement with EcoHealth  
717 was probably in February of 2020, but I don't recall specifically.  
718 Since then, we've had many conversations with Mr. Stemmy about his  
719 oversight of the EcoHealth grant application.

720 Q. Conversations regarding Dr. Lauer's oversight of the grant  
721 as well?

722 A. I have not been involved in any of the conversations about  
723 Dr. Lauer.

724 Q. Not even watercooler conversations with Dr. Stemmy?

725 A. Not at all.

726 Q. Dr. Morens, can you elaborate a little bit more on possible

727 conversations regarding, I think you said, maybe Wuhan with him?

728 A. Well, I know that he was -- is very good friends with Peter  
729 Daszak, and so it's undoubtedly true that he was familiar with Wuhan  
730 and the Wuhan Institute. I don't recall specific conversations  
731 between him and me about any of those issues.

732 Q. Do you recall him relaying any conversations to you that he  
733 might have had with Dr. Daszak?

734 A. I don't believe I ever heard about the specific  
735 conversations that he had with Dr. Daszak.

736 Q. Dr. Lane, you said a couple around his trip in mid-February  
737 to China. Putting the trip aside and what he saw aside, any  
738 conversations with him about access to the Wuhan Institute of Virology  
739 on that trip?

740 A. The only thing he said to me was that the trip was pretty  
741 tightly controlled in terms of what they were allowed to see and not  
742 allowed to see.

743 Q. Did he express any concerns about that to you?

744 A. Not specifically.

745 Q. Then Dr. Fauci, I think you said yes to both Wuhan and  
746 EcoHealth. Can you elaborate a little bit more on, to the best of  
747 your recollection, what those conversations were?

748 A. I don't recall any specific conversations. Obviously, once  
749 we learned that we were funding EcoHealth and that they were involved  
750 in research at the Wuhan Institute of Virology, the topic came up  
751 frequently.



752 Q. You don't recall specifics though?

753 A. No.

754 Q. Any conversations with him regarding Dr. Lauer's oversight  
755 efforts?

756 A. I don't believe so.

757 BY MR. SLOBODIN:

758 Q. Why were there conversations about Dr. Stemmy's oversight  
759 of EcoHealth?

760 A. I'm sorry. The question is?

761 Q. You mentioned that there had been many conversations about  
762 Dr. Stemmy's oversight of the EcoHealth grant. I was looking to see  
763 if you could elaborate on that.

764 These were conversations with whom and what was it  
765 that you --

766 A. So we had a number of meetings to review the issue of  
767 whether the experiments that were being done either in Dr. Baric's lab  
768 or by EcoHealth and the laboratory in Wuhan, whether they constituted  
769 gain-of-function research of concern, and Dr. Stemmy, I think, made  
770 most of those presentations to the effect that, no, these viruses were  
771 not subject to the P3CO framework.

772 Q. Who was convening these meetings where he was making these  
773 presentations?

774 A. I don't know whether I may have or -- I don't know exactly  
775 who organized the meetings.

776 BY MR. STROM:

777 Q. Just because there's that initial review period of like  
778 2016, is that what you're talking about or are you talking about  
779 post-pandemic?

780 A. Post-pandemic.

781 Q. Okay. Do have an approximate time frame for when those  
782 discussions occurred?

783 A. I think they occurred pretty frequently over the course of  
784 2020 through 2022.

785 MR. STROM: Okay.

786 BY MR. BENZINE:

787 Q. Piggybacking a little bit off of those, were they  
788 conversations regarding Baric's work?

789 We'll get a little bit -- there's some emails. So we can  
790 refresh your recollection if you need it later on, but Baric and Dr.  
791 Shi wrote a paper in 2015 that some growth in recombinant  
792 Coronaviruses. The conversation you were just referencing, were they  
793 about that paper or were they about specific NIAID-funded EcoHealth  
794 work at the Wuhan Institute?

795 A. The conversations I was referring to involved oversight of  
796 the EcoHealth experiments in Wuhan.

797 Q. Okay.

798 A. The paper that Dr. Baric wrote in collaboration with Dr.  
799 Shi was a different issue.

800 Q. And we'll get a little bit onto that.

801 Before I go through a long list, I just want to ask you did

802 you have any involvement in the U.S. Government's side of the World  
803 Health Organization's origins investigation from early 2021?

804 A. No.

805 Q. Okay. Again, just some general baseline communication  
806 questions: Did you have any communication with primarily the people  
807 that I've run through over personal email or personal cellphone that  
808 were regarding origins of COVID or EcoHealth?

809 A. It sounds like there's about three questions in there.  
810 Right?

811 Did you have a conversations about origin? Did I have  
812 conversations about whether they were using personal email?

813 Q. No, no, no. Conversations regarding origins on a personal  
814 cellphone or personal email?

815 A. I don't recall any such conversations.

816 Q. Any communications regarding these issues over encrypted  
817 messaging services, like Signal or What's App?

818 A. Nothing that I recall.

819 Q. Throughout the pandemic, did you have any conversations  
820 with anyone affiliated with Fort Detrick?

821 A. I certainly had conversations with people associated with  
822 Fort Detrick. I don't recall any conversations about the origins with  
823 people up there.

824 Q. Would it have been -- I know Dr. Lane oversees one of the  
825 labs at Fort Detrick. Primarily, I think they did therapeutics or  
826 treatments during the pandemic. Would that have been those

827 conversations?

828 A. And that would be true, yes.

829 Q. Did you have any communications with anyone affiliated with  
830 the State Department?

831 A. I don't believe I have had any conversations with anybody  
832 at the State Department.

833 Q. What about any communications with anyone affiliated with  
834 the Department of Energy?

835 A. I don't recall any such conversations.

836 Q. And if the answer to these is no or I don't recall, that's  
837 certainly fine. "Vanity Fair" reported that in mid-2019, Deputy  
838 Secretary of Energy Dan Brouillette alerted a top Dr. Fauci advisor  
839 that the Coronavirus work funded at the Wuhan Institute risked being  
840 misappropriated for military purposes.

841 Did you receive that warning?

842 A. I did not.

843 Q. "Vanity Fair" also reported that in October of 2020 -- he  
844 was then Secretary Brouillette -- told Dr. Fauci that the Department  
845 of Energy scientists had evidence suggesting COVID-19 originated at  
846 the Wuhan Institute. Do you have any knowledge of that?

847 A. No.

848 Q. Secretary Brouillette also offered Department of Energy  
849 laboratory resources and computing capacity to the NIH during the  
850 pandemic. Do you have any knowledge of that?

851 A. I have no knowledge of it.

852 Q. Throughout the course of the pandemic, did you have any  
853 direct communication with anyone affiliated with Twitter, Facebook, or  
854 Instagram?

855 A. I did not.

856 Q. What about any conversations off the record with the press?

857 A. I had no conversations with the press.

858 Q. Thank you.

859 I want to talk a little bit about your relationship with  
860 Dr. Fauci and how you kind of work together. How long have you worked  
861 with Dr. Fauci?

862 A. Well, I've worked for him for 17 years.

863 Q. Did you work with him prior to that?

864 A. I really hardly knew him before that. I had met him, but  
865 we were not close colleagues.

866 Q. During the pandemic, just a ballpark, how often per week  
867 would you meet with Dr. Fauci?

868 A. How often would I meet with him? I was probably in  
869 meetings with him three or four times a week. I saw him much more  
870 frequently than that, obviously.

871 Q. So were there any like impromptu or hallway meetings?

872 A. Oh, I'm sure that there were regular impromptu hallway  
873 meetings.

874 Q. What about conversations on the phone; how many phone  
875 calls, ballpark, per week?

876 A. Actually, not very many. That wasn't his preferred method

877 of communication.

878 Q. Mostly in-person communication?

879 A. Yes.

880 Q. What about over email, ballpark -- again, I know it's  
881 probably a lot -- the volume of your emails with Dr. Fauci?

882 A. Well, most of the emails that I would have received from  
883 Dr. Fauci, I would have been copied on the copy line. They would not  
884 necessarily have been directly sent to me, for the most part.

885 Q. If you know, did he keep more than one official calendar?

886 A. I have no idea.

887 Q. Then some high-level government officials have more than  
888 one email account. Do you know if he kept more than one email  
889 account?

890 A. I do not. I do not know.

891 Q. What about, if you know, did he keep more than one official  
892 phone?

893 A. Official phone? No. I don't believe he had more than one.

894 Q. All right. Moving on a little bit on how this pandemic  
895 started, generally how the pandemic started and some baseline  
896 questions. Just yes or no, is investigating the origins of COVID-19  
897 important?

898 A. I think we'd like to learn as much we can about the origins  
899 of the pandemic, yes.

900 Q. Is discovering the origins of COVID-19 important?

901 A. It may never be possible, but it is worth working on.

902 Q. Why is it worth knowing?

903 A. To plan for and to prepare for the possibility of future  
904 pandemics, what needs to be done to prevent them.

905 Q. Does that -- I'll ask this question: Do you believe the  
906 origin is still unsettled?

907 A. I do.

908 Q. Do you believe it's important to prepare for both possible  
909 pathways, a zoonotic event and a laboratory event?

910 A. Absolutely.

911 Q. What would some zoonotic mitigation measures look like?

912 A. Well, surveillance of animals to find out what kind of  
913 viruses are looking as if they could become potential pandemic viruses  
914 in the future.

915 Q. I'm trying to do math in my head. You were not principal  
916 deputy during SARS-1. Correct?

917 A. I was not.

918 Q. Were you at NIAID during SARS-1?

919 A. I was not.

920 Q. Just in your experience, I want to ask four scenarios and  
921 you tell me if you believe it's a laboratory- or research-related  
922 accident.

923 A researcher manipulating viruses and getting infected in  
924 the lab?

925 A. That sounds like a laboratory incident.

926 Q. A researcher conducting serial passage on a naturally

927 occurring virus and getting infected?

928 A. Let me be clear about what your question is. I mean, that  
929 clearly sounds like something that's happening in the laboratory.

930 Q. Yes.

931 A. Is that your question?

932 Q. Yes. If a spillover occurred in that situation, would it  
933 be a laboratory accident?

934 A. Yes.

935 Q. A researcher just simply working with a naturally occurring  
936 virus in the lab and getting infected?

937 A. I think that would be a laboratory leak.

938 Q. A researcher getting infected during fieldwork and bringing  
939 it back to the lab?

940 A. I think I'd consider that a laboratory event.

941 Q. Thank you.

942 What -- well, the first kind of notification of what became  
943 COVID was over ProMED on December 30, 2019. Was that when you first  
944 learned of the outbreak?

945 A. I don't recall exactly when I learned that they were  
946 finding cases of pneumonia appearing in China. What I do know is that  
947 for the first week or two of hearing about these reports, I was told  
948 consistently that there was no evidence of human-to-human  
949 transmission, which lowered my level of concern considerably.

950 Q. Who told you that?

951 A. I don't recall specifically.



952 Q. You've now had kind of -- well, coming on four years to  
953 reflect on being told that there was no human-to-human transmission.  
954 At this point, do you think we knew that there was human-to-human  
955 transmission?

956 A. I'm speculating, but it seems pretty likely that people  
957 were aware.

958 BY CONGRESSMAN JORDAN:

959 Q. You were told that in December of '19?

960 A. I'm sorry?

961 Q. You were told that, no human-to-human transmission --

962 A. It would have been either December or early January.

963 Q. And you don't recall who, but someone within our government  
964 or --

965 A. I'm thinking about conversations --

966 Q. -- did you read it in some publication?

967 A. -- that took place within our Institute, people who were  
968 tracking the virus.

969 Q. People working with NIAID?

970 A. Yes.

971 CONGRESSMAN JORDAN: Okay.

972 BY MR. BENZINE:

973 Q. Again, as much you can recall, would they have been, those  
974 individuals at NIAID, getting information from China?

975 A. Would they have been?

976 Q. Getting that information from China.

977 A. I don't know whether they were getting it directly from  
978 China or whether they were getting it from other people in the United  
979 States Government.

980 Q. So you talked a little bit -- and if we get outside your  
981 wheelhouse, let me know.

982 A. We're getting pretty close.

983 Q. Do you recall when you were first made aware of the genomic  
984 sequence of COVID-19?

985 A. I believe that NIAID received the sequence on either  
986 January 10th or 11th, but I didn't specifically see the sequence and  
987 nobody would have shown it to me.

988 Q. Do you recall who made it public?

989 A. I only vaguely recall. I would be sort of guessing if I  
990 said Eddie Holmes.

991 Q. That's correct. So it was a good guess.

992 Dr. Holmes made it public on behalf of Dr. Zhang Jixian,  
993 who was a scientist in China, and on January 12th, the day after the  
994 sequence was public, Dr. Jixian's lab was shut down for  
995 recertification. Did you have any awareness of that?

996 A. No.

997 Q. It was also reported around that time that a number of  
998 Chinese doctors who discussed the outbreak on social media were  
999 detained and the original kind of whistleblower of COVID-19, Dr. Li  
1000 Wenliang, who eventually succumbed to the disease, was forced to sign  
1001 a nondisclosure agreement regarding the virus. Did you have any

1002 knowledge of any of that?

1003 A. I have no knowledge of any of that.

1004 Q. You said you had been to China once before. Was it on  
1005 official work?

1006 A. I have been to China, I think four times and always on  
1007 official business.

1008 Q. In your experience with China, is it kind of common for  
1009 them to keep a tight lid on information that may affect China?

1010 A. I really have no particular knowledge of how tight the lid  
1011 is, but -- so I really can't answer that.

1012 Q. Did you ever have any conversations with Mr. Handley  
1013 regarding Chinese data sharing or information sharing practice?

1014 A. Well, yes. We had a joint program with the Chinese  
1015 Government funding -- they were funding Chinese scientists. We were  
1016 funding the American scientists, and I think he talked to me about  
1017 being very quite proud of the fact that we were maintaining data  
1018 transfer between the Chinese scientists and the American scientists.

1019 Q. Early in -- well, in the first few months of the pandemic,  
1020 it's widely reported and I think pretty well established that China  
1021 wasn't sharing all the information that they had. Were there any  
1022 conversations around NIAID regarding that?

1023 A. Not specifically that I recall. I think people were  
1024 wondering were we getting all the information that was available.

1025 Q. I want to ask two more questions about the sequence. In  
1026 Dr. Farrar's book, he said Eddie, Eddie Holmes, has screen shots taken

1027 from social media in China about the Coronavirus sequence. They  
1028 suggest the full genome was know by a genomics company in China by 27  
1029 December 2019 and reported to both the Chinese CDC and the hospital on  
1030 that day.

1031 Were you aware of that?

1032 A. When did he say that this was reported? I'm sorry.

1033 Q. That China had sequenced the virus by December 27, 2019?

1034 A. 2019.

1035 Q. Um-hum.

1036 A. Okay. Well, I've read Jeremy Farrar's book, but I honestly  
1037 don't recall that passage.

1038 Q. I can go get it, but do you recall any talk around NIAID or  
1039 with anyone else regarding the possibility that China had sequenced  
1040 the virus prior?

1041 A. I don't recall any specific conversations about that.

1042 Q. Dr. Daszak testified before our committees last month and  
1043 said we were told that there was a new Coronavirus 20 percent  
1044 different to SARS which was strangely accurate information and he was  
1045 told that on the day before New Year's Eve 2019 and later testified  
1046 that it was strangely accurate because COVID-19 ended up being 20  
1047 percent different from SARS; so he had a pretty good grasp on what  
1048 this was and that he heard this information from one or two  
1049 individuals that worked in the Chinese public health infrastructure.

1050 Were you aware of any of that?

1051 A. I was not.

1052 Q. Would having -- so China reported it as an atypical  
1053 pneumonia, but it appears that they would have the sequence and have  
1054 known that it was a Coronavirus and at least in the SARS related  
1055 family. At that point in time, were there any speculations regarding  
1056 China hiding any information?

1057 A. Not that I recall.

1058 MR. BENZINE: I want to introduce our first exhibit. It  
1059 will be Majority Exhibit 1.

1060 [Majority Exhibit No. 1 was  
1061 marked for identification.]

1062 BY MR. BENZINE:

1063 Q. It will a simple round of questions if you don't recall  
1064 this document. So this is a May 1, 2020 U.S. Department of Homeland  
1065 Security intelligence article.

1066 Were you previously aware of this?

1067 A. I don't believe I've ever seen this before.

1068 Q. We don't need to go through it all. I'll ask some specific  
1069 questions, and if you weren't aware, just say so.

1070 The bolded sentence on the second paragraph: "We assess  
1071 the China Government intentionally concealed the severity of COVID-19  
1072 from the international community in early January while it stockpiled  
1073 medical supplies by both increasing imports and decreasing exports.  
1074 We further assess the China Government attempted to hide its actions  
1075 by denying there were export restrictions and obfuscating and delaying  
1076 provision of its trade data."

1077           Was PPE pretty essential -- we were pretty short on PPE  
1078 early in the pandemic; is that correct?

1079           A.    I really had no involvement with PPE.

1080           Q.    Do you have any knowledge of any talk of the Chinese  
1081 Government stockpiling PPE?

1082           A.    None that I recall.

1083           Q.    All right. We talked about Mr. Handley a little bit, and  
1084 did he report directly to you?

1085           A.    Technically, he reported directly to Dr. Fauci, but I think  
1086 most of the conversations were with me and then I would convey the  
1087 gist of them to Dr. Fauci, if necessary.

1088           Q.    And in his job, he was at least in part responsible for  
1089 NIAID's foreign interactions; is that a fair characterization?

1090           A.    Dr. Handley -- Mr. Handley was -- yes, was the associate  
1091 director for international research.

1092           Q.    And he told us something similar, that Dr. Fauci was his  
1093 direct report on paper, but the vast majority of things went to you.

1094                   And we've touched on this again. So excuse me if I'm being  
1095 redundant.

1096                   After the outbreak, did you ask Mr. Handley for any  
1097 information on current projects in China?

1098           A.    I'm sure I did. I don't specifically recall any particular  
1099 conversation.

1100           Q.    Do you recall if Dr. Handley debriefed you on any of those  
1101 projects?



1127 the pandemic.

1128 Do you remember if it was discussed, putting this together,  
1129 prior to then?

1130 A. Well, the page that we're looking would have existed well  
1131 before the pandemic. This is a fairly standard country page from our  
1132 international office.

1133 I don't recall exactly whether Mr. Handley said I'll send  
1134 you the information about all the research we're doing in China or  
1135 whether I asked him can you update me on what we're doing in China.

1136 Q. It says it was last updated on April 13, 2020, so the day  
1137 that it was sent. So it must have been -- I don't know what the  
1138 changes were, but there must have been some changes.

1139 Are these country pages public on NIAID's website or are  
1140 they internal?

1141 A. I don't believe so.

1142 Q. I want to go down to the page that's marked 50 -- oh, the  
1143 Bates numbers are not on here. It's the third page. There's a  
1144 delegation visit section.

1145 A. Delegation Visits?

1146 Q. Yes. The most recent one was a delegation from the Chinese  
1147 Embassy in D.C. to NIAID on February 7, 2020. Were you involved at  
1148 all in that visit?

1149 A. I don't recall it, but I would be very surprised if I  
1150 wasn't present.

1151 Q. If you were not present?



1152 A. If I was not present.

1153 Q. But you don't recall the meeting?

1154 A. No.

1155 Q. Then I want to flip ahead a few pages, and I apologize that  
1156 the Bates numbers got cut off by the printer.

1157 There is a list of a lot of grants. There's a section that  
1158 starts Other Viral Diseases.

1159 A. Yes.

1160 Q. Then underneath that, Direct Foreign and Domestic with a  
1161 Foreign Subcomponent. Do you see those?

1162 A. [Gestures.]

1163 Q. The second and third from the bottom, the primary recipient  
1164 is the New York Blood Center?

1165 A. Okay.

1166 Q. Then under that, collaborators, it lists Dr. Yusen Zhou.  
1167 Are you aware of that name?

1168 A. I would guess that I've heard that name, but I don't know  
1169 anything about who that is.

1170 Q. He is -- was. He passed away reportedly under suspicious  
1171 circumstances in May-ish 2020. He was the primary vaccine developer  
1172 for the Chinese Academy of Military Sciences and the People's  
1173 Liberation Army.

1174 I guess like that stands out to us as a potential issue in  
1175 foreign vetting, that a member of the Chinese military can receive  
1176 U.S. federal funds. To the best that you know, how does NIAID vet

1177 foreign collaborators?

1178 A. I believe that every foreign component is approved by the  
1179 State Department.

1180 Q. Do you know the State Department's process?

1181 A. I have no idea.

1182 Q. Do you find it surprising that a member of the PLA received  
1183 a grant?

1184 A. Not automatically.

1185 Q. Okay. Do you have any other experience with grants going  
1186 to foreign militaries?

1187 A. I don't recall any similar experience.

1188 Q. Mr. Handley also testified to us: "I discussed with Dr.  
1189 Auchincloss and others what we knew and didn't know about the  
1190 situation there, and I did explain to Dr. Auchincloss that our person  
1191 in Beijing had visited Wuhan two years before, a year and a half  
1192 before the issues arose with COVID-19."

1193 Was that -- do you recall that conversation?

1194 A. I don't recall that specific conversation, but I had many  
1195 conversations with Mr. Handley about the visit to the laboratory.

1196 Q. And that visit was led by Dr. Chen?

1197 A. Led by? I'm not sure.

1198 Q. Dr. Chen was the NIAID representative on that?

1199 A. Yes.

1200 MR. BENZINE: We'll get more into, but I'm at my hour. So  
1201 we'll take a break.

1202 We can go off the record.

1203 [Recess.]

1204 EXAMINATION BY THE MINORITY

1205 BY [REDACTED]

1206 Q. Good morning, Dr. Auchincloss, my name is [REDACTED] I  
1207 am senior counsel for the Democratic staff on the Select Subcommittee  
1208 on the Coronavirus Pandemic. I just want to reiterate the thanks of  
1209 the Majority for you coming here voluntarily and speaking with us  
1210 today. We do appreciate you taking the time out of what is I'm sure a  
1211 busy schedule.

1212 I would like to first turn our attention to the current  
1213 status of the EcoHealth Alliance as an awardee of NIAID. Can you  
1214 please tell us briefly about the work, as you're aware of it, that  
1215 EcoHealth is presently doing under their NIAID award?

1216 A. I honestly am not very familiar with precisely what the  
1217 work is going to be at this point.

1218 Q. Okay. And do you know what was taken into consideration  
1219 when the grant was renewed or unsuspended, whatever term we're using  
1220 for it?

1221 A. Now, there's a series of steps here. There was the  
1222 original funding of the grant. There was the renewal of the grant.  
1223 There was the termination of the grant. There was a reinstatement of  
1224 the grant. There was the suspension of the grant and now the  
1225 reinstatement of the grant.

1226 Which are you referring to?

1227 Q. Many steps. I just want to focus on their present status,  
1228 which was in April of 2023, I believe, so very recent when their grant  
1229 was unsuspending and they were allowed to continue work.

1230 A. Yes. Okay.

1231 Q. So do you know what was taken into consideration in that  
1232 decision in April of '23?

1233 A. So there were two ways of looking at it. The first issue  
1234 was the issue of were they in compliance of the conditions that Dr.  
1235 Lauer and his Office of Extramural Research had set. Whether they  
1236 were in compliance with his stipulations was being determined by his  
1237 office.

1238 When the grant was considered to be renewed, we were not  
1239 going to include the Wuhan Institute of Virology part. That led to  
1240 the question of, Well, without that, is the science still worthwhile?

1241 The Division of Microbiology and Infectious Diseases was  
1242 responsible and spent quite a lot of time looking at the grant and the  
1243 new conditions and finally reporting to me that they believed that the  
1244 science was worth pursuing.

1245 Q. Okay. Thank you.

1246 As you said, but I just want to be clear, the Wuhan  
1247 Institute of Virology is no longer involved with any work that  
1248 EcoHealth Alliance is doing under their NIAID grant. Correct?

1249 A. As far as I understand, that is true.

1250 Q. And there is no chimeric work involved in their current  
1251 award?

1252 A. I believe that is true also.

1253 Q. And in its history, EcoHealth Alliance has collected bat  
1254 samples across Asia. Correct?

1255 A. As I understand it, yes.

1256 Q. So there was a Subset A, we can call it, of bat samples  
1257 collected from China with the WIV and a Subset B of bat samples  
1258 collected from other parts of Asia by EcoHealth Alliance and other  
1259 partners, but not the WIV; is that correct?

1260 A. To the best of my knowledge.

1261 Q. And I understand that this is not under your purview  
1262 specifically.

1263 Dr. Peter Daszak, the president of EcoHealth Alliance,  
1264 testified that the bat samples he -- that he has bat samples from  
1265 Thailand that are stored in Thailand. Is that something you're aware  
1266 of?

1267 A. I would believe that that is true, but I don't know it  
1268 personally.

1269 Q. And you may not know this, but do you know who EcoHealth  
1270 Alliance's current collaborators or sub-awardees are?

1271 A. I do not.

1272 Q. Are you aware that bat samples are now to be analyzed by  
1273 the Duke-National University of Singapore partnership in Singapore?

1274 A. I'm not aware of that either.

1275 Q. Okay. And in your discussions about the EcoHealth Alliance  
1276 grant, have you learned about the scientific significance of the work

1277 that they're doing?

1278 A. In very general terms.

1279 Q. Can you tell us a little bit about your understanding of  
1280 that?

1281 A. Basically, that they are looking at Coronaviruses that  
1282 exist in nature and trying to determine which ones are at risk of  
1283 future pandemics.

1284 Q. And can you tell us why that research is important for  
1285 NIAID's mission?

1286 A. Well, we want to be prepared for the next pandemic to the  
1287 extent that we can.

1288 Q. Dr. Auchincloss, we're aware that NIH and NIAID have in  
1289 recent years made changes to the award process, specifically as it  
1290 relates sub-awardees. Can you tell us a little bit about these  
1291 changes?

1292 A. I'm not sure exactly what you're referring to.

1293 Q. Okay. I can give you some examples.

1294 Effective October 1, 2022, NIH updated the sub-award  
1295 agreement key elements to include identification of the sub-awardee  
1296 lead investigator. Are you aware of that?

1297 A. I was not aware of that.

1298 Q. That foreign sub-recipients must provide access to copies  
1299 of lab notebooks?

1300 A. I have seen that, yes.

1301 Q. The primary recipient must provide a progress report on the

1302 sub-awardees at least once a year?

1303 A. Is that still policy at this point? I'm not sure.

1304 Q. Okay. That NIH approval is required to transfer work to a  
1305 foreign site?

1306 A. I'm not familiar with this.

1307 Q. Okay. Are you aware of specific conditions that have been  
1308 placed on the current EcoHealth Alliance award?

1309 A. I know that there are specific conditions, but I wouldn't  
1310 be able to list them for you.

1311 Q. I can list them for you and you can let me know.

1312 A. Okay.

1313 Q. EcoHealth Alliance has to show its sub-award agreements to  
1314 NIH and have them approved.

1315 A. Okay. I believe you.

1316 Q. There is a requirement required third-party audit to go  
1317 over their financial systems.

1318 A. That sounds plausible, but I haven't actually seen it.

1319 Q. EcoHealth Alliance must spend their own money and then  
1320 invoice NIH for those expenses?

1321 A. I have heard that, yes.

1322 Q. And they must provide progress reports twice a year.

1323 A. Okay.

1324 Q. And all those conditions I just listed were made  
1325 specifically for EcoHealth Alliance. Correct?

1326 A. That's my understanding.

1327 Q. And do you know the purpose of these special conditions?

1328 A. I think they're - I'm speculating, because I didn't set  
1329 them, but I assume they're trying to guarantee compliance with meeting  
1330 the conditions that they had imposed for reinstating the grant.

1331 Q. And we know you're not in charge of monitoring their  
1332 compliance, but do you know who is?

1333 A. I would have to assume it's the Office of Extramural  
1334 Research, but I don't know for sure.

1335 Q. And you may not know the answer to this either, but do you  
1336 know if their first progress report has been submitted?

1337 A. I do not know.

1338 Q. Then I just want to go back to something you discussed in  
1339 the prior hour regarding when an incident is a lab leak or when it is  
1340 a zoonotic spillover event. The question was posed to you about  
1341 researchers going out and doing fieldwork.

1342 We've been told by other scientists that if there's an  
1343 exposure out in the field, that would be considered zoonotic  
1344 spillover. Does that response surprise you?

1345 A. It doesn't. I think it's a matter of semantics. In my  
1346 mind, I was thinking that if laboratory people go out and come in  
1347 contact with a Coronavirus, it's a lab event, but I understand what  
1348 the people are saying when they say this is the substance of zoonotic  
1349 transfer.

1350 [REDACTED] Okay. Thank you.

1351 Moving on, I want to introduce Exhibit A.



1352 [Minority Exhibit A was  
1353 marked for identification.]

1354 BY [REDACTED]

1355 Q. This is an email from Dr. Fauci to you on February 1, 2020.  
1356 It is from a publicly release of a FOIA records.

1357 Do you recognize the email?

1358 A. I do.

1359 Q. Do you recognize it from the time you received it?

1360 A. I can recall the time that I received it, but I've seen it  
1361 dozens of times since.

1362 Q. I'm sure. And there was an attachment to this email.

1363 Correct?

1364 A. There was a paper from Dr. Baric.

1365 Q. In the email, Dr. Fauci says: "You will have tasks today  
1366 that must be done."

1367 Was that referring to briefing him or NIAID's funding of  
1368 research being done in China since he was not familiar with the  
1369 specifics?

1370 A. I don't recall. Actually, I don't think I knew what he was  
1371 expecting for the day.

1372 Q. Did you review the attached paper?

1373 A. I did.

1374 Q. And was that a 2015 paper by Drs. Baric and Shi?

1375 A. Dr. Shi was one of the authors, yes.

1376 Q. And Dr. Baric was an author as well?

1377 A. Dr. Baric was, I believe, the senior author.

1378 Q. In your review of the paper, did you learn that the work  
1379 discussed was conducted prior to the gain-of-function pause?

1380 A. There was a discussion by Dr. Baric that I recall, but I'm  
1381 not going to get it exactly correct, but he said much of this work was  
1382 done prior to the pause, but since then, it's been reviewed by NIH and  
1383 we've been told we can proceed.

1384 Q. Did you also learn that the research discussed was  
1385 conducted at Dr. Baric's lab at UNC?

1386 A. It was -- all the research, as I understood it, was  
1387 conducted at UNC.

1388 [REDACTED] In this email in Exhibit A, Dr. Fauci references  
1389 forwarding you another email. I'm going to introduce Exhibit B.

1390 [Minority Exhibit B was  
1391 marked for identification.]

1392 BY [REDACTED]

1393 Q. This is also from a public release of FOIA records. Is  
1394 this the email that Dr. Fauci was referring to?

1395 A. I assume that that's true. I have to say that I don't  
1396 actually recall this paper and I haven't read it since.

1397 Q. Do you recall the email?

1398 A. Vaguely, but --

1399 Q. At the time, did you review the Science article that was  
1400 included?

1401 A. I can't imagine that I didn't.

1402 Q. And if you want to take a moment to flip through it, you  
1403 can, but can you let us know if this article references the Baric-Shi  
1404 paper that was attached to the other email.

1405 MS. GANAPATHY: Dr. Auchincloss, just take a minute to  
1406 review it.

1407 THE WITNESS: I was going to say this is a pretty dense  
1408 paper.

1409 [REDACTED] Pretty dense. I'll give you a moment here.

1410 THE WITNESS: Can you show where you are?

1411 [REDACTED] Yes, I can.

1412 MS. GANAPATHY: You should also familiarize yourself with  
1413 the document.

1414 [REDACTED] Yes. Feel free to look through it. I will try  
1415 to find the specific reference to point you to.

1416 If you look on the page that is stamped 2427.

1417 THE WITNESS: Okay.

1418 [REDACTED] There are references there.

1419 [Witness peruses exhibit.]

1420 [REDACTED] You can take your time to review it if you would  
1421 like. I do not have any specific questions for you about the content  
1422 of the article.

1423 BY [REDACTED]:

1424 Q. So next question I have for you is just you reviewed this  
1425 these articles and then spoke to Dr. Fauci?

1426 A. I'm assuming that's the sequence.

1427 [REDACTED] I'm going to introduce Exhibit C.

1428 [Minority Exhibit C was  
1429 marked for identification.]

1430 BY [REDACTED]

1431 Q. This appears to be your email to Dr. Fauci responding to  
1432 the prior emails; is that correct?

1433 A. That is correct.

1434 Q. Do you recall sending this email?

1435 A. I do.

1436 Q. In the email, you say: "Emily is sure that no Coronavirus  
1437 work has gone through the P3 framework."

1438 Is Emily Dr. Emily Erbelding?

1439 A. Dr. Emily Erbelding, the director of the Division of  
1440 Microbiology and Infectious Diseases.

1441 Q. And can you elaborate a bit on what that meant in your  
1442 email to Dr. Fauci?

1443 A. So in the paper, Dr. Baric has a discussion of  
1444 gain-of-function research. It's a complicated term, because a lot of  
1445 virology research is gain of function. You put genes in, see how it  
1446 changes things. You take things out and see how it changes things.

1447 So gain-of-function research in and of itself is not a  
1448 problem. The concern is about gain-of-function research that leads to  
1449 enhanced pathogens of pandemic potential.

1450 He had a discussion about gain-of-function research that  
1451 led me to think, Oh, this was gain-of-function research of concern,

1452 but when I talked to Emily, she said, Well, we haven't sent anything  
1453 down for the P3CO framework, and that confused me.

1454           It turns out I was confused because I hadn't realized that  
1455 she and her group had reviewed the experiments and determined that  
1456 they were not gain-of-function research of concern that might lead to  
1457 enhanced pathogens of pandemic potential. So it was correct that they  
1458 hadn't gone downtown, because she had determined that they didn't need  
1459 to go downtown.

1460           I was confused by the article and, eventually, I learned  
1461 what the truth was.

1462           Q.    And I imagine at this time, February 1, 2020, there was a  
1463 lot of information flying at you at one time to be digested very  
1464 quickly.

1465           A.    There was a lot of information for sure.

1466           Q.    And we -- you used both the terms "gain-of-function" and  
1467 the "P3CO". It's my understanding that there was the gain-of-function  
1468 pause for a period of time. That ended and then the P3CO framework  
1469 then sort of came in and replaced the gain-of-function pause; is that  
1470 correct?

1471           A.    That's correct.

1472           Q.    Can you explain the difference between the two, if you can?

1473           A.    I can't actually, because I can't keep them straight  
1474 either, but the terms of the pause were slightly different from the  
1475 eventual terms of P3CO framework. The pause involved some specific  
1476 pathogens, SARS, MERS, and influenza. The P3CO framework didn't list

1477 specific pathogens, but talked about pathogens that either had the  
1478 capacity for high transmissibility or high pathogenicity.

1479           So the terms changed somewhat. Whether it was something  
1480 that happened in humans or whether it was something that happened in  
1481 mammals changed, and I can't keep them all straight, to be honest with  
1482 you.

1483           Q.    Thinking about all three of these exhibits, A, B, and C,  
1484 the email chain between you and Dr. Fauci, is that something that  
1485 would happen often; he would send you articles to review and get back  
1486 to him with more information?

1487           A.    I wouldn't say it was frequent, but he would feel perfectly  
1488 free to send me an article and say digest this and get back to me.

1489           Q.    Sure. And at this time, again, February 1, 2020, very  
1490 early on in the pandemic, did the -- the need to sort of gather  
1491 information was heightened. Right?

1492           A.    I think that's a fair statement.

1493           Q.    And gather that information quickly?

1494           A.    Yes.

1495           Q.    Both internal to NIH and external facing. Right?

1496           A.    Yes.

1497           Q.    So Dr. Fauci reaching out for information about this was  
1498 not a surprising thing?

1499           A.    No.

1500           ██████████ All right. Thank you, Dr. Auchincloss. I'm  
1501 going to turn things over to my colleague.

1502 BY [REDACTED]

1503 Q. All right. Dr. Auchincloss. My name is [REDACTED]  
1504 I'm on the Energy and Commerce Committee Minority staff. Echoing  
1505 everybody, thank you for being here, thank you for your work, and  
1506 thank you for your answers today.

1507 I want to, I think, zoom out a little bit and talk about  
1508 NIAID's work generally and your role in that and how that work evolved  
1509 quite a bit from 2019 through the pandemic. So let's start with  
1510 pre-pandemic. Let's say between, just to put a general range on it,  
1511 after SARS-1 outbreak, which was quite a while ago, up through, say,  
1512 November-December of 2019, before there was an awareness of  
1513 SARS-CoV-2.

1514 Can you just talk generally, and then we can drill down a  
1515 bit, but just talk generally about NIAID's approach having, I assume,  
1516 learned some lessons from SARS-1 changed its thinking in terms of  
1517 surveillance, prevention, that kind of work. You know, how was NIAID  
1518 thinking about pandemic detection and prevention during that time  
1519 period in its priorities?

1520 A. Well, there's a specific example of the Coronavirus  
1521 research that was performed, because there was not only SARS-CoV-1,  
1522 there was MERS, and some very smart scientists working at the Vaccine  
1523 Research Center said, a major outbreak of Coronavirus, a second major  
1524 outbreak of a second Coronavirus, it's really very likely that we'll  
1525 see another Coronavirus outbreak at some point in the future.

1526 They then set out to prepare a vaccine to MERS, not because

1527 they expected to use such a vaccine, but because they wanted to learn  
1528 how to make a vaccine to that particular type of Coronavirus. They  
1529 did that successfully. I think it was successfully completed in 2017.

1530           When the sequence of SARS-CoV-2 was published in early  
1531 January, those scientists looked at the sequence of the new  
1532 Coronavirus, compared it to MERS, and said, Wow, the sequence homology  
1533 is such that I think we can make the same mutations that we made in  
1534 the MERS vaccine and it will stabilize a SARS-CoV-2 vaccine. So, in  
1535 effect, we had done the homework to create the vaccine prior to the  
1536 pandemic, which is really the fundamental reason that we were able to  
1537 come up with the Moderna and Pfizer vaccines so quickly.

1538           Q.     Just focusing in on that for a moment, what kind of time  
1539 and resources -- you know, it's probably hard to put a number on it,  
1540 but how much time do you think it saved having done that work in  
1541 advance versus if, you know, that work hadn't been done and those  
1542 investments hadn't been made prior to the SARS-CoV-2 outbreak?

1543           A.     So the work to learn how to make a MERS CoV vaccine started  
1544 in 2013 and was published in 2017. That's a lot of time we've saved,  
1545 which is not to say that it's not possible that it could have moved  
1546 faster during the pandemic, but there's no question that this was  
1547 truly remarkable.

1548           In broad terms, this notion of making a vaccine to a family  
1549 of viruses, in this case, the Coronavirus virus family of a certain  
1550 subtype, has been referred to as the prototype pathogen approach,  
1551 which is central to the way we thought about preparing for pandemics



1552 in the future, find a representative virus within viral families and  
1553 learn how to make the countermeasures, both antibodies and vaccine, to  
1554 that prototype virus and it will get you further along if you then  
1555 encounter a naturally-occurring pandemic virus.

1556 Q. So talking a bit about the sort of surveillance aspect of  
1557 SARS-1, you have MERS. As you said, there's this general awareness,  
1558 understanding, concern that another Coronavirus outbreak is certainly  
1559 possible, if not likely.

1560 You know, what were the priorities in terms of grant making  
1561 and in-house work of wildlife and, you know, human population  
1562 surveillance of potential new harmful Coronaviruses, again,  
1563 pre-SARS-CoV-2, obviously?

1564 A. And there were, as EcoHealth being an example, funded  
1565 grants to surveil for potential future pathogens around the world.  
1566 Now, it's not just Coronaviruses. I mean, if you had to think about  
1567 where the next pandemic is going to come from, the first ten choices  
1568 would be influenza and the next ten choices would be a Coronavirus,  
1569 and then we'd start talking about some of the other viral families.

1570 So those are primary areas where people are really  
1571 interested in surveillance.

1572 Q. But can you just talk about the value of that work  
1573 generally? I mean, why would NIAID invest in that work?

1574 A. Just, in general, that we're trying to learn the evolution  
1575 of viruses in nature with the idea that we might be able to spot when  
1576 one is going to jump species and become a human pathogen.

1577 Q. Thank you.

1578 A. I guess I ought to qualify that by saying I'm the  
1579 transplant surgeon. I'm not the guy who thinks about sequencing  
1580 viruses in the wild, but I think it's pretty obvious that knowing more  
1581 about what's out there is good for future preparedness.

1582 Q. Understood. So when during the initial awareness of the  
1583 outbreak, you know, December-January when, you know, NIH and the world  
1584 was starting to understand that what was happening here was different,  
1585 you know, when within NIAID did priorities, activity really start to  
1586 shift and can you describe that a bit?

1587 A. I think I was slow on the uptake, because I don't think I  
1588 was really concerned about SARS-CoV-2 until about mid-January, but as  
1589 I think I've mentioned, the sequence was picked up by the Vaccine  
1590 Research Center on January 10th -- or was it the 11th -- and they were  
1591 off and running to make a vaccine. They were taking this very  
1592 seriously.

1593 So there were parts of NIAID that by early January were  
1594 moving as quickly as they could.

1595 Q. So there wasn't anybody waiting for signoff from you to  
1596 start that work or anything?

1597 A. I found out about the work that was going with the VRC  
1598 quite substantially later.

1599 Q. Okay. And so, I mean, from where you sat, you know, and  
1600 the work that you observed and helped people understand and  
1601 facilitate, you know, when did things really start to change for you

1602 in your capacity within the office?

1603 A. By mid-January, we are off and running.

1604 Q. Okay. And can you describe, you know, that very initial  
1605 stage of the outbreak and the work on it?

1606 What were the priorities that shifted? What were the  
1607 actions that were taken? What were the resources that you needed to  
1608 rearrange or deploy?

1609 A. Well, Congress gave us a \$1.5 billion supplement. I don't  
1610 remember exactly when that came through, but that was to mount a  
1611 response to the SARS-CoV-2. So we set out to spend that money as  
1612 quickly as we could.

1613 All around the country, labs were shutting down as a result  
1614 of the pandemic, but individual labs were shifting over and starting  
1615 to study SARS CoV-2 and we were providing the funding for them to do  
1616 that. So it was a massive effort, both extramural and intramural, to  
1617 gear up the research response to this new virus.

1618 Q. And was there a particular, you know, focus on the research  
1619 in terms of, you know, sequencing versus treatments versus, you know,  
1620 vaccines or was it sort of a wholistic approach to figuring out  
1621 everything you could about the virus and what to do about it?

1622 A. All of the above. There were treatment trials that were  
1623 underway that led to some of early treatments before Paxlovid.

1624 We knew we were going to have to do vaccine trials on a  
1625 vast scale. We finally -- the government selected six vaccine  
1626 candidates to pursue. We were going to need to enroll in the range of

1627 130,000 people in vaccine trials over the course of a very short  
1628 period of time, if we could. So there was an effort to provide the  
1629 infrastructure to do that.

1630           So there were treatment trials. There were preparation for  
1631 the vaccine trials, and there was the basic immunology of what is this  
1632 virus and what does it do to people and why is it pathogenic and what  
1633 kind of immune response is good for it.

1634           Q.    How do you think that work would have looked different  
1635 without the supplemental funding from Congress?

1636           A.    I think, probably, and I'm speculating, but I think,  
1637 probably, we would have pretty much have done the same thing, but  
1638 everything else we do would have had to stop.

1639           Q.    I mean what impact do you think that would have had in  
1640 terms of, you know, the timing to mount a response, develop vaccines,  
1641 time, of course, meaning lives in these circumstances?

1642           A.    From the point of view of the Coronavirus, I truly believe  
1643 that in the face of this emergency, we would have gone ahead and  
1644 responded pretty much as we did, but the work on Respiratory Syncytial  
1645 Virus, on the Malaria antibody -- you name it -- tuberculosis new  
1646 drugs would have had to have ground to a halt.

1647           Q.    What impact would that have had on public health emerging  
1648 from the pandemic?

1649           A.    We'd lose all of the advances that have made in those  
1650 areas, which are pretty significant recently.

1651           Q.    So that's, you know, early in the pandemic. The supplement

1652 from Congress, all of that activity begins. Can you talk about how  
1653 did those priorities shift as, presumably, you got from the six  
1654 vaccine candidates being selected into trials?

1655 Can you just talk about -- you know, because we look at  
1656 emails. We look at things that come out in the public, but I think  
1657 it's very hard for us, honestly, to get a sense of what it was like  
1658 within, you know, the building or buildings, probably is the case.  
1659 You know, as you get from those six candidates being selected into the  
1660 trial work in earnest, from where you sat, how were priorities  
1661 shifting, resources being deployed?

1662 You know, what worked and what didn't?

1663 A. Well, there were people who were working truly 20-hour days  
1664 to keep these things moving at the fastest possible speed. They  
1665 were -- in all of the areas that we've already discussed.

1666 Q. And was that both private-public, you know, collaboration  
1667 or between the two sort of across the board?

1668 A. I think all of the above.

1669 Q. All right. Another question on that, the work leading up  
1670 to pre-pandemic and its impact going into the pandemic, what kind of,  
1671 you know, networks and relationships were available to the U.S.  
1672 Government as a result of pre-pandemic work and grant investment,  
1673 both, you know, domestically and internationally?

1674 A. Our largest clinical trial networks, both for vaccine  
1675 research and for other research, actually involved the HIV networks.  
1676 All of them pivoted to become SARS-CoV-2 vaccine and treatment

1677 networks.

1678           So we had an infrastructure in place that was ready to go  
1679 with tremendous experience about running vaccine trials. That was not  
1680 the only source of sites to run these vaccine trials, but it was a  
1681 very important part.

1682           Q.    So, presumably, the existence, you know, before the  
1683 pandemic of those and the ability to pivot and utilize those,  
1684 likewise, saved time --

1685           A.    No question about it.

1686           Q.    -- and, therefore, lives?

1687           A.    You've heard that Dr. Fauci predicted that it would take at  
1688 least 10 months to get to the end of the vaccine trials. As it turns  
1689 out, it was more like eight months, and that was entirely because we  
1690 had the infrastructure in place.

1691           ██████████: I think we can go off the record.

1692           ██████████ We can go off the record.

1693           [Recess.]

1694                           FURTHER EXAMINATION BY THE MAJORITY

1695 BY MR. BENZINE:

1696           Q.    Very briefly, we left off talking about Dr. Chen and that  
1697 you were generally aware that she or someone had visited Wuhan  
1698 Institute of Virology a couple of years when it opened; is that  
1699 correct?

1700           A.    That is correct.

1701           Q.    How were you made aware of that visit?

1702 A. I believe Mr. Handley told me.

1703 Q. Did he tell you anything else about the visit, anything  
1704 that she saw or experienced?

1705 A. He told me that there had been a comment about reverse  
1706 engineering Ebola by a technician in the hallway.

1707 Q. What did you make of that comment?

1708 A. I didn't make very much of it all. The notion that they  
1709 would reverse engineer Ebola was sort of absurd. If the Chinese  
1710 Government gave permission to work on Ebola, there are lots of easier  
1711 ways of getting Ebola than to try and generate it in the laboratory.

1712 Q. Are there inherent dangers in reversing engineering?

1713 A. I wouldn't know. I don't know anything about it.

1714 Q. Do you recall when Dr. Chen left her post in Beijing?

1715 A. I don't know exactly.

1716 Q. Does December 2019 sound about right?

1717 A. It's entirely possible.

1718 Q. All right. Did you ever meet with Dr. Chen after the  
1719 pandemic began?

1720 A. I don't believe so.

1721 Q. I guess one of the -- do you know if she ever met with Dr.  
1722 Fauci?

1723 A. I don't know one way or the other.

1724 Q. One of the things we're going to try to figure out is you  
1725 have an U.S. Government employee that has been to the Wuhan Institute  
1726 of Virology that was in China the month the pandemic began, and it's

1727 unclear that she ever briefed anyone in NIAID's leadership regarding  
1728 that time.

1729 A. I can't say who she briefed or didn't brief.

1730 Q. But not you?

1731 A. Not me.

1732 MR. BENZINE: Before we get back to the exhibits that the  
1733 Minority introduced, I want to introduce Majority Exhibit 3 just real  
1734 briefly.

1735 [Majority Exhibit No. 3 was  
1736 marked for identification.]

1737 BY MR. BENZINE:

1738 Q. This is an email chain between Dr. Chen and Dr. Shi at the  
1739 Wuhan Institute of Virology, and it begins in the back there and it's  
1740 just asking for information on the Coronavirus. Did you know that  
1741 anyone on your team had reached out to the Wuhan Institute of  
1742 Virology?

1743 A. Somebody told me that there had been communications with  
1744 people in China about the virus.

1745 Q. Do you remember who told you?

1746 A. No.

1747 MR. BENZINE: All right. Thank you.

1748 We can move on and we're going to, for ease, reference  
1749 Minority exhibits that have already been introduced, but I want to  
1750 start with Majority Exhibit 4.

1751 [Majority Exhibit No. 4 was



1752 marked for identification.]

1753 BY MR. BENZINE:

1754 Q. This is an email chain from January 31st between Dr.  
1755 Andersen, Dr. Fauci and Dr. Farrar. It begins on the page marked 752  
1756 where Dr. Farrar reaches out to Dr. Fauci and says: "We'd really like  
1757 to speak with you this evening."

1758 Dr. Fauci's assistant says: "We'll call shortly."

1759 And then it appears a phone call happened and Dr. Farrar  
1760 asked Dr. Fauci to speak with Dr. Andersen.

1761 The email on the bottom of the first page, 750, is Dr.  
1762 Fauci's kind of recounting of that call with Dr. Andersen and, in  
1763 particular, I want to highlight that Dr. Andersen related his concern  
1764 about the Furin site mutation and the site protein in COVID-19. Dr.  
1765 Fauci asked him to get a group together, and if everyone agrees, they  
1766 need to report it to the appropriate authorities in the U.S., the FBI,  
1767 in the U.K., MI5, and then at the end, he ends: "In the meantime, I  
1768 will alert my U.S. Government official colleagues of my conversation  
1769 with you and Kristian and determine what further investigation they  
1770 recommend."

1771 Did Dr. Fauci ever alert you of this phone call with Dr.  
1772 Andersen?

1773 A. I became aware. I don't know if it was from Dr. Fauci or  
1774 how I became aware that there had been such a conversation.

1775 Q. You don't recall how you became aware of the conversation?

1776 A. No.

1777 Q. Do you recall the contents of how the conversation was  
1778 relayed to you, what they told you?

1779 A. No.

1780 MR. BENZINE: Going on to Majority Exhibit 5.

1781 [Majority Exhibit No. 5 was  
1782 marked for identification.]

1783 BY MR. BENZINE:

1784 Q. This is another email chain, this time it flows on to  
1785 February 1st, but at the very bottom, you can see Mr. Folkers  
1786 forwarding what the Minority introduced as Exhibit B, that article  
1787 and, obviously, it went to Dr. Fauci, as it appears Mr. Folkers  
1788 forwards a lot of articles a lot of the time, and then Dr. Fauci  
1789 forwards it to Drs. Farrar and Andersen, and this when Dr. Andersen  
1790 replies back that: "The unusual features of the virus make up a  
1791 really small part of the genome. One has to look really closely at  
1792 all of the sequences to see that some of the features potentially look  
1793 engineered. We have a good team lined up to look very critically at  
1794 this. So we should know much more by the end of the weekend. I  
1795 should mention that after discussions earlier today, Eddie, Bob, Mike,  
1796 and myself all find the genome inconsistent with expectations from  
1797 evolution theory."

1798 And Dr. Fauci responds to Dr. Andersen: "Thanks, Kristian.  
1799 We'll talk soon on the call."

1800 Were you aware of any of these discussions?

1801 A. Not at the time.

1802 Q. When did you become aware of them?

1803 A. I'm not sure.

1804 Q. How did you become aware of them?

1805 A. I think there's been a lot of conversations over the course  
1806 of the last couple of years about these conversations. I don't recall  
1807 when I first saw them.

1808 Q. Conversations with NIAID or public reporting?

1809 A. Both.

1810 Q. Do you recall the contents of any of the conversations  
1811 internal to NIAID?

1812 A. No.

1813 Q. No?

1814 A. I do not recall any of the conversations specifically.

1815 Q. Dr. Fauci didn't come to you and say, Hey, this group of  
1816 virologists thinks that COVID-19 looks consistent with evolutionary  
1817 theory?

1818 A. No. It would be unlikely that he would do so. I'm the  
1819 transplant surgeon. He's not going to come to me and say, Oh, this is  
1820 what the virologists are saying.

1821 Q. That's fair. Not even as, like you said, kind of like the  
1822 chief of staff?

1823 I mean on the Hill, bosses come to chiefs of staff with  
1824 things that are outside their wheelhouse all the time. He never came  
1825 to you with this?

1826 A. Well, I would have been included in various meetings, etc.,

1827 but no. He wouldn't have come to me with an opinion, asking an  
1828 opinion or expressing an opinion.

1829 Q. Do you recall any opinions expressed in meetings by other  
1830 people?

1831 A. No.

1832 Q. So now we're going to flip to Minority Exhibit No. --  
1833 Did you want to --

1834 BY CONGRESSMAN JORDAN:

1835 Q. Doctor, describe your relationship with Dr. Fauci.

1836 A. We're cordially friendly. We're not intimate. I saw him  
1837 every day. I'm not sure what else to tell you.

1838 Q. You've been the chief of staff for how long for him?

1839 A. Seventeen years.

1840 Q. Seventeen years, you've worked with him?

1841 In the first hour -- well, let me ask this: Actually, the  
1842 first hour, you said, I think when Mitch was asking you about the  
1843 contacts with different people, you said you rarely got direct emails,  
1844 you were mostly copied; but you get this email that the Democrats  
1845 introduced in the last hour at, it looks like, midnight on Saturday,  
1846 February 1, 2020.

1847 So was that unusual then?

1848 A. That would be unusual.

1849 Q. Have you ever sent emails at midnight before?

1850 A. I can't specifically recall one, no.

1851 Q. But you rarely got emails from him, period, and now you get

1852 one at midnight on --

1853 A. I wouldn't --

1854 Q. -- February 1st?

1855 A. I'm sorry. I wouldn't say rarely.

1856 Q. Well, I'm just saying what you said the first hour when  
1857 Mitch asked you. You said you were mostly copied, rarely got direct  
1858 emails from Dr. Fauci.

1859 A. And that is true.

1860 Q. Okay. So you rarely got direct emails from him. Now  
1861 you're getting one at midnight on February 1st.

1862 Did you read it when you got it or did you receive it the  
1863 next morning? Were you asleep?

1864 A. I think I saw it the next morning.

1865 Q. Okay. Let's go through the email, if we can.

1866 The first sentence says: "It's essential that we speak  
1867 this a.m."

1868 Why was it essential?

1869 A. I don't know why he thought it was essential.

1870 Q. Why did you think it would be essential?

1871 A. I didn't have any opinion. I didn't know what the  
1872 conversation was going to be at that point.

1873 Q. So it could have -- you didn't know from this email that it  
1874 was going to be about COVID or if it was about COVID?

1875 Do you remember what the --

1876 A. Well, I think he included the Baric paper, had he not?

1877 Q. The Baric paper and the email. So that's what told you it  
1878 was going to be about COVID?

1879 A. Um-hum.

1880 Q. Okay. And after you read those, could you figure out why  
1881 it was essential that he had to speak to you the next morning?

1882 A. I don't recall exactly, no.

1883 Q. Okay. He says: "Keep your cellphone on."

1884 Did he call you between midnight -- or when did he call  
1885 you? When did you talk to him next after receiving this?

1886 A. At some point in the morning, Sunday morning, there was a  
1887 conversation.

1888 Q. And was it before his conference call with Secretary Azar  
1889 or after? Do you recall?

1890 A. I do not recall.

1891 Q. Did he talk to you about that phone call when you did talk  
1892 to him?

1893 Well, you don't know if it was before or after. Do you  
1894 remember approximately what time you talked to him?

1895 A. I do not.

1896 Q. And in that conversation, what did he -- when you did talk  
1897 to him, what did you talk about?

1898 A. I think we talked about the Baric paper and what kind of  
1899 research it involved.

1900 Q. Okay. And then it says: "You will have tasks to do."

1901 What did he task you to do?

1902           A.    Basically, to understand -- to read the paper and to  
1903 understand it.

1904           Q.    Well, but that's clear from the email.  It looks like when  
1905 he was going to talk you, there was additional tasks:  "You will have  
1906 tasks to do today that must done."

1907                    Was it in addition to reading?

1908                    I guess I'm looking at this tone:  Keep your cellphone,  
1909 read the paper, I'm going to call you in the morning, and you're going  
1910 to have other things to do.

1911                    So was that normally how you and Dr. Fauci operated?

1912                    Because, I mean, my chief of staff has actually been with  
1913 me for 17 years, worked for us for 17 years, and I typically don't  
1914 talk to him in that way.  I'm just wondering, was that usual?

1915           A.    I would say it was not usual.

1916           Q.    And you don't know what the tasks were in addition to  
1917 reading the paper and the email that were contained in this email  
1918 message?

1919           A.    I really don't, no.

1920           Q.    Okay.  And do you recall any other emails like this one  
1921 from Dr. Fauci?

1922           A.    I don't know what you mean.

1923           Q.    Keep your cellphone on.

1924                    Hugh, keep your phone on.  Read the paper.  I'm going to  
1925 call you.  It may not be before I have this conference call with the  
1926 Secretary, but make sure you've got your phone on when I call, because

1927 you're going to have tasks that must be done.

1928 That's a pretty intense kind of email. Did you ever get an  
1929 email like this from Dr. Fauci that you recall?

1930 A. Probably not in exactly the same tone.

1931 Q. Now, in the last hour, you said you got real concerned  
1932 about COVID about mid-January, so two weeks prior to this. So in that  
1933 two-week time frame, were any communications from Dr. Fauci with this  
1934 kind of intensity?

1935 A. I don't recall any.

1936 Q. And, certainly, do you recall any midnight emails before  
1937 this one on February 1st?

1938 A. Not specifically.

1939 Q. Okay. Then again just refresh for us. What do you think  
1940 prompted Dr. Fauci to send you this email?

1941 One, first, you rarely get emails from him, you never got  
1942 one at midnight, you hadn't gotten one in two weeks with this kind of  
1943 intensity.

1944 What prompted it, in your mind, that he would send it to  
1945 you at 12:29 a.m. on Saturday, February 1, 2020?

1946 A. I don't know what was prompting him.

1947 Q. And let's go back to the conversation you had with him the  
1948 next morning. You can't recall what you talked about in that call?

1949 A. He wanted me to read the paper and understand it.

1950 Q. So when he called you, you hadn't read the paper yet?

1951 A. I assume that I had, but I really don't remember.



1952 Q. Well, if you had read the paper, you'd have given an  
1953 assessment when he called you. You would have said here's what I've  
1954 gathered from the paper. That's why one of the things he wanted you  
1955 to do was to read the paper, but you don't know if you talked to  
1956 him -- when he called you, if you had already read the paper or not?

1957 A. I have to assume that I had already read the paper, but I  
1958 don't recall.

1959 Q. Okay. Then you respond back to him in an email. So this  
1960 is after you had talked to him. I think this was Exhibit C that the  
1961 Democrats had last hour.

1962 You respond back the next day -- excuse me -- the same day,  
1963 11 hours later: "The paper you sent me says the experiments were  
1964 performed before the gain-of-function pause, but have since been  
1965 reviewed and approved by NIH. I'm not sure what that means since  
1966 Emily assured that no Coronavirus work has gone through the P3  
1967 framework. She will try to determine if we have any distant ties to  
1968 this work abroad."

1969 So you certainly read the paper by this time, by the time  
1970 you respond back to him at 11:47 a.m.; is that right?

1971 A. Yes.

1972 Q. Who is Emily again? Dr. Emily, what her last name?

1973 A. Dr. Emily Erbelding, the director of the Division of  
1974 Microbiology and Infectious Diseases.

1975 Q. Okay. And tell me about that conversation with Dr.  
1976 Erbelding again.

1977 A. I don't remember the specifics of it. What I recall is  
1978 what I put down in the email. Emily told me that no Coronavirus  
1979 research has gone through the P3CO framework.

1980 Q. Well, isn't that a problem? Doesn't it have to go through  
1981 the PC framework if it's Coronavirus research?

1982 A. No.

1983 Q. If it's gain-of-function research, it does?

1984 A. If it's gain-of-function research of concern, it might lead  
1985 to enhanced pathogens of pandemic potential.

1986 Q. Well, explain this email then to me, because in the first  
1987 sentence, you say the experiments were performed before the pause in  
1988 gain-of-function, but have since been review and approved.

1989 So does that mean they are now continuing after the pause  
1990 and it's gain-of-function research that's being done?

1991 That's how I read it. Is that what you meant?

1992 A. What I think I meant was that Ralph Baric in the paper  
1993 talked about gain-of-function research, and so I assumed it was  
1994 gain-of-function research of concern. As it turns out, it had been  
1995 through a review in the Division of Microbiology and Infectious  
1996 Diseases and they determined that it was not research that was of  
1997 concern.

1998 Q. Wait. But when you say not research of concern, does that  
1999 mean it's gain-of-function or not?

2000 A. As I said earlier, "gain-of-function" is a very broad term.  
2001 There's lots of gain-of-function research. The gain-of-function

2002 research of concern is that it would lead to enhanced pathogens of  
2003 pandemic potential.

2004 Q. And was this the subject that Dr. Fauci was concerned  
2005 about? Does that refresh your memory?

2006 Was one of the tasks to determine what kind of research was  
2007 being done? Was that one of the things he was concerned about?

2008 A. I don't recall specifically.

2009 Q. You don't recall. Again, you don't know what these  
2010 specific tasks were that he asked you to do at 12:30 a.m. on Saturday,  
2011 February 1, 2020?

2012 "You will have tasks to do today that must be done."

2013 You don't recall what those specific tasks were?

2014 A. The only tasks I recall were reading the paper and trying  
2015 to understand it and what kind of review we had done of it.

2016 Q. Then why would he put that sentence there?

2017 Because the sentence before, he says read this paper as  
2018 well as the email that he was going to forward to you, and we saw that  
2019 email that he forwarded a minute or so later. Why not just end the  
2020 thing there? Why would he then say you have you have tasks to do?

2021 That strikes me as something additional to reading the  
2022 paper and reading the email.

2023 A. I don't know.

2024 Q. Okay. You can't recall?

2025 A. I don't know what was on his mind when he wrote that.

2026 Q. And he didn't tell you when you talked to him the next

2027 morning?

2028 A. I don't recall any additional tasks.

2029 Q. Okay. And is it possible that gain-of-function was defined  
2030 in a way to avoid the P3 framework?

2031 A. I'm not sure what that question is asking.

2032 Q. Well, you said: The paper you sent me says the experiments  
2033 were performed before the gain-of-function pause, but they have  
2034 subsequently, or since, been reviewed and approved by NIH.

2035 So they're doing some kind of gain-of-function research.  
2036 You said your understanding was that it may have required the P3  
2037 framework, but after talking with Emily, Dr. Erbeling, it didn't  
2038 require going through the P3 framework, and I'm just wondering was  
2039 gain-of-function defined in a way to avoid the P3 framework?

2040 A. Again, I don't know. Who's defining gain-of-function?

2041 Q. I don't know. I'm wondering why it didn't go through the  
2042 P3 framework.

2043 A. Because it didn't meet the criteria for research that would  
2044 lead to a pathogen of potential pandemic.

2045 Q. Okay. What does this sentence mean here that you wrote:  
2046 "She will determine -- the last sentence in the email you sent back.

2047 "She will determine if we have any distant ties to this  
2048 work abroad."

2049 What does that mean?

2050 A. Ralph Baric was doing experiments on Coronaviruses. Dr.  
2051 Shi was on the paper. So the question was how are we involved with

2052 Dr. Shi.

2053 Q. And how were we? What's your understanding of that?

2054 A. My understanding eventually turned out to be that we had  
2055 been funding EcoHealth Alliance to study Coronaviruses in the Wuhan  
2056 laboratory.

2057 BY MR. BENZINE:

2058 Q. But not through Baric?

2059 A. Not through Baric, as I understand it.

2060 Q. You also, I think in the first hour said, beyond the Baric  
2061 paper, over the course of pandemic, NIAID did multiple reviews of  
2062 whether or not the EcoHealth experiment at the Wuhan Institute of  
2063 Virology constituted gain-of-function of concern or should have gone  
2064 through the P3.

2065 Can you elaborate a little bit more on that? I guess why  
2066 didn't that come up here?

2067 A. Why did it not come up here?

2068 Q. Why was this just focused on Baric, not EcoHealth?

2069 A. The paper he sent me was a Baric paper.

2070 Q. The article, though, is about EcoHealth.

2071 A. Again, I don't recall reading the article. I'm sure I did,  
2072 but I don't recall what was in it.

2073 Q. Can you elaborate a little bit more on the reviews, then,  
2074 of the EcoHealth grants to determine whether or not they were  
2075 gain-of-function?

2076 A. We had actually quite a few conversations with Dr. Fauci

2077 and Erik Stemmy about what factors did you look at when you reviewed  
2078 the EcoHealth Alliance research to determine whether it needed to go  
2079 through the P3CO framework.

2080 Q. Were these conversations in conjunction with media requests  
2081 or congressional testimony or press conferences?

2082 A. I think all of the above, but I don't recall specifically.

2083 MR. BENZINE: Okay.

2084 BY CONGRESSMAN JORDAN:

2085 Q. Talk to me about the conference call that takes place  
2086 shortly after -- I believe it's the very next day.

2087 Refresh my memory.

2088 MR. BENZINE: February 1st.

2089 BY CONGRESSMAN JORDAN:

2090 Q. The same day. That's right, the same day.

2091 Were you involved in coordinating that?

2092 A. No.

2093 Q. You had no involvement whatsoever?

2094 A. No.

2095 Q. Did you know it was going to happen?

2096 A. No.

2097 Q. Okay. Did you get a readout after the phone call from  
2098 anyone about what took place on the call?

2099 A. Not immediately. I don't know when I first learned about  
2100 the conversation.

2101 CONGRESSMAN JORDAN: Okay.

2102 BY MR. SLOBODIN:

2103 Q. Dr. Auchincloss, can we go back to this email that you sent  
2104 to Dr. Fauci. It says that, I guess, the experiments in the Baric  
2105 paper were performed before the gain-of-function pause. So that went  
2106 into effect in October 2014, as I recall. So it predated when that  
2107 pause went into effect, and then you wrote but it has since been  
2108 reviewed and approved by NIH and that no Coronavirus work has gone  
2109 through the P3 framework.

2110 So does that mean it was reviewed and approved under the  
2111 P3CO framework?

2112 A. When I'm referring to the P3CO framework, I'm referring to  
2113 sending research applications down to the department for high-level  
2114 review. The research did undergo review in the Division of  
2115 Microbiology and Infectious Diseases where they determined that it did  
2116 not require review at the department level.

2117 Q. So just a point of clarification: So we're talking  
2118 about -- I just want to make sure I'm understanding this properly. So  
2119 the experiments were already done. They were conducted. They were  
2120 conducted several years ago, and then those experiments were then  
2121 re-reviewed under a policy that wasn't in effect at the time those  
2122 experiments were conducted, but is now being reviewed under this P3CO  
2123 framework?

2124 A. So I don't know exactly what experiments Dr. Baric was  
2125 doing at that point. I have to say I assume he was still doing the  
2126 kind of experiments that he was referring to in the paper.

2127 Q. Right, but I'm trying to get a different -- it's a process  
2128 question.

2129 Why would NIH be going back to an experiment that's already  
2130 done?

2131 Suppose you guys went back and found out, Oh, it is subject  
2132 to the P3CO framework and we do have to send it downtown; what would  
2133 be the point of that?

2134 The experiment is already done. You can't -- you know,  
2135 it's out of the bottle. What would be the point? What's the point of  
2136 doing a review of experiments that are done in the past under the  
2137 P3CO?

2138 A. The point of doing the review would be that he's,  
2139 presumably, still doing experiments of this sort.

2140 BY MR. STROM:

2141 Q. Could I ask, sir, is an element of this it comes prior to  
2142 the pause, the initial Baric experiments; you then have EcoHealth's  
2143 proposal during the pause, which the relevant division, Dr.  
2144 Erbeling's division, determined wasn't subject to the pause.

2145 Is that -- so when you say performed before the  
2146 gain-of-function pause, but has since been reviewed and approved by  
2147 NIH, that was, presumably, reviewed and approved both during the pause  
2148 and then subsequently again during P3CO?

2149 A. I have to assume so, but I don't know precisely when it was  
2150 reviewed.

2151 Q. I think we're struggling a little bit with the "not sure



2152 what that means since Emily assured that no Coronavirus work has gone  
2153 through the P3CO framework", and so as I understand it, when  
2154 the -- and this is from talking to Dr. Stemmy and Erbelding. When the  
2155 P3CO framework was put in place, everything that was sort of ongoing  
2156 at that time was subject to sort of a re-review, because there are  
2157 some slight differences between that and the policy during the  
2158 gain-of-function pause.

2159           So is some of the surprise here, "not sure what that means  
2160 since nothing has going gone through P3", is that you guys are talking  
2161 about a different thing, talking about review under the pause versus  
2162 review under P3CO?

2163           A.    No. I was responding to comments in the paper that Ralph  
2164 Baric wrote about gain-of-function research. So I assumed that this  
2165 was truly research of concern, gain-of-function research of concern.  
2166 If it were, then it would go through the P3CO framework review.

2167           The reason that it didn't go through the P3CO framework  
2168 review is that the people in DMID had reviewed the experiments and  
2169 come to the conclusion they didn't need the P3CO review.

2170 BY MR. BENZINE:

2171           Q.    Did Dr. Erbelding confirm that to you?

2172           A.    Did she confirm that to me?

2173           Q.    Did she confirm that DMID reviewed the Baric experiments  
2174 and it didn't --

2175           A.    Yes.

2176 BY MR. SLOBODIN:

2177 Q. When you looked at the Baric paper, did you -- and later  
2178 on, you were looking to see if there was any distant ties to the work  
2179 abroad. So at some point in time, was there any dots connected  
2180 between the type of work, the research Coronavirus viruses that were  
2181 being studied in the Baric paper with the research that EcoHealth  
2182 Alliance was funding at the Wuhan Institute of Virology that involved  
2183 some of the very strains that Dr. Baric and Dr. Shi were warning in  
2184 the paper about, Oh, these viruses look primed for emergence, you  
2185 know, we've gone this far, but no farther because there's some risk  
2186 here, but things in that paper that gave you the notion that there was  
2187 gain-of-function research concerns, at some point later, did you see a  
2188 connection between that discussion and what was being funded under the  
2189 EcoHealth grant through the sub-award that the Wuhan Institute of  
2190 Virology for the humanized mice experiments actually used some of the  
2191 same strains that are mentioned in that paper?

2192 A. I'm sorry. Say that again.

2193 BY MR. STROM:

2194 Q. Maybe this might help: Exhibit B from the Minority, sir,  
2195 the John Cohen article.

2196 A. Yes.

2197 Q. One of the -- and this is at the end on page 2430. This  
2198 article, we talked about it, but it was forwarded to you by Dr. Fauci,  
2199 and this is the last full paragraph on 2430.

2200 "Daszak's and Shi's group have for eight years been  
2201 trapping bats in caves around China to sample their feces and blood

2202 for viruses. They say they've sampled more than 10,000 bats. They  
2203 have found some 500 Novel Coronaviruses, about 50 of which fall close  
2204 to the SARS virus on the family tree, including RaG13."

2205           So this article, I think, briefly surmises what EcoHealth  
2206 and the WIV were doing together, and so I think what Alan is asking  
2207 for is the linkup between the Baric paper and then its relation to the  
2208 EcoHealth Alliance WIV research; and, frankly, you know, looking at  
2209 this article, one of the things that stands out is sort of the  
2210 geographic, I guess, fact that these viruses were all collected in  
2211 southern China and maybe northern Laos and into China, but that the  
2212 virus emerges in Wuhan where the lab is located and that this lab also  
2213 happens to have at the time prior to outbreak the closest known  
2214 relative to the Novel Coronavirus.

2215           Does that at all enter into your thinking or into NIAID's  
2216 thinking as you're sort of trying to understand what NIAID's funding  
2217 is to EcoHealth?

2218           A. I believe that my issue about funding in China was raised  
2219 by the fact that Shi was on the Baric paper, and I didn't know what  
2220 that meant, what kind of collaboration was that.

2221           MR. STROM: Okay.

2222 BY CONGRESSMAN JORDAN:

2223           Q. What do you think Dr. Fauci was so concerned about when he  
2224 sent you that email at 12:30 at night?

2225           What do you think drove him to send that?

2226           A. I can't speak to that.

2227 Q. I mean, I just find it interesting that you said that you  
2228 rarely get direct emails from him. Then you get one, a direct email,  
2229 at 12:30 at night and the tone is it's essential we speak, keep your  
2230 phone on, read the paper, and you're going to have tasks to do today.

2231 Don't you think Dr. Fauci is probably a little concerned  
2232 about the very thing you responded back to after reading this paper,  
2233 that it was gain-of-function research being done that hadn't been  
2234 through the P3CO process at this lab in China?

2235 Isn't it logical to assume that?

2236 A. I don't think so, no.

2237 Q. What do you think it is?

2238 A. I didn't assume anything.

2239 Q. Well, you just assumed it wasn't that. So you did assume  
2240 something.

2241 I'm asking you when you get an email like this and, based  
2242 on your testimony, you said you've never gotten before, it sure seems  
2243 to me like he was concerned about this may be coming from a lab where  
2244 we were paying for gain-of-function research.

2245 You say you have no idea?

2246 A. I can't speak to what he was thinking when he wrote that  
2247 email.

2248 Q. Was there any additional conversations you had with Dr.  
2249 Fauci after you sent him this email back at 11 in the morning on  
2250 February 1st about the subject?

2251 A. I don't recall any specific conversations.

2252 Q. Why did he task you to do it if you're not the expert?

2253 You said I don't know how many times today, you said you're  
2254 not the expert in this, you're transplant surgery in your career. We  
2255 appreciate that, but you said you're not the expert several times.

2256 Why did he ask you to do it?

2257 A. I, again, can't speak to that. I think he assumed that I  
2258 would talk to the relevant people.

2259 Q. Well, why didn't he just call Emily?

2260 Why didn't he talk to the person who understands the P3  
2261 framework and what's gain-of-function and what isn't?

2262 A. I can't speak to what he was thinking.

2263 CONGRESSMAN JORDAN: All right.

2264 BY MR. BENZINE:

2265 Q. The last kind of thing on -- well, maybe two on this email:  
2266 Had you made the link between Dr. Shi and EcoHealth by this point?

2267 A. I don't recall specifically, but as I see this paper, which  
2268 I'm sure I read, I should have known that there was a relationship  
2269 between EcoHealth and Dr. Shi.

2270 Q. I guess that's where the "trying to determine if there's  
2271 any distant ties to this work abroad" kind of like insinuates that  
2272 that link hadn't been made yet.

2273 A. In my mind, apparently.

2274 Q. Okay. Do you recall, was it closely after that Dr.  
2275 Erbeling would have come back with we were funding EcoHealth, who  
2276 also had relationship with Dr. Shi?

2277 A. I have to assume so, but I don't recall.

2278 Q. Then kind of what Congressman Jordan was saying, the reply  
2279 from Dr. Fauci, Okay, stay tuned, also implies that there were some  
2280 followup conversations. Do you recall any followup conversations?

2281 A. There may well have been, but I don't specifically recall.

2282 MR. BENZINE: We touched on it a little bit, the -- I'll go  
2283 ahead and introduce it, just so we have in the record, as Majority  
2284 Exhibit 6.

2285 [Majority Exhibit No. 6 was  
2286 marked for identification.]

2287 BY MR. BENZINE:

2288 Q. So this is -- and the Congressman touched on this a little  
2289 bit. At the bottom is an invitation from Dr. Farrar to Dr. Fauci to  
2290 join a call with Drs. Andersen, Garry, Drosten, Fouchier, Eddie  
2291 Holmes, Marion Koopmans, Patrick Vallance, and then Dr. Fauci forwards  
2292 that invitation to Dr. Collins.

2293 Dr. Collins says he'll be there. Dr. Tabak kind of invites  
2294 himself, and then Dr. Collins notes, you know, that's fine for  
2295 Dr. Tabak to be there, but Jeremy says he wants to keep this a really  
2296 tight group and asked Dr. Fauci what he thinks, and it's unclear what  
2297 Dr. Fauci responded.

2298 You said you weren't on the call. Correct?

2299 A. I was not on the call.

2300 Q. And you said you subsequently became aware of the call?

2301 A. Somewhere down the road, I learned about the call.

2302 Q. Do you recall from whom?

2303 A. No.

2304 Q. Just ballpark it. A long ways down the road like when the  
2305 emails became public in that summer or did anyone come to you and say,  
2306 Hey, we just had this call?

2307 A. I don't recall, but I think it's probably more like the  
2308 latter.

2309 I'm sorry. Prior, that I learned as a result of FOIA  
2310 requests during the summer.

2311 Q. So to the best of your recollection, Dr. Fauci never came  
2312 to you and said I just had this call about the origins of COVID?

2313 A. Not specifically to me.

2314 Q. Did you hear it through the grapevine from someone else?  
2315 You said not specifically to you.

2316 A. It may have come up in meetings that I was part of, but I  
2317 don't specifically recall.

2318 MR. BENZINE: Okay. I want to introduce Majority Exhibit  
2319 7.

2320 [Majority Exhibit No. 7 was  
2321 marked for identification.]

2322 BY CONGRESSMAN JORDAN:

2323 Q. Did you talk to Dr. Fauci about testifying today?

2324 A. I'm sorry?

2325 Q. Did you talk to Dr. Fauci about your testimony today?

2326 A. No.

2327 BY MR. BENZINE:

2328 Q. On that, when is the last time that you've spoken to Dr.  
2329 Fauci?

2330 A. I think it was about three weeks ago.

2331 Q. Not about the testimony today?

2332 A. Not at all.

2333 BY CONGRESSMAN JORDAN:

2334 Q. Did you discuss with Dr. Fauci any of the emails that you  
2335 thought were likely to come up today?

2336 A. I have not discussed them with Dr. Fauci.

2337 MS. GANAPATHY: Mitch, the last exhibit, can you also give  
2338 ASL a copy of that?

2339 Oh, you did. Sorry.

2340 BY MR. BENZINE:

2341 Q. SO this is Majority Exhibit 7. There's some back and forth  
2342 with the WHO on the first page, but the second page is where I want to  
2343 draw your attention to the large block of texts from Dr. Fauci. It's  
2344 summarizing the February 1st phone call, talking about they talked  
2345 about the theory that there were HIV sequences introduced in the  
2346 COVID-19, which everyone kind of dispelled pretty quickly, but then  
2347 kind in the top third, there's a sentence that starts with that is not  
2348 what they were concerned about.

2349 Dr. Fauci wrote: "That is not what they were concerned  
2350 about. They were concerned about the fact that upon viewing the  
2351 sequencing of several isolates of the Novel Coronavirus, there were



2352 mutations in the various that would be most unusual to have evolved  
2353 naturally in the bats and that there was suspicion that mutation was  
2354 intentionally inserted. The suspicion was heightened by the fact that  
2355 scientists in Wuhan University are known to have been working on  
2356 gain-of-function experiments to determine the molecular mechanism  
2357 associated with bat viruses adapting to human infection, and the  
2358 outbreak originated in Wuhan."

2359 I want to unpack it a little bit and, again, I know you're  
2360 not Dr. Fauci. So I struggle getting into his mind.

2361 It appears this call happened after your conversation with  
2362 him after your conversation with Dr. Erbeling about Baric and  
2363 EcoHealth and Shi. It would appear, and it's not clear whether or not  
2364 Dr. Fauci heard on this call or heard it from you, but that he was  
2365 referencing your research in digging up that gain-of-function was  
2366 happening in Wuhan.

2367 A. I don't know what he was referencing.

2368 Q. After the phone call, did Dr. Fauci -- after this phone  
2369 call, the February 1st conference call, did Dr. Fauci ever come to  
2370 back to you and say I need more information about EcoHealth in Wuhan?

2371 A. I don't specifically recall, no.

2372 Q. They also talk about kind of the unusual sequences and that  
2373 it appears that some was intentionally inserted. Is that -- making  
2374 chimeric viruses, kind of splicing pieces of viruses, would that be  
2375 considered gain-of-function?

2376 A. Not necessarily.

2377 Q. What would make it gain-of-function?

2378 A. If it was likely to create an enhanced pathogen of pandemic  
2379 potential.

2380 Q. So we've heard a few times now that in order to meet that  
2381 definition, it has to be a virus that has already emerged in humans.

2382 A. It is known to infect humans.

2383 Q. To us, that seems kind of like very limiting in what could  
2384 be dangerous experiments, that there could be, as kind of exhibited by  
2385 COVID-19, Novel Coronaviruses that are unknown to infect humans that  
2386 are poised for emergence, and it's possible to take a Coronavirus that  
2387 cannot infect humans and make it infect humans, kind along the lines  
2388 of what Dr. Fouchier did with the flu.

2389 Why limit it to just viruses that can infect humans?

2390 A. Well, I didn't come up with the P3CO framework.

2391 Q. Do you think, sitting here today, that maybe it's too  
2392 limiting?

2393 A. I really am not in a position to make that judgment one way  
2394 or the other.

2395 Q. Okay. The kind of result of this phone was a paper called  
2396 "The Proximal Origin of SARS-CoV-2". Have you read that paper?

2397 A. I have seen that paper.

2398 Q. Have you read it?

2399 A. I'm sure I read it at some point.

2400 Q. Do you recall when you became aware of it?

2401 A. No.

2402 Q. Did Dr. Fauci ever talk to you about that paper?

2403 A. Not that I recall.

2404 Q. Moving from that a little bit, we discussed very briefly  
2405 Dr. Lane's 2020 trip to China, and we talked to Dr. Lane and like,  
2406 wow, the process he went through to get on that trip. I don't know if  
2407 he ever talked to you about it, but he landed in Tokyo, went straight  
2408 to the embassy, went straight to Beijing, quite the event, and the  
2409 logistics pulled off by NIAID's international office and the State  
2410 Department.

2411 He returned kind of like late February. Did you get a  
2412 debrief from him on his trip?

2413 A. No, not specifically.

2414 Q. Do you recall if anyone got a debrief?

2415 A. I don't know.

2416 Q. Okay. Do you know why -- like why wouldn't you get a  
2417 debrief?

2418 A. It's a need to know kind of issue. I don't know what he  
2419 learned and who he thought needed to know about it.

2420 Q. So we've talked a decent amount, and to avoid putting more  
2421 paper in front of you, I'm just going to -- if you need to refresh  
2422 your recollection, I have it, but we've talked a decent amount about  
2423 gain-of-function and kind of the definition surrounding  
2424 gain-of-function and it has kind of -- excuse the pun -- evolved from  
2425 kind of like the original definition on the NIH website for a long  
2426 time was a type of research that modifies a biological agent so that



2452 the kind of semantics here is that what a layperson thinks of as  
2453 gain-of-function, I think falls under this definition: Any research  
2454 that attributes a new attribute to a biological agent, whether it's  
2455 taking avian influenza virus that can't infect humans or making it  
2456 able to infect humans or taking a bat Coronavirus that can't infect  
2457 mice and making it infect mice, either of which would qualify as  
2458 gain-of-function under that definition.

2459 Do you agree?

2460 A. I do, and I think that this is making the same points that  
2461 I've been making earlier. There's gain-of-function which is common in  
2462 virology and that's not the same as the gain-of-function research of  
2463 concern.

2464 Q. So I guess, and the Congressman was kind of touching on  
2465 this, like the experiments that Dr. Baric did, the experiments that  
2466 we'll talk about later that EcoHealth did, EcoHealth at the Wuhan  
2467 Institute, Dr. Baric just in collaboration with the Wuhan Institute,  
2468 would fall under this layman's definition of gain-of-function, that  
2469 they were taking viruses that either were not very transmissible and  
2470 ramping up their transmissibility or providing them a new pathway for  
2471 infection.

2472 Do you agree?

2473 A. I think that's true.

2474 Q. Okay. So at some point, and I don't have the testimony in  
2475 front of me, but at some point, it's playing semantics. When asked  
2476 did Dr. Baric conduct gain-on-function research, the answer is yes.

2477 Did Dr. Baric conduct gain-of-function research that would be covered  
2478 by the P3, the answer is no.

2479 Is that a fair characterization?

2480 A. That is correct and that's what caused my confusion in my  
2481 email to Dr. Fauci when I said his paper says he was doing  
2482 gain-of-function research, but it hasn't been through the P3CO  
2483 framework, and that's because I was making the mistake of conflating  
2484 gain-of-function research with dangerous gain-of-function research.

2485 BY CONGRESSMAN JORDAN:

2486 Q. Did Dr. Erbeling, did she make that clear to you when you  
2487 talked to her before sending this email back to Dr. Fauci?

2488 A. I don't know exactly when I finally understood exactly why  
2489 I was confused.

2490 Q. Why wouldn't she just tell you? If it's as you described,  
2491 there are two kinds of gain-of-function, one that's gain-of-function,  
2492 one that's dangerous gain-of-function, to use your terminology, you  
2493 would think the person who you went to as the expert would have told  
2494 you, but you didn't say that. You said: "Not sure what that means  
2495 and Emily assured no Coronavirus work has gone through the P3CO  
2496 framework."

2497 And then the next sentence, you say "and she will try to  
2498 determine if we have distant ties to this work abroad", not whether  
2499 she'll try to determine if it's the dangerous gain-of-function, but do  
2500 we have any tie to the lab.

2501 She didn't tell you anything?

2502 A. I don't believe we had gotten that far in the conversation,  
2503 but I don't recall exactly. What I said was Baric doing  
2504 gain-of-function research that required the P3CO review and she said,  
2505 no, we haven't sent any Coronavirus experiments down for review.

2506 Q. Do you think Dr. Fauci was concerned that it should have  
2507 been, should have went through the P3CO framework and that's why he  
2508 was so fired up and sent that email at midnight?

2509 A. I don't know.

2510 BY MR. BENZINE:

2511 Q. Do you have, as principal deputy, do you have visibility  
2512 into the NIAID-level review for referral to P3?

2513 A. Emily Erbelding would report to me if there was experiments  
2514 that she thought needed to go downtown for further review.

2515 Q. You don't know if there's like some kind of standing  
2516 committee or the processes of that committee?

2517 A. There's a working group that exists within DMID to do this  
2518 kind of review.

2519 Q. Did they keep meeting minutes or meeting records?

2520 A. That, I don't know.

2521 BY CONGRESSMAN JORDAN:

2522 Q. How many times did some research proposal go in front of  
2523 the P3 Board "go downtown", I think was the terminology you used?

2524 A. How many experiments were sent downtown for the P3CO  
2525 review?

2526 Q. How often?

2527 A. I believe, but I could be wrong, I believe the three  
2528 influenza experiments were reviewed in the P3CO framework.

2529 Q. Those are the only three?

2530 A. Again, this is what I think I know, but I'm not the person  
2531 who would necessarily be aware.

2532 BY MR. STROM:

2533 Q. Was the process substantially similar during the pause and  
2534 the DMID would flag potential gain-of-function experiments subject to  
2535 the pause and you would have them then -- I guess that would have then  
2536 been referred to Dr. Collins' office, but would the NIAID Office of  
2537 the Director have some sort of concurrence role?

2538 A. I don't recall exactly how the process evolved in DMID.  
2539 I'm not sure.

2540 Q. Do you recall ever -- and this is during, I guess, the 2014  
2541 to '17 pause -- DMID flagging for you that they received a fundable  
2542 grant that proposes to do gain-of-function experiments and they want  
2543 the NIH director to consider waiving the pause?

2544 A. Again, I don't specifically recall, but I believe that  
2545 there were some experiments that were specifically exempted under the  
2546 pause, i.e., experiments involved in making vaccines and surveillance  
2547 that may have gone directly to Dr. Fauci as we think this falls under  
2548 the exception.

2549 MR. STROM: Okay. Thank you.

2550 BY MR. BENZINE:

2551 Q. I'm going to -- we're coming up on our hour and we're going



2552 to come up with a good breaking spot here, but I want to ask about  
2553 both the pause and the P3 and how they kind came to be.

2554 We you involved at all in the October 17, 2014  
2555 gain-of-function pause deliberations?

2556 A. I don't recall specifically, but I was aware of them. How  
2557 involved I was, I don't know.

2558 Q. One of the exceptions -- maybe "exemption" isn't the right  
2559 word, but there's the ability for the director of a funding agency to  
2560 grant an exemption to the pause. Dr. Fauci testified in his  
2561 deposition in Missouri v. Biden that he probably delegated that  
2562 authority to you.

2563 Do you recall that?

2564 A. The person I think that had to approve exceptions to the  
2565 pause was Dr. Collins, but I could be wrong.

2566 Q. So NIAID wouldn't be considered the funding agency; it  
2567 would be NIH?

2568 A. I believe it was NIH.

2569 Q. Okay. And then in very early January 2017, HHS released  
2570 the P3CO framework. Were you involved at all in developing that?

2571 A. No.

2572 MR. BENZINE: If there's nothing else from John or -- we  
2573 can go off the record.

2574 [Whereupon, at 12:44 p.m., a lunch recess was taken, to  
2575 reconvene at 1:30 p.m. this same day.]

2576 A F T E R N O O N S E S S I O N

2577 [1:35 p.m.]

2578 FURTHER EXAMINATION BY THE MINORITY

2579 BY [REDACTED]

2580 Q. Good afternoon, Dr. Auchincloss. We've spoken a lot today  
2581 about your role at NIAID, but a lot of it has been what's not under  
2582 your purview. So we wanted to talk a little bit about what your role  
2583 is at NIAID and what is under your purview.

2584 So can you walk us through your typical duties and  
2585 responsibilities.

2586 A. So most of my activities involved one-on-one conversations  
2587 with our division directors so that I'd understand what the issues  
2588 were, concerns, and being able to bring those concerns back to Dr.  
2589 Fauci; and then going in the opposite direction, making sure that Dr.  
2590 Fauci's priorities were clearly expressed to the division directors  
2591 and guided their activities. It's essentially a COO kind of role.

2592 Q. And you spoke about your prior work being in transplants.  
2593 Can you talk to us about your medical expertise?

2594 A. Well, I was a surgeon and a transplant immunologist as  
2595 well. I had a lab. I was funded by the NIH, by NIAID, and towards  
2596 the latter part of my pre-NIAID career, I was working for an  
2597 organization funded by NIAID and my job was to be the liaison to  
2598 NIAID.

2599 So even though I had once been a transplant surgeon, I  
2600 wasn't quite as distant from NIAID in this office as it might seem at

2601 first.

2602 Q. Getting back to your COO, as you called them,  
2603 responsibilities, that seems like it's a lot of coordination between  
2604 different parties, but not necessarily delving into the details of  
2605 what those communications might be. Is that accurate?

2606 A. That would be true.

2607 Q. So can you tell us what your participation in those  
2608 different communications would be?

2609 A. The communications between?

2610 Q. When you're reaching out to the division directors and  
2611 bringing information back to Dr. Fauci or vice versa, how would you  
2612 engage in those communications?

2613 A. Almost always one-on-one conversations, more recently,  
2614 one-on-one Zoom conversations. When I say me with the division  
2615 director, it would be me with the division director and their deputy  
2616 and several of my assistants, and so there were four or five or six  
2617 people in any of one of those conversations.

2618 Q. And you wouldn't have an expert level of understanding of  
2619 all those issues you were being briefed on?

2620 A. Would I have an expert level? I would not call myself an  
2621 expert on pretty much anything that we do, but I was very familiar  
2622 with the issues in many, many areas.

2623 Q. Sure, but you were just -- information gathering might be a  
2624 good way to describe it?

2625 A. I think so.

2626 Q. And then bringing that information back to Dr. Fauci?

2627 A. And vice versa.

2628 Q. Great. And not thinking COVID, but just in general, what  
2629 kinds of issues might this be related to?

2630 A. Oh, they covered the gamut, funding priorities, personnel  
2631 issues, initiatives, research initiative that they were planning for  
2632 the future, what were the priorities in HIV research that they felt  
2633 were important.

2634 It was all over the place.

2635 Q. There are lot of different things going on, it sounds like,  
2636 at NIAID?

2637 A. Well, we're funding six and a half billion dollars worth of  
2638 research. Yes.

2639 Q. And that's a large volume of research, a large volume of  
2640 information. It's to be expected that no one person could have an  
2641 in-depth knowledge of every one of those things under the NIAID  
2642 purview. Correct?

2643 A. That is true.

2644 Q. And so it's not out of the ordinary that the director would  
2645 need you to seek out more information for him on any specific topic?

2646 A. It would be the norm, I think, that he would be looking for  
2647 more information in whatever he asked me to investigate.

2648 Q. Absolutely. And when you gathered information and brought  
2649 it back to him, what kind of form would that normally take? Would  
2650 that be a Zoom meeting as well or would you do a report?

2651           A.     It would be a variety of different ways.  It could be a  
2652 one-on-one sit-down with Dr. Fauci.  It could be, more recently, a  
2653 Zoom.  It might be that because we do have periodic division director  
2654 meetings and Dr. Fauci is there that I can bring the issue up in that  
2655 kind of setting so that he can hear directly from the divisions  
2656 directors and I can know which the issues are that are worth bringing  
2657 to that forum.

2658           Q.     But it sounds like this is mostly conversation; it's not  
2659 written-down formal records of what you learned.

2660           A.     That is true.

2661           Q.     So it makes sense that you might be emailed an article and  
2662 then have a conversation about it later?

2663           A.     That would be true.

2664           Q.     Is there anything else we haven't covered about your  
2665 general roles and responsibilities as the principal deputy?

2666           A.     I don't think so.

2667           Q.     And how -- over the course of your 17 years working with  
2668 Dr. Fauci, I would imagine that your responsibilities grew and he  
2669 would rely on you for different things than at the beginning?

2670           A.     To some extent, yes, and his role changed.  He became more  
2671 and more a public figure in the later years, particularly during the  
2672 pandemic, and was in that sense less and less involved with the  
2673 day-to-day operations of the Institute.

2674           Q.     So you were just helping him pick up that slack that he  
2675 couldn't necessarily get to?

2676 A. Yes.

2677 Q. But, again, that didn't mean your expertise in issues that  
2678 you were not priorly an expert or previously an expert in became  
2679 issues that you were expert in?

2680 A. That is true.

2681 Q. Thank you.

2682 A. And as you heard earlier, I did spend nine months as the  
2683 acting director of the Institute. So it's not that I don't know  
2684 anything about some of things that we do, but I'm not the in-depth  
2685 subject matter expert.

2686 Q. And I did not mean to imply that you do not know anything.  
2687 It's a wide breadth of material. I can't imagine anyone having a  
2688 grasp on every single piece. I know many people come in to the  
2689 Institute with previous experience, and that might be where that their  
2690 expertise lies, as that they bring into the Institute. Would that be  
2691 accurate?

2692 A. Absolutely.

2693 [REDACTED] All right. Thank you.

2694 Will, anything on that?

2695 [REDACTED] No.

2696 BY [REDACTED]

2697 Q. Dr. Auchincloss, I just want to echo everyone's  
2698 appreciation for you being here today.

2699 We spent a good deal of time today discussing the concept  
2700 of gain-of-function research, and when we've spoken about

2701 gain-of-function research, we've generally done so, to use your words,  
2702 in layman's terms; is that correct?

2703 A. I don't know if I used the term "layman's terms".

2704 Q. In an earlier round, I think when we were discussing sort  
2705 of gain-of-function research and the definition of, you know, this  
2706 notion that a certain amount of research could be qualified as  
2707 gain-of-function or gain-of-function of concern, I think we were  
2708 discussing it in sort of a conceptual definition, but whether or not  
2709 something can definitively be defined or categorized as  
2710 gain-of-function is complicated.

2711 Do you agree?

2712 A. Whether something can be categorically defined as  
2713 gain-of-function of concern requires some real experience and  
2714 expertise.

2715 Q. I see. And when we're looking at gain-of-function research  
2716 or gain-of-function research of concern, my understanding is that  
2717 scientists can often disagree whether certain research could be  
2718 characterized either as gain-of-function or gain-of-function research  
2719 of concern; would you agree with that?

2720 A. I would certainly agree with that. We've seen that in  
2721 newspaper articles repeatedly.

2722 Q. And can you elaborate for us why categorizing a research  
2723 project as gain-of-function research or gain-of-research of concern is  
2724 not quite as simple as just a yes or no answer?

2725 A. Trying to determine whether the research is valuable versus

2726 dangerous is a very fine line.

2727 Q. Can you elaborate on that a little further?

2728 A. As we've talked about, determining whether a particular  
2729 pathogen has the potential to turn into an enhanced pathogen of  
2730 pandemic potential, there's no clear way in which you can anticipate  
2731 that. So scientific expertise has to be brought to the decision and  
2732 it can't be a definitive answer.

2733 Q. So what you're saying is that it's very reasonable for  
2734 scientific experts to deliberate on this topic and when they  
2735 deliberate not necessarily all reach the same conclusion as to whether  
2736 or not research should be characterized as gain-of-function research  
2737 or gain-of-function research of concern?

2738 A. That is true.

2739 Q. And from a scientific perspective, and bear with me if this  
2740 is redundant, but is there a single definition that everyone in the  
2741 community is working off of when evaluating or determining whether  
2742 certain research is gain-of-function or gain-of-function research of  
2743 concern?

2744 A. Well, the criteria are written down. There is that  
2745 statement about what constitutes gain-of-function research of concern.  
2746 Interpretation of experiments, whether they fall into the words on the  
2747 paper, that is a matter that individuals can disagree on.

2748 Q. And so while you're here today, obviously, discussing with  
2749 us certain research and perhaps describing it as gain-of-function  
2750 research of concern or gain-of-function research, is it reasonable



2751 that other scientists, other researchers could disagree with you in  
2752 that characterization or have a different perspective or assessment of  
2753 the research being discussed?

2754 A. I believe that's true, yes.

2755 BY ██████████

2756 Q. Just one clarification: In the previous round, you were  
2757 given Exhibit 8, which is right on top there. It's the NIH website.  
2758 I just want to be clear. This is -- and this was discussing  
2759 gain-of-function, but this is what is posted on NIH's public website.  
2760 Correct?

2761 A. That's what I've been told, yes.

2762 Q. And gain-of-function definition and regulation are defined  
2763 separately in factual documents. Correct?

2764 A. Yes. That's true.

2765 ██████████ Thank you very much.

2766 We can go off the record.

2767 [Recess.]

2768 FURTHER EXAMINATION BY THE MAJORITY

2769 BY MR. BENZINE:

2770 Q. I want to ask two kind of clarifying questions on the grant  
2771 funding process. We talked about it a little bit, but can a grant  
2772 receive a fundable score and then not subsequently get funded?

2773 A. I don't think I've ever seen that happen, but it could for  
2774 a variety of reasons.

2775 Q. If you had -- and I'm not a budget line item expert by any

2776 means, but if you had \$20 million for a certain set of grants, could  
2777 so many get funded that you wouldn't have enough money to fund them  
2778 all?

2779 A. Oh, absolutely, yes.

2780 Q. Is there anyone within NIAID that has unilateral funding  
2781 authority?

2782 A. I assume Dr. Fauci in some ultimate sense, but I've never  
2783 seen him exercise that authority.

2784 MR. BENZINE: Thank you. I want to talk -- and, again, as  
2785 much you know. If you don't know, we can move pretty quickly through  
2786 this section -- talking about the Wuhan Institute of Virology  
2787 introduce Majority Exhibit 9?

2788 [Majority Exhibit No. 9 was  
2789 marked for identification.]

2790 BY MR. BENZINE:

2791 Q. This is a fact sheet published by the U.S. Department of  
2792 State on January 15, 2021 regarding activity at the Wuhan Institute of  
2793 Virology. Were you aware of this prior to just now?

2794 A. I have not seen this before.

2795 Q. I'm going to ask about a couple of specific points, and if  
2796 you need to take time and read through those points, we can pause. I  
2797 want to go to No. 1 on page 2.

2798 MS. GANAPATHY: Mitch, can you just give him a second to  
2799 familiarize himself with the document?

2800 It's not super long. So it shouldn't take more than a

2801 minute.

2802 [Witness peruses exhibit.]

2803 THE WITNESS: Can you clarify for me, whose website is  
2804 this?

2805 BY MR. BENZINE:

2806 Q. It's archived from the previous State Department.

2807 A. Okay.

2808 Q. So this is just what it looks like when you print an  
2809 archived document.

2810 A. Okay.

2811 Q. But it was issued by the State Department on January 15,  
2812 2021.

2813 So Point No. 1 on page 2, the first bullet reads: "The  
2814 U.S. Government has reason to believe that several researchers inside  
2815 the WIV sick in Autumn 2019 before the first identified case of the  
2816 outbreak with symptoms consistent with both COVID-19 and common  
2817 seasonal illness."

2818 The most recent ODNI declassified assessment kind of backs  
2819 this up a little bit with the same qualifier that the IC continues to  
2820 assess that this information neither supports nor refutes either  
2821 hypothesis of the pandemic's origins.

2822 Have you had any discussions or are you aware of any  
2823 researchers inside the WIV that were sick in Autumn 2019?

2824 A. I'm not aware of any researchers who were sick and worked  
2825 at Wuhan Institute of Virology.

2826 Q. Did you have any discussions regarding the potential that  
2827 researchers were sick?

2828 A. I don't recall any.

2829 Q. Did you ever have any discussions about Ben Hu, H-U?

2830 A. I don't know who he is.

2831 Q. Flipping to the next page, Point 3, it reads: "Secrecy and  
2832 nondisclosure are standard practice for Beijing. For many years, the  
2833 United States has publicly raised concerns about China' past  
2834 biological weapons work, which Beijing has neither documented nor  
2835 demonstrated eliminated despite its clear obligation under its  
2836 biological weapons convention."

2837 When issuing grants, do they go through a national security  
2838 review?

2839 A. When we issue grants to foreign entities?

2840 Q. Um-hum.

2841 A. The review is by the State Department. Exactly how they do  
2842 it, I don't know.

2843 Q. But there is a -- can you walk through like, not asking how  
2844 the State Department does it, but can you walk through NIAID's  
2845 process?

2846 A. I don't know exactly. I think we submit foreign grants to  
2847 the Fogarty International Center which handles the process of State  
2848 Department reviews.

2849 Q. Okay. Are you generally aware of any biological weapons  
2850 research or any dual use research occurring in China?

2851 A. I don't know of any. I don't know of any one way or  
2852 another.

2853 Q. The next bullet down is: "Despite the WIV presenting  
2854 itself as a civilian institution, the United States has determined  
2855 that the WIV has collaborated on publications and secret projects with  
2856 China's military. The WIV has engaged in classified research,  
2857 including laboratory animal experiments on behalf of the China  
2858 military since at least 2017."

2859 I know we talked about this a little bit before with those  
2860 other grants. Are you aware of any talk of military activity at the  
2861 WIV?

2862 A. I have heard talk of a military activity at WIV in last  
2863 couple of months, but not before that.

2864 Q. What was the talk over the last couple of months?

2865 A. Just the charge that there was some military involvement at  
2866 WIV.

2867 Q. Do you recall who brought that to your attention?

2868 A. No.

2869 Q. So we touched on this maybe a little bit. During  
2870 Dr. Daszak's interview, he told us that it's not EcoHealth Alliance's  
2871 job as the prime awardee to conduct independent biosafety analyses of  
2872 foreign labs, in this case, the WIV, and that the duty fell on NIH.

2873 Do NIAID or NIH conduct independent biosafety analyses on  
2874 labs?

2875 A. I don't know exactly how that works.

2876 Q. Okay. Is it your understanding that it's the government's  
2877 duty to do so or prime awardee's duty to do so?

2878 A. Again, I don't know. I think we're talking about, perhaps,  
2879 one of several different things. If there's research taking place at  
2880 the BSL 3 or 4 level, then there is a process by which we ask the CDC  
2881 to determine that they meet the standards of BSL 3 and 4 facilities,  
2882 but I don't know beyond that for more ordinary research.

2883 Q. What about foreign labs; does NIAID independently make sure  
2884 they follow like the BMBO?

2885 A. Again, I don't know what the process is.

2886 MR. BENZINE: I'll skip over that one.

2887 We talked about Dr. LeDuc a little bit before, and you had  
2888 mentioned you had some communications with Dr. LeDuc early in the  
2889 pandemic, and I want to introduce Majority Exhibit 10.

2890 [Majority Exhibit No. 10 was  
2891 marked for identification.]

2892 BY MR. STROM:

2893 Q. While he's doing that, do you know who at NIAID would know  
2894 the process for certifying a foreign lab?

2895 We're getting -- not that you should know this, but we're  
2896 getting a lot of sort of inconsistent answers. I mean, everyone  
2897 consistently agrees the State Department has a role, but on the role  
2898 of the CDC, there seems to be some confusion.

2899 Is someone like in NIAID that we should ask that you think  
2900 be particularly knowledgeable on this issue?

2901 A. I would go to Emily Erbelding to ask her.

2902 MR. STROM: Thank you.

2903 BY MR. BENZINE:

2904 Q. So this Exhibit 10, and it's an email chain with an  
2905 article, "Novel Coronavirus' Relationship to Bat Coronaviruses and  
2906 Recombination Signals".

2907 It was forwarded around and forwarded from Dr. LeDuc to you  
2908 and Dr. Catlett, and Dr. LeDuc writes: "I just learned that Wuhan  
2909 leadership is requesting we raise our request for the isolates to  
2910 higher political level. Can we get our ambassador involved?  
2911 Scientists are eager to share. This is a political decision now."

2912 Do you recall receiving this email?

2913 A. Not specifically, but I'm not surprised that Dr. LeDuc sent  
2914 this to me.

2915 Q. Had you had conversation with Dr. LeDuc about gaining  
2916 access to isolates from Wuhan?

2917 A. Probably, but I don't specifically recall any of those  
2918 conversations.

2919 Q. Do you recall this email implies, at least, that China was  
2920 not -- the Government of China was not forthcoming? Maybe the  
2921 scientists weren't too, but the government was not forthcoming?

2922 A. I haven't fully read the email, but --

2923 Q. I'm just referencing the top part.

2924 MS. GANAPATHY: Give him one minute to take a look at the  
2925 top part at least, Dr. Auchincloss.

2926 THE WITNESS: So you're talking about this paragraph?

2927 BY MR. BENZINE:

2928 Q. Yes, sir.

2929 A. "Can we get the ambassador involved" paragraph?

2930 Q. Yes, sir.

2931 A. And what was your question?

2932 Q. I was just wondering, at this point, January 24th,  
2933 obviously, the request for isolates or live virus had gone out. We  
2934 hadn't had a case yet. So we couldn't go -- well, we probably had  
2935 cases, but we hadn't had a confirmed one. So we didn't have our own  
2936 isolates to choose from.

2937 I was just wondering if you remember any conversations or  
2938 anything that would suggest that the China Government was not  
2939 forthcoming in sharing isolates of the virus.

2940 A. Only in the vaguest sense that, yes, people were eager to  
2941 get the isolates of the virus early on and we were not gaining access.

2942 Q. Was one of the -- maybe not your individual strategy, but a  
2943 strategy of the U.S. Government to use grantees that relationships in  
2944 China?

2945 A. That, I don't know.

2946 Q. Do you ever recall speaking with any Chinese officials?

2947 A. I don't think so.

2948 Q. And do you recall taking any actions after this email?

2949 A. No.

2950 MR. BENZINE: I want to introduce Majority Exhibit 11.



2951 [Majority Exhibit No. 11 was  
2952 marked for identification.]

2953 BY MR. BENZINE:

2954 Q. This is another email from Dr. LeDuc to you from May 20,  
2955 2020, and he attached a "Wall Street Journal" article about U.S.  
2956 probing the University of Texas link to Chinese lab, scrutinized of  
2957 the Coronavirus, and he writes to you and says: "We should chat about  
2958 the status of the probe by the Department of Education mentioned in  
2959 the attached article. Nothing urgent. I just want to keep you  
2960 informed. Let me know when you'd be available for a brief 15-minute  
2961 call later today or this week."

2962 Did you have ever have a phone call with him about that?

2963 A. I don't recall.

2964 Q. Do you recall the Department of Education probe into the  
2965 Wuhan Institute?

2966 A. I don't, actually.

2967 Q. Do you recall getting this email?

2968 A. Now that I look at it, yes, but did I recall it previously?  
2969 No.

2970 Q. So to the best of your recollection, no followup actions  
2971 taken on account of this email?

2972 A. I honestly don't know what action was taken.

2973 Q. Two other kind of final questions on the Wuhan Institute:  
2974 On July 17, 2023, HHS suspended the WIV from receiving federal funds.  
2975 Were you involved at all in that decision?

2976 A. No.

2977 Q. And on September 19, 2023, HHS debarred the WIV for a  
2978 period of ten years. Were you involved at all in that decision?

2979 A. No.

2980 BY MR. SLOBODIN:

2981 Q. Did you have any concerns about that decision?

2982 A. No, no concerns one way or another.

2983 BY MR. BENZINE:

2984 Q. Were you briefed at all by HHS on that decision?

2985 A. No.

2986 Q. Given a heads-up?

2987 A. I don't recall ever being briefed, no.

2988 Q. I want to shift gears and talk about kind of the lifecycle  
2989 of EcoHealth's grant and as much as -- as fun as that sounds and  
2990 various points and involvement and recollections on anything.

2991 We talk about it a little bit. Did you have any knowledge  
2992 of EcoHealth prior to the pandemic?

2993 A. No.

2994 Q. Any knowledge of Dr. Daszak prior to the pandemic?

2995 A. No.

2996 Q. Then since the pandemic started, any direct interactions  
2997 with anyone at EcoHealth or Dr. Daszak?

2998 A. Not that I can recall.

2999 Q. Kind of along the lines of Alan's question, sitting here  
3000 today, after everything that's happened over the past three and a

3001 half-ish years regarding EcoHealth, do you have an opinion on them?

3002 A. I really have no information, no first-hand information.

3003 So no.

3004 MR. BENZINE: I want to introduce Majority Exhibit 12.

3005 [Majority Exhibit No. 12 was

3006 marked for identification.]

3007 BY MR. BENZINE:

3008 Q. This is an email chain. It starts with Dr. Daszak to Dr.  
3009 Fauci, Dr. Morens, and Alison Andre, who I believe is affiliated with  
3010 EcoHealth, and then you forward it on behalf of Dr. Fauci; is that  
3011 right?

3012 A. I don't know that it was on behalf of Dr. Fauci.

3013 Q. It says from Hugh Auchincloss on behalf of Anthony Fauci on  
3014 the "from" line.

3015 A. Okay. I don't know what that means.

3016 Q. Did you have access to Dr. Fauci's email account?

3017 A. No.

3018 Q. You said you didn't know what it means. So I'm assuming  
3019 this hasn't happened been, to the best of your knowledge.

3020 A. I've never seen "on behalf of" before.

3021 Q. Do you recall getting the email from Dr. Daszak?

3022 A. I don't think I got the email from Dr. Daszak. I think I  
3023 got it from Dr. Fauci.

3024 Q. That's what I'm trying to figure out, because you're not on  
3025 the "to" line or the "CC" line from Daszak, but you are forwarding it,

3026 but on behalf of Dr. Fauci, not -- at least we don't have an email  
3027 chain of Dr. Fauci to you.

3028 A. And I can't explain it. I honestly don't know.

3029 Q. So you forward it to Dr. Erbelding and say: "FYI and  
3030 amusement."

3031 What did you mean?

3032 A. Well, I haven't read the email yet.

3033 Q. If you want to take a minute.

3034 [Witness peruses exhibit.]

3035 THE WITNESS: Okay.

3036 BY MR. BENZINE:

3037 Q. What did you mean by "FYI and amusement"?

3038 A. Well, FYI is sort of obvious, but amusement, your question  
3039 is why amusement. I don't know, but as I read this, I think I would  
3040 have thought that it was amusing that they were going to ask Dr. Fauci  
3041 to come speak at a EcoHealth event at this point in the course of  
3042 things.

3043 Q. It was sent April 13th. Six days later, the grant was  
3044 terminated. At this point, did you know the grant was going to be  
3045 terminated?

3046 A. No.

3047 Q. You said amusing in the course of things. There  
3048 hadn't -- prior to this, there hadn't been any public kind of  
3049 communications from NIH or NIAID to EcoHealth. There was just the  
3050 emails that Mr. Jordan went through and the Minority went through with

3051 the back and forth on finding the papers, finding if it went through  
3052 P3.

3053 I guess I'm just wondering why like -- it would appear from  
3054 this that there were more internal discussions regarding EcoHealth  
3055 than just that one phone call.

3056 A. I don't recall specific conversations. I would be  
3057 surprised if there weren't lots of conversations with EcoHealth once  
3058 we figured out that we were, in fact, funding EcoHealth to do this  
3059 kind of research.

3060 Q. Do you remember -- and I'm sure I've asked this. So I  
3061 apologize, and if you don't recall, I'll move on, but do you recall  
3062 more specifics?

3063 Like by this point, it hadn't been suspended. It hadn't  
3064 been terminated. From what we can tell, there were no discussions  
3065 about suspending or terminating it, and we've just touched on one  
3066 conversation. What other topics were there to discuss?

3067 A. What other topic were there to discuss?

3068 Q. Regarding EcoHealth. What were the contents of the  
3069 conversation?

3070 A. I don't recall specifically.

3071 Q. Going into the EcoHealth grant, it was originally awarded  
3072 on May 27, 2014, and I think you said you pretty much never heard of  
3073 EcoHealth prior to the pandemic, and you became aware of the grant  
3074 probably around February 1, 2020; is that correct?

3075 A. I think that's correct.

3076 Q. And understanding your not a program officer or a grant  
3077 officer, one of the lines, standard lines, in a Notice of Award is  
3078 acceptance of this award, including the terms and conditions, is  
3079 acknowledged by the grantee when funds are drawn down or otherwise  
3080 obtained from the grant payment system. I just want to run through  
3081 three things that, to your knowledge, if they're kind of standard  
3082 terms and conditions in grants.

3083 Submitting timely progress reports?

3084 A. I believe that's standard.

3085 Q. Disclosing sub-grantees?

3086 A. I don't know one way or the other.

3087 Q. Monitoring sub-grantees?

3088 A. Again, I don't know one way or the other.

3089 MR. BENZINE: Okay. We're going to start going through  
3090 some of the letters back and forth between various officials in  
3091 EcoHealth, and it's going to be a lot of paper, but as I hand them to  
3092 you, if you're not aware of it, tell us you're not aware of it and  
3093 we'll move on to the next one.

3094 So the first one is going to be Majority Exhibit 13.

3095 [Majority Exhibit No. 13 was  
3096 marked for identification.]

3097 BY MR. BENZINE:

3098 Q. This is a letter from May 28, 2016 from Jenny Greer and  
3099 Dr. Stemmy to EcoHealth. Were you previously aware of this letter?

3100 A. I don't believe I've seen this letter before.

3101 Q. I'll give you a minute.

3102 [Witness peruses exhibit.]

3103 THE WITNESS: Okay.

3104 BY MR. BENZINE:

3105 Q. So in this letter, Dr. Stemmy kind of flags to EcoHealth  
3106 that after the gain-of-function pause went into effect that some of  
3107 their work might fall under it and had a request for more information.  
3108 Is that kind of standard operating procedures, to go to the grantee,  
3109 ask for -- do a request for information and then make a determination  
3110 after?

3111 A. I believe that's true, yes.

3112 MR. BENZINE: You can put that one down and we'll move on  
3113 the Majority Exhibit 14.

3114 [Majority Exhibit No. 14 was  
3115 marked for identification.]

3116 BY MR. BENZINE:

3117 Q. This is a May 28th letter. After the EcoHealth grant got  
3118 the news, you were asking find more information on it. Did Dr. Stemmy  
3119 ever show you this one?

3120 A. The previous one?

3121 Q. Correct.

3122 A. I don't believe so.

3123 Q. So this is Majority Exhibit 14. It's a letter from  
3124 Dr. Daszak back to Dr. Greer and Stemmy in response to their request  
3125 for information or MERS and SARS experiments.

3126 Have you seen this document before?

3127 A. I don't believe so.

3128 Q. So we don't need to read the whole thing, but I want to  
3129 draw your attention to the second page in the kind of tabbed in  
3130 three-paragraph section. The last one starts with "Finally".

3131 A. Um-hum.

3132 Q. And says: "Finally, as proposed above, for the MERS-like  
3133 viruses, should any of these recombinants show evidence of enhanced  
3134 greater than one log in cells expressing the human, bat, mouse, or  
3135 civet receptor over wild-type parental backbone SARS-CoV strain or  
3136 grow more efficient in human airway epithelial cells, we will  
3137 immediately stop all experiments with the mutant, inform our NIAID  
3138 program officer and -- it's a typo -- "and the WIV IVC of these  
3139 results and participate in decisionmaking trees to decide appropriate  
3140 path forward."

3141 So this has been, this language has kind of been the crux  
3142 of some of the compliance efforts more recently and trying to figure  
3143 out kind of where this language originate and, again, understanding  
3144 you're not a day-to-day grant officer and you have the ins and outs of  
3145 the grant policy manual, but in your experience, is it standard to  
3146 have grantees propose special award conditions?

3147 A. I don't know where that came up with this proposal. I  
3148 don't know whether they heard other grantees refer to this. I don't  
3149 know.

3150 Q. Okay. Dr. Daszak testified he got it from Dr. Baric at



3151 UNC, so probably within one of those --

3152 A. Okay.

3153 Q. -- one of those works that he did, and what we're trying to  
3154 figure out too is if this is kind of like -- if this is a standard  
3155 measurement, if this is now kind of engrained into NIAID policy.

3156 A. As far as I know, it has been used on occasion, but I don't  
3157 know that I would call it standard. I simply really don't know.

3158 Q. Okay. Again, once the EcoHealth grant kind of came to your  
3159 attention, did Dr. Stemmy or Dr. Greer bring this letter to your  
3160 attention?

3161 A. No.

3162 BY MR. STROM:

3163 Q. Can I ask one question?

3164 So in the pause, you had the White House issues the pause  
3165 and then it has to be implemented government-wide, and the NIH  
3166 director is who recommends whether something, even though it would be  
3167 subject to the pause, can go forward because it's a high-priority  
3168 research activity, but then the policy for reviewing whether or not  
3169 something triggers the pause is done, it seems is almost exclusively  
3170 at the DMID level; is that correct?

3171 A. I think that would be correct, yes.

3172 Q. Okay. Are there other divisions of NIAID that also do  
3173 potentially gain-of-function research of concern?

3174 A. The intermural program could potentially perform such  
3175 research, and they have their own process for evaluating whether it

3176 should be subject to the P3CO or pause restrictions.

3177 Q. And is that -- do you know if that is substantially similar  
3178 to the DMID policy?

3179 A. I don't know that I can characterize this as substantially  
3180 similar. It has a similar function.

3181 Q. Do you know what it is? Could you tell us to the best of  
3182 your understanding what that policy was?

3183 A. What that policy was?

3184 Q. What the intermural office's policy was.

3185 A. The policy was essentially the same as DMID. The  
3186 mechanics, I don't know.

3187 Q. Okay. But just to make sure I'm understanding this, NIAID  
3188 Office of Director did not generate -- because isn't there an Office  
3189 of Policy within the Office of Director?

3190 A. There is an office with that name, yes.

3191 Q. Sure. That's not who generated -- because just looking at  
3192 the org chart, you could see how we --

3193 A. Yeah.

3194 Q. -- we would think it maybe did?

3195 A. No.

3196 Q. So they weren't involved; it's at the divisional level?

3197 A. Yea.

3198 MR. STROM: Okay.

3199 BY MR. SLOBODIN:

3200 Q. Can I just ask a followup on the P3CO framework?

3201           Wasn't NIAID involved in helping draft that P3CO framework?

3202           A.    Not directly.  It was drafted at a higher level.  I don't  
3203 know exactly which of the NIAID scientists may have offered opinions,  
3204 and I'm sure they did, but the policy was drafted at a much higher  
3205 level.

3206           Q.    At NIH, you mean?

3207           A.    I think it was at the Office of Science, OSTP.  Remember  
3208 it's a United States Government policy.

3209           Q.    NIH is like the 800-pound gorilla of HHS when it comes to  
3210 virus research where issues about danger, gain-of-function of concern.  
3211 So, I mean, I would think NIAID would be very involved.  You've got  
3212 the subject matter experts.

3213           A.    And the CDC and the Department of Defense, actually, many  
3214 parts of the --

3215           Q.    Because the HHS framework and NIAID is a big --

3216           A.    The framework is not HHS.  It's the government policy.

3217           Q.    Well, I understand there's a framework, the federal  
3218 framework, but there is a department-specific P3CO framework.  That is  
3219 the department framework issued that was in December 2017.

3220           A.    Okay.

3221           Q.    So I'm just trying to find out -- I mean, this isn't  
3222 something Dr. Fauci and other senior leaders at NIAID would have been  
3223 involved, consulted with, conferred with?

3224           A.    I don't recall being involved in the implementation of the  
3225 U.S. Government P3CO framework in the context of HHS.  I don't recall

3226 that.

3227 Q. You don't recall any meetings where it was discussed even  
3228 if you weren't directly involved?

3229 A. I don't.

3230 Q. You didn't have that kind visibility?

3231 A. [Gestures.]

3232 MR. SLOBODIN: Okay. Thank you.

3233 BY MR. BENZINE:

3234 Q. Does the intermural research that would be subject to the  
3235 framework go through the P3CO as well?

3236 A. Does the intermural research that could be subject to the  
3237 framework, does it go through review? Yes.

3238 Q. There isn't a kind of -- it's not bifurcated by extramural  
3239 and intramural?

3240 A. Well, they have their own committee that does the review.  
3241 So it is bifurcated.

3242 Intramural review is different from the extramural review  
3243 that takes place in DMID.

3244 Q. Both they both funnel up P3CO?

3245 A. They both funnel up to P3CO.

3246 MR. BENZINE: I want to introduce Majority Exhibit 15.

3247 [Majority Exhibit No. 15 was  
3248 marked for identification.]

3249 BY MR. BENZINE:

3250 Q. It's another letter, this time July 7, 2016, again from

3251 Dr. Greed and Dr. Stemmy to EcoHealth, and in this letter, NIAID says  
3252 that the government-wide pause on gain-of-function experiments don't  
3253 apply to EcoHealth and then except the one-log policy growth policy as  
3254 a new special award condition.

3255           Were you aware of this letter before now?

3256       A.    No.

3257       Q.    Dr. Stemmy never showed you this letter?

3258       A.    No.

3259       Q.    This, I'm going to --

3260 BY MR. SLOBODIN:

3261       Q.    Well, earlier, you said that Dr. Stemmy made a presentation  
3262 at a meeting about gain-of-function research review of the grant; is  
3263 that right?

3264       A.    But not in 2016.

3265       Q.    No. I mean after the pandemic, whenever you guys would  
3266 come to the director's office level and you were trying to find out  
3267 what is this grant all about, what did we fund, how much funding was  
3268 involved, what kind of research was being done, and you had the  
3269 program officer come in and do a presentation, and as I understood it,  
3270 you mentioned that one of the topics of the presentation was how they  
3271 reviewed the issue of whether or not the project was subject to the  
3272 gain-of-function research pause. Is that right?

3273       A.    That's correct.

3274       Q.    So I'm trying to square that with what you're just telling  
3275 us, that you've never heard about these letters. Dr. Stemmy didn't

3276 mention any of this history?

3277 I don't understand how you could discuss that topic without  
3278 talking about these letters. It doesn't make any sense.

3279 A. I think we, indeed, talked about the history, but I never  
3280 saw the letter.

3281 Q. But it would have to involve the letters. That's the guts  
3282 of the interaction, of we need more information on "X". EcoHealth  
3283 gets further information on "X". NIAID comes back and says we've  
3284 looked at the information of "X" and we've made a determination.

3285 A. I think it's quite likely that all of those things were  
3286 mentioned, but I don't think that any of the letters were ever  
3287 specifically shown.

3288 BY MR. BENZINE:

3289 Q. Was Dr. Stemmy's presentation a Power Point?

3290 A. I have no recollection.

3291 Q. Were there any handouts during that meeting?

3292 A. Again, I have no recollection.

3293 Q. Do you recall about when the presentation happened?

3294 A. I really don't.

3295 Q. But you think it's likely -- correct me if I'm  
3296 wrong -- that Dr. Stemmy wouldn't have -- the presentation wouldn't  
3297 have included Dr. Stemmy handing you these letters. It would have  
3298 been we asked EcoHealth for information. This tripped our radar that  
3299 this might have been gain-of-function. We asked for information.  
3300 EcoHealth EcoHealth provided information.

3301           We said it wasn't is kind of how he presented it?

3302           A.    That would have been the way it was, and when I say a  
3303 presentation, I think he actually did that presentation on more than  
3304 one occasion in preparation for congressional testimony and media  
3305 inquiries, etc.

3306           Q.    I'm going to avoid introducing them and just kind of this  
3307 be a narrative question. The special award condition of the one-log  
3308 growth that was agreed to here was implemented in a revised Year 3  
3309 NOA. It was not in the Year 4 NOA, but then was back again in Year 5.

3310           Do you have any knowledge of that?

3311           A.    I have heard that. So yes.

3312           Q.    Who have you heard it from?

3313           A.    I don't recall.

3314           Q.    Did they tell you substantially what I just kind of laid  
3315 out?

3316           A.    Essentially, yes.

3317           Q.    Was there any followup or anything on that? Like any  
3318 investigation, for lack of a better word, as to why the special award  
3319 condition was dropped from Year 4?

3320           A.    I don't recall. There must have been an explanation, but I  
3321 don't recall what it was.

3322           Q.    Dr. Stemmy told us that he put that special award condition  
3323 on his check sheet, and then when it got up, it wasn't there anymore.  
3324 Who would have the authority to alter a program officer's check sheet?

3325           A.    I have no idea.

3326 Q. Okay. Shifting into --

3327 Well, do you guys have any more?

3328 BY MR. SLOBODIN:

3329 Q. Well, just that you've got a provision like that put in  
3330 there because you're concerned about just the theoretical possibility  
3331 that there could be some danger with the experiment and you're using  
3332 this virus growth cutoff as an early warning system, if you will, to  
3333 see if you're getting an unexpected result that, Oh, this is  
3334 infectious, this is looking like the experiment involved human cells  
3335 and mice.

3336 So I think that's a -- and there's correspondence. There  
3337 are meetings, internal review. To an outsider, I mean, that's an  
3338 issue. That's not one of a hundred issues. It's a big deal issue  
3339 internally at NIAID, this determination.

3340 So -- and that it be put in, added into the grant terms as  
3341 special terms of the grant is not a small deal, and then, you know,  
3342 there's maybe legal implications. Right?

3343 It's in the grant award notice for one year and then it  
3344 gets dropped off the following year. I think that's a concern. I  
3345 think that provision has significance. It was significant to NIAID.  
3346 They required it, and then the program officer wanted to include it.  
3347 It was checklisted and then it got dropped.

3348 So what are we going to do about that? Why did that  
3349 happen?

3350 A. I don't know how that happened.



3351 Q. Were those kind of questions asked? Shouldn't that kind of  
3352 question have been asked?

3353 It was some kind of administrative issue. Okay?

3354 But don't you want to find out what it is. You don't this  
3355 happening again.

3356 A. I don't know what was done to pursue this. I don't know  
3357 how it happened. I'm not familiar.

3358 Q. I understand, but what I'm troubled with is the lack of  
3359 curiosity by somebody. I'm not hearing anybody ask any questions.

3360 I think that's -- I mean, am I overreacting to this?  
3361 Doesn't this -- this provision, this issue about tracking the virus  
3362 growth in this type of research project, which is done occasionally,  
3363 but it is a recurring issue -- you have an internal review committee  
3364 and you have a separate process for your intramural research. It's an  
3365 issue that requires the attention of subject matter experts to look at  
3366 and it's a big deal decision.

3367 So don't you want to make sure that it's properly  
3368 administered, that you put those provisions in to the terms of the  
3369 grant to make sure, you know, it doesn't get dropped?

3370 A. So I don't know what kind of review took place of the fact  
3371 that that provision was not in the Year 4 award. There may have been  
3372 reasons for it. There may have been people who looked into it. I  
3373 just don't know.

3374 Q. Right. No. I understand that you don't know. My question  
3375 is but shouldn't we know?

3376                    Would you agree with me that we should know what happened?

3377            A.    And it may be that somebody does know.  I don't know.

3378            Q.    But do you agree with me?  Is that something that NIAID  
3379 should find out about?

3380                    If there was a glitch in the administration, there was a  
3381 mistake made, don't you want to know what it was?  I mean, that was  
3382 not an insignificant problem.  I'm not saying it's intentional, but  
3383 there was some kind of glitch that led to this, and I'm not  
3384 hearing -- so far, I'm hearing, Oh, well, it's an oversight, you know,  
3385 well, like it's a nothing burger, but I don't think it's a nothing  
3386 burger.

3387                    I think it's something from an administrative standpoint  
3388 that your division people should be on top of.  Somebody -- if they're  
3389 not asking, then you should be asking as the overall leader.

3390            A.    I don't know whether it was looked at.  I just don't know.  
3391 I don't have the information.

3392            Q.    Right, but do you agree that it should be looked at?

3393                    If it wasn't looked at, do you agree it should be looked  
3394 at?

3395            A.    I would be surprised if somebody didn't look at it.  If the  
3396 program officer put in that language and it disappeared later, I'm  
3397 sure somebody tracked it down, but I don't know.

3398                    MR. STROM:  So I think I'm going to circle back on a couple  
3399 of things we talked about earlier.  So I apologize for taking them out  
3400 of order.

3401 This will be Majority Exhibit 16.

3402 [Majority Exhibit No. 16 was  
3403 marked for identification.]

3404 BY MR. STROM:

3405 Q. It is a January 27th email between Mr. Folkers, Jen Ruth,  
3406 Dr. Fauci, a number of other individuals at NIAID, but I'll just note  
3407 for the record that you're not on it, but we would like to ask you  
3408 about it because I think it's relevant to the Majority that we saw  
3409 earlier regarding the you'll-have-tasks-to-do-today email.

3410 So that was a February 2nd email. This is a January 27th  
3411 email where if you look below the gray line, gray bar here, sir, from  
3412 David M., is David M. Dr. Morens?

3413 A. I believe so.

3414 Q. Okay. And then he lays out -- and you can just read it  
3415 there: "EcoHealth Group, Peter Daszak, et al., has for years been  
3416 among the biggest players the Coronavirus work, also in collaboration  
3417 with Ralph Baric, Ian Lipkin, and others."

3418 And then the rest of the body of the email describes  
3419 EcoHealth's work with the Wuhan Institute of Virology and other  
3420 collaborators. It identifies Erik Stemmy as the program officer.

3421 So I think we were struggling a little bit earlier as to  
3422 why Dr. Fauci had you focusing on the Baric work, sort of the  
3423 pre-pause work. Is it possible that he was focused on that on the 2nd  
3424 because he had already received this information from Dr. Morens on  
3425 the 27th?

3426 A. I don't know what Dr. Fauci knew or I just don't know what  
3427 was in his mind.

3428 Q. But to the extent you remember the EcoHealth Alliance grant  
3429 from your time from that early 2020 to 2023, it does seem like it  
3430 covers that bullet proof list that I'll let you read in a second,  
3431 covers a lot of the basic information about the grant's activities.

3432 A. This list of items?

3433 Q. Yes, sir.

3434 A. Yes.

3435 Q. So is it possible that he didn't ask you look at the  
3436 EcoHealth Alliance grant because he already knew at, at least, a high  
3437 level what they were doing?

3438 A. I honestly don't know what he was thinking.

3439 Q. Okay. Then we in the previous hour talked a little bit  
3440 about processes at the Office of Director, and I think we've seen a  
3441 number of emails that have been produced that say, I mean, Dr. Fauci  
3442 gets stuff for all sorts of -- gets requests for all sorts of things,  
3443 insights on the virus, to come give a speech like we saw with  
3444 EcoHealth. It seems like it's pretty common to get -- for him to say  
3445 to you please handle this.

3446 Is that -- was there a specific pattern to it?

3447 I guess what I'm most interested is if a university or a  
3448 company was asking him about the impact of COVID-19 on their  
3449 operations or maybe how they could help with a government response, is  
3450 that typically something that he would kick sort of upstairs to you?

3451 A. He might, but he might send it in many different  
3452 directions.

3453 MR. STROM: So I want to do another exhibit. This will be  
3454 Majority Exhibit 17.

3455 [Majority Exhibit No. 17 was  
3456 marked for identification.]

3457 BY MR. STROM:

3458 Q. It is email correspondence between Dr. Fauci on February  
3459 2nd, which is a Sunday, and I believe that is George Daley, the former  
3460 president of Harvard Medical School, and if we go to the  
3461 first -- excuse me -- to the second page, which is 2333, it's redacted  
3462 for business sensitive information, but it's from Jack Liu, who's been  
3463 the head of the Chinese company Evergrande.

3464 "Per discussion this afternoon in a conference at your  
3465 school -- and it's totally redacted. Then from that email, Dr. Daley  
3466 reaches out to Dr. Fauci and asks if Dr. Fauci will speak with these  
3467 Chinese officials to talk about coordinating a response.

3468 Do you recall this conversation at all? Were you ever  
3469 looped in on it?

3470 A. I recall that there were emails of this ilk at the time.

3471 Q. Okay. Do you recall -- other than Evergrande, do you  
3472 recall other similar contacts?

3473 A. Similar contact s?

3474 Q. Similar outreach from companies?

3475 A. From companies?

3476 Q. Um-hum or of this nature where you've got a school working  
3477 as an intermediary for a foreign company?

3478 A. I don't recall another example of that, but it's possible.

3479 Q. And then you don't -- you didn't attend the subsequent  
3480 phone call that was arranged?

3481 A. No. At least I don't think so. I don't recall doing so.

3482 Q. And then do you have any recollection of on the following  
3483 Monday, so February 3rd or sometime thereafter, Dr. Fauci mentioning  
3484 this call?

3485 A. Not specifically, no.

3486 Q. Okay. Then as a final sort of cleanup matter, we  
3487 mentioned -- this is going to relate to the reinstatement of the  
3488 EcoHealth Alliance grant. My understanding from your earlier  
3489 testimony is that Dr. Erbelding's division made the determination  
3490 after reviewing, I guess, a new proposal from EcoHealth that the work  
3491 should continue to be funded.

3492 To be fair, Dr. Lauer has told us there's sort of an  
3493 institutional presumption in continuing to fund the research, but our  
3494 big question here is who has control of the archived samples that they  
3495 will be doing since they're not going to be doing any collection in  
3496 China, which was where all of the collection on the grant was done.

3497 So we had an interview with Dr. Daszak that I'll make  
3498 Exhibit 18, Majority Exhibit 18.

3499 [Majority Exhibit No. 18 was  
3500 marked for identification.]

3501 MR. STROM: On the first page here, line 15 -- if you  
3502 really want to read, I guess, lines 9 through 19, is this  
3503 your -- well, I'll let you read it. Let me know when you're ready to  
3504 answer questions.

3505 [Witness peruses exhibit.]

3506 THE WITNESS: I'm not entirely sure who is going back and  
3507 forth here.

3508 BY MR. STROM:

3509 Q. Sure. So the questioning is me and the "A" is Dr. Daszak.  
3510 So you see "Q", question and answer.

3511 A. Okay.

3512 Q. So when this was presented to you to approve the  
3513 reinstatement of the grant or at least to concur with DMID, do you  
3514 recall being expressly told that the archived samples remained in WIV  
3515 custody?

3516 A. No.

3517 Q. Do you remember being told that any of the samples would  
3518 still be -- you know, were not, I guess, physically or digitally in  
3519 EcoHealth's possession?

3520 A. No.

3521 MR. STROM: Okay. Thank you.

3522 MR. BENZINE: We're pretty close to the hour. So we can go  
3523 off the record and take a break.

3524 [Recess.]

3525 FURTHER EXAMINATION BY THE MINORITY

3526 BY [REDACTED]

3527 Q. So, Dr. Auchincloss, we were talking earlier about the  
3528 importance of the work that had gone into a potential MERS vaccine and  
3529 accelerating the timeline for what became SARS-CoV-2 vaccines. Do you  
3530 recall talking about that earlier?

3531 A. Absolutely.

3532 Q. Okay. And then we've also, obviously, been talking about  
3533 the breadth and uncertainty of the term "gain-of-function", how  
3534 there's gain-of-function in the literal sense scientifically, which is  
3535 very expansive or can be read as very expansive, and then how there is  
3536 gain-of-function research of concern, which is a subset of that that  
3537 poses a greater risk that requires additional examination; is that a  
3538 fair characterization?

3539 A. I think that's fair.

3540 Q. Okay. Would the work that went into examining MERS and a  
3541 potential MERS vaccine that, again, became sort of a predicate for  
3542 work on the SARS-CoV-2 vaccine, would that have been fairly considered  
3543 gain-of-function in the broad sense of gain-of-function work that  
3544 we've talked about?

3545 A. I'm not actually sure that it would have. I mean, the main  
3546 effort that was being made was to mutate the spike protein of MERS to  
3547 stabilize in a certain configuration. I guess that you can call that  
3548 a gain-of-function, but I don't know that I would.

3549 Q. Okay. So it was alteration of --

3550 A. It was an alteration.



3551 Q. An alteration of a MERS virus strain against which  
3552 different potential vaccines were tested?

3553 A. Yes.

3554 [REDACTED] Okay.

3555 BY [REDACTED]

3556 Q. Dr. Auchincloss, I'd like to just take a quick moment to  
3557 revisit the discussion regarding the State Department fact sheet that  
3558 my Majority colleagues discussed in the previous round. This is  
3559 Majority Exhibit 9.

3560 A. This is the website that was archived.

3561 MS. GANAPATHY: Yes.

3562 THE WITNESS: Yes.

3563 [REDACTED] So in the last round, you were asked about  
3564 reports of researchers falling ill at the Wuhan Institute of Virology  
3565 in the fall of 2019. I'd like to take a moment to enter into the  
3566 record the Office of the Director of National Intelligence's  
3567 Declassified Evaluations of the Origins of the Pandemic. This  
3568 document is titled, quote, Potential Links Between the Wuhan Institute  
3569 of Virology and the Origins of the COVID Pandemic, and we can mark  
3570 this document Minority Exhibit D.

3571 [Minority Exhibit D was  
3572 marked for identification.]

3573 [REDACTED] I'll give you a moment to familiarize  
3574 yourself with it.

3575 [Witness peruses exhibit.]

3576 THE WITNESS: Did you want me to go to page 6?

3577 [REDACTED] Yes, please.

3578 THE WITNESS: All right.

3579 BY [REDACTED]

3580 Q. If you'll bear with me, I'm just going to read the first  
3581 paragraph of text and the last paragraph of text.

3582 The first paragraph reads, quote: The IC continues to  
3583 assess that this information neither supports nor refutes either  
3584 hypothesis of the pandemic's origins, because the researchers'  
3585 symptoms could have been caused by a number of diseases and some of  
3586 the symptoms were not consistent with COVID-19."

3587 And the last paragraph, the text reads, quote: While WIV  
3588 researchers fell mildly ill in Fall 2019, they experienced a range of  
3589 symptoms consistent with colds or allergies with accompanying symptoms  
3590 typically not associated with COVID-19 and some of them were confirmed  
3591 to have been sick with other illnesses unrelated to COVID-19.

3592 Dr. Auchincloss, do you have any reason to question the  
3593 validity of the intelligence community's evaluation of this matter?

3594 A. I've heard about this evaluation and I have no reason to  
3595 doubt that they came to that conclusion.

3596 Q. And no reason to doubt the validity of that conclusion as  
3597 well?

3598 A. I have no independent way of assessing the validity of it,  
3599 but I have no reason to doubt it.

3600 Q. And then if you will bear with me another moment, still

3601 within this exhibit, if you would turn to page 3, specifically, a  
3602 section titled, quote, IC Assessment on COVID-19 Origins, there are  
3603 several bullets on this page. I'll direct your attention to the  
3604 fourth bullet and give you a moment.

3605 [Witness peruses exhibit.]

3606 THE WITNESS: Okay.

3607 BY [REDACTED]

3608 Q. That bullet reads, for the record, quote: All IC agencies  
3609 assessed that SARS-CoV-2 was not developed as a bioweapon, end quote.

3610 Same question, Dr. Auchincloss: Is there any reason to  
3611 question the validity of the intelligence community's evaluation of  
3612 this matter either?

3613 A. I have no reason to doubt the validity of that conclusion.

3614 [REDACTED] Thank you.

3615 [REDACTED] We can go the record.

3616 [Recess.]

3617 FURTHER EXAMINATION BY THE MAJORITY

3618 BY MR. BENZINE:

3619 Q. I want to first start by, as you know, NIH Office of  
3620 Extramural Affairs started compliance efforts with regard to EcoHealth  
3621 in April of 2020.

3622 Every letter sent by them was sent by Mike Lauer, who heads  
3623 that office. When he testified in front of us, he said that he would  
3624 not sign and send a letter that he disagreed with. Do you have any  
3625 reason to doubt that assertion?

3626 A. None.

3627 MR. BENZINE: All right. I want to introduce Majority  
3628 Exhibit 19.

3629 [Majority Exhibit No. 19 was  
3630 marked for identification.]

3631 BY MR. BENZINE:

3632 Q. This is the first letter sent by Dr. Lauer to EcoHealth  
3633 from April 19, 2020. I just want to ask, generally, were you  
3634 previously aware of this letter?

3635 A. I don't think I've seen this letter.

3636 MR. BENZINE: Okay. Just to refresh your recollection, I'm  
3637 going to introduce Majority Exhibit 20.

3638 [Majority Exhibit No. 20 was  
3639 marked for identification.]

3640 BY MR. BENZINE:

3641 Q. This is an email chain from Dr. Erbeling to you dated  
3642 April 21, 2020, and if you flip to the attachment on the very last  
3643 page, it's the April 19th letter from Lauer.

3644 A. This is the letter you just showed me before; is that  
3645 right?

3646 Q. Yes, sir.

3647 A. And you say that there is -- somewhere in here is Dr.  
3648 Erbeling to me?

3649 Q. The very top email is from Dr. Erbeling to you with just  
3650 "FYI".

3651 A. Okay.

3652 Q. So did you -- prior, you said you didn't remember it, which  
3653 is one letter out of many four years ago. It's hard to remember.

3654 A. I remember the next letter.

3655 Q. Yes, the more famous letter.

3656 When did you -- did you know prior to these actions that  
3657 NIH was going to suspend or terminate the grant?

3658 A. I did not know. I think people had heard the President  
3659 talking about suspending the grant. So I wasn't surprised that it was  
3660 under consideration.

3661 Q. Is that where you heard the rumor, from the President's  
3662 speech or were there rumors circulating around NIAID?

3663 A. I think there were rumors circulating all over the place.

3664 Q. Prior to Dr. Lauer beginning to send letters, did he have  
3665 any consultations with anyone at NIAID that you're aware of?

3666 A. At NIAID or at NIH?

3667 Q. At NIAID.

3668 A. No, not that I know of.

3669 Q. Any consultations at NIH?

3670 A. No.

3671 Q. Was Dr. -- to the best of your knowledge, was Dr. Fauci  
3672 aware that the grant was going to be terminated or suspended?

3673 A. I don't know what he knew.

3674 Q. Dr. Daszak testified, in essence, to the sense that what  
3675 you just said, that the President gave a speech, and somewhere along

3676 the lines, the direction was given to Dr. Fauci or Dr. Collins to  
3677 terminate or find a way to terminate or suspend the grant, and Dr.  
3678 Fauci testified at a hearing that, in essence, they were told to  
3679 suspend the grant.

3680 Do you recall anything along those lines?

3681 A. I don't recall knowing what Dr. Fauci was told, no.

3682 Q. Dr. Fauci didn't have any discussions with you regarding --

3683 A. No.

3684 Q. -- those conversations?

3685 Okay. Did you have -- on this exhibit, did you have kind  
3686 of like a standing direction to Dr. Erbeling to forward you these  
3687 kinds of letters or was this new?

3688 A. She'd forward anything to me that she thought I would be  
3689 interested in, and this was certainly an item that she thought I would  
3690 be interested in.

3691 MR. BENZINE: Okay. I want to introduce Exhibit 21.

3692 [Majority Exhibit No. 21 was  
3693 marked for identification.]

3694 BY MR. BENZINE:

3695 Q. This is the other one you mentioned from April 24, 2020  
3696 from Dr. Lauer to EcoHealth, terminating their grant for convenience.

3697 Are you previously aware of this letter?

3698 A. I am.

3699 Q. How did you hear about this letter?

3700 A. I think somebody sent me a copy of it.

3701 MR. BENZINE: So we can go ahead and introduce 22.

3702 [Majority Exhibit No. 22 was  
3703 marked for identification.]

3704 BY MR. BENZINE:

3705 Q. This is an email chain. As you'll see again, the  
3706 attachment is the April 24th letter at the very end. It's a  
3707 continuation of the first email chain from April 19th with the very  
3708 bottom email on the first page being Dr. Lauer transmitting the  
3709 letter, then Emily Linde forwarding it to Matthew Fenton.

3710 Who is Matthew Fenton?

3711 A. Matthew Fenton was the director at that time of our  
3712 Division of Extramural Activities, which would include grants manage  
3713 programs.

3714 Q. Within NIAID?

3715 A. Within NIAID.

3716 Q. So he would -- Dr. Lauer is kind of -- like a similar role  
3717 to Dr. Lauer, but within NIAID?

3718 A. Not exactly like identical, but similar. That's fair  
3719 enough.

3720 Q. Okay. And Mr. Fenton? Dr. Fenton?

3721 A. It's Dr. Fenton.

3722 Q. Dr. Fenton forwards it to you and Dr. Erbeiding and with a  
3723 quote from the letter: At this time, NIH does not believe that the  
3724 current project outcomes align with the program goals and agency  
3725 priorities. NIAID has determined that there are no animal and human

3726 ethical considerations and this project is not a clinical trial, but,  
3727 rather, an observational study. As a result of this termination, a  
3728 total of \$369,819.56 will be remitted to NIAID and additional  
3729 draw-downs will not be supported.

3730           Then it's forwarded to Mr. Handley. Do you recall if that  
3731 was you that forwarded it to Mr. Handley?

3732           A. I believe it was.

3733           Q. Can you just give me your kind of reaction to Dr. Lauer's  
3734 letter?

3735           A. Well, obviously, we were disappointed. I hadn't seen a  
3736 grant be terminated before at NIH, but I didn't do the terminating and  
3737 I'm not going to second guess Mike Lauer for his evaluation of the  
3738 grant at that time.

3739           I have confidence in the initial review that was conducted  
3740 when we decided to fund the grant. So I fully support that decision,  
3741 but I had no knowledge of what was happening in the grant at the time  
3742 that Dr. Lauer decided to terminate.

3743           Q. Just on these first two and we'll run through a couple of  
3744 others, but the amount of forwarding across and notifying across kind  
3745 of insinuates that there were discussions regarding these letters.  
3746 Were you a part of any discussions regarding these letters?

3747           A. I don't know that there were many discussions. There was a  
3748 lot of forwarding of information, yes.

3749           Q. There weren't any conversations on whether or not NIAID  
3750 thought Dr. Lauer had the ability to do this?



3751 A. I had no knowledge whether he had the ability to do this or  
3752 not. I assumed he did.

3753 MR. BENZINE: We are going skip ahead and introduce  
3754 Majority Exhibit 23.

3755 [Majority Exhibit No. 23 was  
3756 marked for identification.]

3757 BY MR. BENZINE:

3758 Q. So this is a July 8th letter from Dr. Lauer to EcoHealth  
3759 that, again, it listed seven requests from Dr. Lauer to EcoHealth for  
3760 information. Were you previously aware of this letter?

3761 A. I am.

3762 Q. How were you made aware of this one?

3763 A. Again, somebody showed it to me, but I don't know exactly  
3764 who.

3765 Q. You weren't across the board aware of any letters that  
3766 Dr. Lauer sent prior to them being sent?

3767 A. No.

3768 MR. BENZINE: I want to introduce Majority Exhibit 24.

3769 [Majority Exhibit No. 24 was  
3770 marked for identification.]

3771 BY MR. BENZINE:

3772 Q. This is, again, Dr. Erbeling forwarding you the July 8th  
3773 letter, and Dr. Erbeling wrote "not sure where this is going". Did  
3774 you have any followup conversations with her regarding this letter?

3775 A. I'm sure I did, but I don't recall them.

3776 Q. Okay. Did you have any conversations -- at this point, had  
3777 you had any conversations with Dr. Fauci regarding these efforts?

3778 A. I don't believe I ever had a conversation with Dr. Fauci  
3779 about these events.

3780 Q. Do you know if Dr. Fauci was aware of these events?

3781 A. He knew that the grant had been terminated. He knew that  
3782 the grant had been reinstated with conditions that EcoHealth had to  
3783 fulfill before it could be actually funded.

3784 MR. BENZINE: Okay. I want to skip ahead again and  
3785 introduce Exhibit 25.

3786 [Majority Exhibit No. 25 was  
3787 marked for identification.]

3788 BY MR. BENZINE:

3789 Q. This is a letter, again, from Dr. Lauer to EcoHealth on  
3790 July 23rd. Are you previously aware of this letter?

3791 A. I don't know that I've seen this letter before.

3792 Q. So in this letter, Dr. Lauer informs EcoHealth that they  
3793 have not submitted their Year 5 annual progress report yet. It is at  
3794 the bottom of page 2, flowing onto page 3, that the report, the RPPR,  
3795 was due September 30, 2019 and this letter was July 23, 2021 and they  
3796 had not received the Year 5 report yet.

3797 When did you or did you ever become aware that EcoHealth  
3798 was late on their Year 5 report?

3799 A. I did eventually learn that. I don't know exactly when.

3800 Q. Do you know who told you?

3801 A. I don't.

3802 Q. Is it -- and you've been at the institute a long time.  
3803 That EcoHealth ended up being 22 months late on a progress report, is  
3804 that kind of common?

3805 A. I have been told that it's not uncommon for progress  
3806 reports to be late. I have been told that, in this case, with the  
3807 grant terminated, there was no checkup system to determine whether or  
3808 not it had been submitted or not.

3809 So I think this fell into a special category.

3810 Q. So we've heard that from Dr. Stemmy and Dr. Erbeling too,  
3811 and it colors us as interesting and we've talked about it a little  
3812 bit. At this point, any number of -- including Dr. Fauci and Dr.  
3813 Collins have testified on the Hill. There have been any number of  
3814 press requests. I'm about to introduce Exhibit 26, which is a request  
3815 from DARPA regarding this grant, and no one thought to pull the grant  
3816 file?

3817 A. I have no idea what anybody thought or didn't think.

3818 Q. It just seems surprising that no one would notice a report  
3819 is late for 22 months. Like I understand there are a lot of grants in  
3820 Dr. Stemmy's portfolio, but by six months late, nine months late, a  
3821 year late, eighteen months, wouldn't he go I'm missing a report?

3822 A. I'm sure that others have told you that the check to  
3823 determine that the progress report actually has come occurs at the  
3824 time of subsequent funding, and there wasn't any subsequent funding.  
3825 So that check didn't happen.

3826 BY MR. STROM:

3827 Q. I mean, as Mitch said, he's fielding questions from the  
3828 FBI. He's fielding questions from DARPA. He's fielding Congressional  
3829 Affairs questions, and as best as we can tell, he's comfortable  
3830 talking to the FBI, seemingly at length, without actually reopening  
3831 the first -- Years 1 through 5 of the grant file.

3832 You know, if that's the case, that's the case, but it just  
3833 strikes us as, I think, extremely odd, but to your recollection, when  
3834 either NIH or you all in the Office of the Director wanted to know  
3835 from the program officer, the guy who's managing the grant, what they  
3836 were up, what's the trajectory of this research, he was always  
3837 comfortable providing you this information; he answered it, you know,  
3838 accurately and seemingly on an informed basis?

3839 A. Now you're talking about Erik Stemmy?

3840 Q. Yes, sir.

3841 A. Informing us about what had been going on in this research?

3842 Q. Yeah, exactly, that he's able to relay all this sufficient  
3843 relevant information to both his bosses, the Office of the Director,  
3844 the FBI, DARPA, the Inspector General's Office in some instances, all  
3845 without looking at the first five years of the grant, essentially,  
3846 because if he went and looked at the first five years of the grant,  
3847 he'd realize, I would think would realize, that the Year 5 report is  
3848 missing; but if your recollection is that he was able to provide  
3849 information as needed, that's what you recall.

3850 A. It is.

3851 MR. STROM: Okay.

3852 BY MR. SLOBODIN:

3853 Q. When you were trying to pull together information for Dr.  
3854 Fauci talking in February 1, 2020, late February -- I'm sorry -- late  
3855 January, early February, you all were trying to get your arms around  
3856 what are we doing with this EcoHealth grant. So what was your  
3857 expectation if, you know, Dr. Erbeling and her team are checking  
3858 records?

3859 Would you have expected them to do a complete check and to  
3860 see -- you know, part of that would have been all the RPPRs that had  
3861 been submitted that would tell you the accomplishments of this  
3862 research grant, among other things. So was there an expectation,  
3863 would you have expected them to do a complete review when they're  
3864 pulling the -- especially, to prepare Dr. Fauci who's trying to get  
3865 information and what's the full picture?

3866 Right? Wasn't that going on?

3867 A. So I wouldn't be able to tell you at which point she was  
3868 checking and which documents were missing at which point. So I just  
3869 don't know what she would have had at her disposal.

3870 Q. Right, but I was just asking your expectations. You want  
3871 as much information as possible? Don't you want a complete picture?  
3872 If there are gaps, don't you want to know what those gaps are?

3873 A. I would want as much information as possible.

3874 Q. No. I would have expected that.

3875 I'm just having a difficult time trying to understand how,

3876 with all the several times this grant popped up where Dr. Fauci and  
3877 you and other senior leaders at NIAID, whether it was January and  
3878 early February to the termination of the grant that popped up again  
3879 and then there's a "Washington Post" column again on what's going on  
3880 with this grant, I'm having a difficult time understanding how it  
3881 could have been missed, the Year 5. Plus EcoHealth is claiming, Oh,  
3882 we did try to submit it, but the system wouldn't let us, and then  
3883 we've got that added dimension of, well, how can it be that the system  
3884 would lock him out and then how could it be that, if that were the  
3885 case, if they're telling the truth on that, isn't there an  
3886 alternative, you know, pick up -- you know, contact somebody else in  
3887 NIAID and say, I'm trying to submit this to you, but I'm having a  
3888 problem, can you help us?

3889 Does any of this make -- do you see where we're coming from  
3890 at all on this?

3891 A. I don't understand the timeline. If this was funded in  
3892 2016 and you're asking me what happened in the early part of 2020,  
3893 would a five-year progress report have been expected by that time? I  
3894 just don't have the timeline in front of me.

3895 MR. BENZINE: It was funded in 2014.

3896 THE WITNESS: In 2014?

3897 MR. BENZINE: Yes, sir.

3898 MR. SLOBODIN: But the particular report at issue covered  
3899 the fifth year, Year 5, the last year of the award. That would have  
3900 covered --

3901 MR. STROM: September of 2019.

3902 BY MR. SLOBODIN:

3903 Q. So this was the last year where we know EcoHealth  
3904 was -- and the WIV was doing work, getting money doing research work,  
3905 in the year before leading up to the pandemic.

3906 So -- and I understand what happened was the grant was  
3907 renewed. EcoHealth got a renewal, but the way your system works is  
3908 they got the money for the renewal without it being tied to the  
3909 submission of the RPPR, going back to what you were talking about. So  
3910 that seems to be where there was no -- you know, the prior times, it's  
3911 hard for me to see how you would have had a mishap with an RPPR,  
3912 because the grantee can't get next year's money without getting that  
3913 RPPR, but this seems to drop off with the Year 5, but this is the last  
3914 year.

3915 So the problem we're having is, boy, that's an important  
3916 year and you're being tasked to try to gather up as much information.  
3917 You're tasking other people.

3918 Just how could that not have been noticed?

3919 A. I really can't speak to that.

3920 BY MR. BENZINE:

3921 Q. So you said because the grant had been terminated, it was  
3922 no longer kind pinged the system that things were late, and putting  
3923 aside what we all kind of think what a reasonable person would do once  
3924 we realize something is 22 months behind, has that been fixed?

3925 A. I can't tell you that one way or the other.

3926 Q. Regardless of termination or suspension status, are  
3927 previous reports on government-funded work still due?

3928 A. On this particular grant?

3929 Q. On any grant. If my grant is in Year 5, I get my Year 6  
3930 renewal. I haven't turned in my Year 5 yet. My grant gets  
3931 terminated.

3932 Do I still have to turn in the Year 5 renewal?

3933 A. I don't know.

3934 MR. BENZINE: I'm going to introduce Exhibit 26.

3935 [Majority Exhibit No. 26 was  
3936 marked for identification.

3937 BY MR. BENZINE:

3938 Q. At the very bottom, there's an email from a doctor at  
3939 DARPA, and she writes: I think this email finds you well -- "I hope  
3940 this email finds you well. We would like to discuss with you, if  
3941 possible, the NIH funded efforts that were terminated. Would you have  
3942 some time to discuss?"

3943 Tina then forwards it to Christina and Jennifer Ruth, NIAID  
3944 OCGR NSWB. Do know what that list serve is?

3945 A. I'm not spotting where this is.

3946 Q. The second email from the top from Christina McCormick.

3947 A. I don't know who she is.

3948 Q. And then it goes to NIAID OCGR.

3949 A. Okay. OCGR is the Office of Communications and Government  
3950 Relations.



3951 Q. Okay. And then it seem like somewhere in there, it gets  
3952 determined that Dr. Lauer should handle this request from DARPA, and  
3953 you are CC'd from Hilary Marston to Dr. Lauer.

3954 Do you recall any conversations regarding how to respond to  
3955 DARPA's request?

3956 A. I really don't, no.

3957 Q. Was it odd to get a request from DARPA on an NIH grant?

3958 A. I don't know, but I doubt it.

3959 Q. You doubt it was odd?

3960 A. I doubt it was odd.

3961 Q. Do you work with -- does NIAID work with DARPA a lot?

3962 A. A lot.

3963 Q. Oh. Then we can move on.

3964 I want talk, then, and I'll attempt to avoid introducing  
3965 the exhibits, but if you need them, let me know and I'll introduce  
3966 them.

3967 A. Okay.

3968 Q. We talked about the greater than one-log growth policy, and  
3969 in October -- the Year 5 progress report was submitted in August of  
3970 2021 and it had an experiment in it that showed greater than one-log  
3971 growth at a certain point during the experiment.

3972 Dr. Lauer then sent another letter to EcoHealth and said  
3973 this was not immediately -- we were not immediately notified of this  
3974 excessive growth. Dr. Daszak claims that the same experiment was in  
3975 the Year 4 report that was in the Year 5 report.

3976 Dr. Lauer has told us that it is the NIH's current position  
3977 that they are two separate experiments and that the Year 5 report  
3978 experiment should have been relayed to the program officer.

3979 Does my summary sound correct to your --

3980 A. I'm aware of that disagreement and I really don't have any  
3981 way of judging who's story is accurate.

3982 Q. Okay. We won't get into the nitty-gritty of the grant  
3983 language then, because I don't think you'll recall what it is.

3984 One of the things that stood out to us in Dr. Daszak's  
3985 interview was he was asked how he could verify that they're two  
3986 different experiments, especially when Dr. Lauer has been asking for  
3987 the laboratory notebooks in order to independently verify them and  
3988 Dr. Daszak hasn't provided them to NIH, and his answer was, Well, I  
3989 called the WIV and they assured me it was two different experiments.

3990 A. Two different experiments or the same experiment?

3991 Q. The same experiment. Excuse me.

3992 That the WIV assured him that it was the same experiment.  
3993 Does that kind of satisfy oversight, that phone call, or would you  
3994 expect the show your work, show your homework kind of production?

3995 A. I think it's very hard to go back there in this  
3996 circumstance where the grant had been terminated and the relationship  
3997 with WIV was complicated. I don't know that I know a norm for  
3998 behavior under those circumstances.

3999 Q. In general, if NIH or NIAID requests information from a  
4000 grantee, is it on the burden of the grantee to provide it?

4001 A. I would think so.

4002 Q. To date, if you know, has EcoHealth provided NIH with the  
4003 notebooks that it has requested?

4004 A. I don't believe EcoHealth has the notebooks, but I don't  
4005 know that for sure.

4006 Q. So they haven't provided them?

4007 A. As far as I know.

4008 Q. Okay. EcoHealth's excuse in their official correspondence  
4009 is: "We do not have copies of those. They were created and retained  
4010 by the WIV. Nonetheless, I've forwarded your letter to the WIV and  
4011 we'll let you know their response as soon as the WIV responds to our  
4012 request."

4013 Again, to us, that feels kind of uncommon, that the prime  
4014 recipient of a U.S. award would rest so much and like would allow the  
4015 WIV to retain so much work product that was paid for with U.S. money  
4016 without being able to have access to it, and you just said it's the  
4017 prime award's duty to kind of respond to NIH.

4018 Have you seen any other examples like this?

4019 A. I have not seen other examples like this. Again, I would  
4020 say that the relationship with WIV was at that point so complicated.  
4021 That they're not complying with the requests for EcoHealth, frankly,  
4022 doesn't surprise me.

4023 Q. Okay. Thank you.

4024 John touched on it a little and the Minority touched on it  
4025 a little bit. I want to talk briefly about the reinstatement.

4026           So we just talked about the laboratory notebooks.  Would  
4027 you characterize EcoHealth as out of compliance with their grant  
4028 terms?

4029           A.  Compliance with the grant terms was not my responsibility.  
4030 So I really didn't have an opinion one way or another.

4031           Q.  Okay.  How is it determined that EcoHealth was capable of  
4032 getting the grant reinstated?

4033           A.  You'd have to ask Mike Lauer.  He put the conditions on or  
4034 he simply certified to us that they were now in compliance with his  
4035 conditions.

4036           Q.  By cutting out the WIV?

4037           A.  By cutting out the WIV, not just by cutting out the WIV.  
4038 There are a number of other things that he asked of EcoHealth Alliance  
4039 that they do, and then the question from our point of view was if WIV  
4040 is not in the grant, is the science still -- does it still have merit.

4041           Q.  So my question -- and, again, if you can't answer it,  
4042 that's okay.  NIH, NIAID Dr. Lauer, someone kind of like forced  
4043 EcoHealth into compliance by cutting out the WIV.  They haven't  
4044 provided the information NIH requested.  They're out of compliance,  
4045 but in order to remedy that out of compliance, they just severed the  
4046 relationship.

4047           Does that sound right?

4048           A.  I wasn't involved at all.

4049           Q.  Okay.  Who was the final signoff on reinstating the grant?

4050           A.  It's really two parts.  Mike Lauer had to certify that they

4051 were in compliance with his conditions and we had to say the science  
4052 is still meritorious.

4053 Q. Who is the "we"?

4054 A. Well, it would have been Dr. Erbeling and then the DMID  
4055 crew, but they would have told me that they were ready to go ahead.

4056 Q. And you would have made the final decision?

4057 A. I would have accepted their advice for sure.

4058 MR. BENZINE: Okay.

4059 BY MR. SLOBODIN:

4060 Q. Does it have any bearing at all, the fact that the NIH did  
4061 not accept EcoHealth's statement that there was only a single  
4062 humanized mice experiment within the SARS-like -- and this is what Dr.  
4063 Lauer has told us, you know, prompted the request that he put to  
4064 EcoHealth to get the missing lab notebooks and the associated  
4065 electronic files, because there's nothing else other than the section  
4066 that was in the RPPR describing this experiment, and it sounds like  
4067 from what Dr. Lauer told us that -- and I don't think -- he was  
4068 relying on some subject matter experts, I think, over at NIAID, but we  
4069 don't know.

4070 They couldn't tell by looking, because this -- what  
4071 EcoHealth was saying is there was one experiment, we published some of  
4072 the results in Year 4, some in Year 5, and NIH said, Well, but, we're  
4073 looking at the data and there's a lot of inconsistencies that make us  
4074 think there were two experiments, and in the decision memo from HHS to  
4075 debar the Wuhan Institute of Virology for 10 years, they specifically

4076 spoke about the NIH subject matter experts.

4077           They think it was more probable than not that there were  
4078 two experiments and Dr. Lauer would say, Well, I don't know we  
4079 couldn't make a conclusion, but the way that it was framed in the HHS  
4080 memo was that it was more probable than not, you know, to these  
4081 experts that there were two experiments; but then that leaves two  
4082 questions: One, that looks to me like NIH doesn't believe what is  
4083 EcoHealth telling them, that EcoHealth is giving them inaccurate  
4084 information about what they did with the grant money through the  
4085 sub-award that they were responsible to monitor.

4086           So that's the first question. Does that factor in at all?  
4087 Why would they -- if the probability is that you think -- let me blunt  
4088 so I'm more understood, but, you know, if NIH probable thinks that it  
4089 EcoHealth probably lied to the NIH, why would you then think even if  
4090 the science is meritorious, but because of integrity issues, maybe we  
4091 shouldn't reinstate them?

4092           A. I had no involvement with the Office of Extramural Research  
4093 decisions that certified that they were in compliance with their  
4094 stipulations. We were strictly involved with evaluating the science.

4095           Q. But this issue has never come up, the integrity of the  
4096 grantee, what they did with your grant money?

4097           A. Not our office. Dr. Lauer's office was responsible for  
4098 that portion of compliance.

4099           Q. Have you ever had any instances where you funded a grant  
4100 where there was scientific misconduct involved?

4101 A. I haven't personally experienced that. NIH has.

4102 Q. Okay. So we don't even know whether this experiment is  
4103 real. I mean, we just don't know, and there are all kinds of  
4104 inconsistencies in what was reported. That's why NIH can't conclude  
4105 or agree with EcoHealth.

4106 So the lack of proof, the missing lab notebooks, the fact  
4107 that nothing was published about this experiment, we don't know what  
4108 really happened. Would you agree?

4109 Because we don't really know what happened.

4110 A. So I don't know what happened with NIH's evaluation of  
4111 their compliance with the OER stipulations. I was not involved.

4112 Q. I got that, but my question is without the lab notebooks  
4113 and supporting documentation, we don't know what really happened in  
4114 that experiment. Right?

4115 A. I don't know what NIH knew and didn't know. I was simply  
4116 not involved.

4117 BY MR. STROM:

4118 Q. Maybe asking a different way here, DMID is presumably aware  
4119 of Dr. Lauer's finding, that he thinks it's more probable than not  
4120 that there are two experiments, and then their assessment to continue  
4121 funding the grant, I guess, builds in that discrepancy?

4122 Because it seems like you're sort of saying between Lauer's  
4123 determination and Lauer consulted NIH internal experts and Daszak's, I  
4124 guess, averments according to some conversation he had with Shi  
4125 Zhengli that you're sort of -- they're a wash. They're in

4126 disagreement. Daszak's sort of, I guess, personal integrity, whatever  
4127 you think of him, doesn't come in to impact the scientific assessment  
4128 for reinstating the grant?

4129 A. As I said, evaluating compliance was entirely in the Office  
4130 of Extramural Research. We were not involved. We were simply asked  
4131 is the scientific merit still there even without the WIV experiments.

4132 Q. But does the scientific merit not involve an assessment of  
4133 the individual's, the primary investigator's, past sort of conduct and  
4134 interactions with NIH?

4135 A. Well, I think that was being evaluated by Dr. Lauer's  
4136 office and we went with their determination. We were asked is the  
4137 science meritorious.

4138 BY MR. SLOBODIN:

4139 Q. What about the character of the investigator or the  
4140 organization that's involved in the research?

4141 So I described the scenario of scientific misconduct.  
4142 Another scenario would be that there was credible evidence that the  
4143 principal investigator had been involved in sexual misconduct with  
4144 someone on his scientific team. So would that be completely  
4145 irrelevant?

4146 Is that what you're telling us?

4147 A. Wait a minute.

4148 Q. The character of the people you fund is completely  
4149 irrelevant?

4150 A. Are you providing me with a hypothetical about sexual --



4151 Q. Yes. It's a hypothetical question. I want to understand  
4152 the --

4153 A. I'm not going to address that.

4154 Q. What's that?

4155 A. I'm not going to address that.

4156 Q. Why not?

4157 MS. GANAPATHY: Alan, I think it calls for a little bit of  
4158 speculation. If you could ask more concrete --

4159 BY MR. STROM:

4160 Q. You said earlier the circumstances surrounding the WIV were  
4161 so complicated -- you agreed with that assessment -- that it's not  
4162 surprising that the WIV is not cooperating, but the exhibit I read in  
4163 earlier is that Peter Daszak is basing the continued scientific merit  
4164 of his grant on the WIV cooperating and handing over archived samples.

4165 So laying aside -- again, there's recent news allegations  
4166 about misrepresentations he's made to DARPA. Laying aside the fact  
4167 that Dr. Lauer doesn't believe him, is the fact that he couldn't get  
4168 the WIV to cooperate, but is counting on the WIV to cooperate now, was  
4169 that not part of the assessment?

4170 A. Again, compliance was determined by --

4171 Q. The scientific merit assessment.

4172 A. I think that the assumption was that they would be able to  
4173 do the work that they said they were going to be able to do.

4174 MR. STROM: Okay.

4175 BY MR. BENZINE:

4176 Q. And Dr. Lauer never told -- at Dr. Erbeling testified that  
4177 she was never aware that Dr. Daszak, when he I said I have access to  
4178 the samples, they were meant retained at the WIV. You weren't aware  
4179 of that either?

4180 A. I don't know where the samples are. I don't know who is  
4181 controlling them. I don't know anything about samples.

4182 Q. During a scientific merit evaluation, wouldn't that  
4183 information be helpful, who is in custody and control?

4184 One of the -- Dr. Erbeling told a couple of times, in a  
4185 briefing and her interview, that the primary rationale for reinstating  
4186 the grant was that the U.S. had funded the sequences and samples and  
4187 EcoHealth said we have access to those samples. If their access could  
4188 be cut off in a minute, I mean, it's the Wuhan Institute of Virology.  
4189 As John already laid out, you testified that the relationship isn't  
4190 there anymore. It's not surprising that they're not cooperating in  
4191 the other investigation.

4192 I guess like knowing that information now, is it worthwhile  
4193 to reevaluate the scientific merits of that grant?

4194 A. I think I'd probably let it play out. If they're really  
4195 not providing samples, then we can terminate the grant.

4196 Q. If you let it play out and terminate the grant, do you  
4197 remit the funds?

4198 A. I don't know.

4199 BY MR. SLOBODIN:

4200 Q. Just to confirm for the record, you guys only look at the

4201 science? You don't look at issues about integrity and character of  
4202 the people you're funding?

4203 Just for the record, just confirm or clarify for me what  
4204 exactly is you all's position?

4205 A. The grant was not funded until Dr. Lauer was  
4206 certified -- was happy that the conditions that he had imposed had  
4207 been addressed. He came to us and said they have addressed all of my  
4208 concerns; is there still scientific merit.

4209 Q. Right, but you all are on the front lines interacting with  
4210 the grantee. They're reporting to you. They're making statements to  
4211 you to get funding and to account for what they did with the money.

4212 So if they provided inaccurate or false information to you  
4213 all, not to Lauer's people, to you all -- so I'm trying to understand.  
4214 Does that matter at all or you guys are -- it doesn't matter? All you  
4215 care about is the science? You don't care about --

4216 A. I don't have information about Peter Daszak's personal  
4217 reliability one way or another.

4218 Q. Well, we may not be talking about Dr. Daszak. We may be  
4219 talking about the WIV as sub-grantee. Right?

4220 They were ones -- we're not getting the sense that  
4221 Dr. Daszak had firsthand knowledge about these experiments. He was  
4222 just passing through what he got from the WIV, but just as a matter  
4223 principle, though, I'm just trying to understand this situation.

4224 If he didn't know or he did know, we don't know  
4225 whether -- but he had to make a determination himself to make a

4226 representation it was a single experiment. So, you know, he put his  
4227 reputation on the line and put that in a letter to rebut a letter NIH.

4228 So but I'm not getting a sense there's any consequences  
4229 to -- real consequences to that. I mean, the science is there.  
4230 That's all you care about. Am I wrong?

4231 A. All of our applications are reviewed in peer review where  
4232 the investigator is evaluated as part of the assessment and then  
4233 re-reviewed at our council level. So these issues have been  
4234 addressed.

4235 In the case of this particular award, Mike Lauer said there  
4236 are eight things or twelve things -- I don't remember how many -- that  
4237 need to be addressed before we can go ahead and fund this grant. When  
4238 he came back to us and said those have been corrected, the question  
4239 was was there still scientific merit.

4240 Q. Well, I would also note that the first half of the results  
4241 of this, if it was a single experiment, he only reported half on the  
4242 renewal application. Then there's a question of when did he have the  
4243 results from the Year 5 to have the issue with the excessive virus  
4244 growth and was he holding that back.

4245 I guess nobody -- I'm just concerned about the integrity of  
4246 your process. He may or may not -- it's not -- I mean, you're also  
4247 talking about it the renewal process. Even with all your peer review,  
4248 if he's holding back that information people, the people on that panel  
4249 aren't seeing it. They're judging on the four corners of what's been  
4250 submitted.

4251           So I think that's -- don't you want your peer review people  
4252 to have total information on a grant applicant?

4253           A.     That sounds like a rhetorical question.

4254           Q.     No.  It's a serious question.  It's not rhetorical.  I'm  
4255 not understanding the system and I'm not getting the sense that  
4256 anybody is really concerned about the integrity of the process which  
4257 our, you know, biomedical research enterprise stands on.

4258           So we have an issue about what kind of research was  
4259 actually supported under this grant, and that was part of the renewal  
4260 application that EcoHealth put forward.  So my question is were they  
4261 supposed to report the whole picture or can they cherry pick stuff  
4262 from an ongoing experiment?  Is that all right?

4263           A.     No, but I have no information about what he did or didn't  
4264 report.  I have no information about Dr. Daszak and any malfeasance.  
4265 I just have no information about that.

4266           MR. SLOBODIN:  I understand.  It's a basis for asking the  
4267 question.

4268 BY MR. BENZINE:

4269           Q.     I have potentially two more questions.

4270           A.     Okay.  I was watching those pages get to be smaller and  
4271 smaller.

4272           Q.     Isn't that great?

4273           A.     Yeah.

4274           Q.     So we talked very briefly about the WHO organized COVID-19  
4275 origins investigation and I think I asked if you had talked to anybody

4276 about it, and you said no, but I want to ask you, there were -- it was  
4277 widely reported that the U.S. Government put forward names to the WHO  
4278 to be on that team, and I think it was three names is what we  
4279 reported, and the WHO -- somewhere in the process, none of the three  
4280 names were selected and Dr. Daszak ended up being the only one that  
4281 went to investigate his own funded lab, which is a different question  
4282 that we don't need to get into.

4283           Do you have any awareness of the names that were submitted  
4284 by the U.S. Government?

4285       A.    I don't recall. I probably knew them at some point.

4286       Q.    But does that -- were there actually names submitted?

4287       A.    I've been told so, but I don't know who they were.

4288       Q.    Okay.

4289       A.    But yeah. It was pretty frustrating that we didn't end  
4290 with more Americans on that investigation.

4291       Q.    Do you know how Dr. Daszak got paid?

4292       A.    I have no idea.

4293       Q.    Have you been a part -- WHO kind of like scrapped this  
4294 group and created a new one, and I know it's been -- at this point  
4295 with the political climate with China, it will probably never happen,  
4296 but I know there's been a lot of back and forth between the WHO and  
4297 China in trying to come to terms of reference.

4298           Have you been a part of any of those conversations?

4299       A.    No.

4300       Q.    The final one is it was -- one of their reports was

4301 introduced from the Director of National Intelligence. They've been  
4302 reviewing the origins question since -- I think the first meeting was  
4303 pretty early January that they had at the NSC level.

4304 At any point, were you contacted by anyone in the  
4305 intelligence community to assist in those efforts?

4306 A. I had one interview with the FBI to talk about origins.

4307 Q. Do you recall when?

4308 A. It was actually quite recent, by which I mean probably six  
4309 to eight months ago.

4310 MS. GANAPATHY: Mitch, anything beyond of the fact of and I  
4311 just allowed him to give the date, but any substance of that  
4312 interaction, you know, there is institutional sensitivities and  
4313 potential law enforcement interests in that potentially ongoing  
4314 investigation that, as agency counsel, I can't even speak to.

4315 So we'd ask that you direct any questions about that to the  
4316 FBI.

4317 MR. BENZINE: There's law enforcement interest in the  
4318 origins investigation?

4319 MS. GANAPATHY: So he just said he was interviewed by the  
4320 FBI. Right?

4321 MR. BENZINE: Yeah, but they're doing a scientific analysis  
4322 of the origins. I wasn't aware of any potential criminal case.

4323 MS. GANAPATHY: I'm not saying there is or is not a law  
4324 enforcement interest, but I'm saying FBI is a law enforcement  
4325 organization and so I would ask that you -- I'm just assuming there

4326 might be those interests going on, but I don't actually know, but what  
4327 I will say is we can't speak to that here in this setting today  
4328 because it implicates interests that we just can't get into.

4329           You know, we're here on a voluntary basis, and if you have  
4330 any questions about it, you can -- you should direct those to the FBI.

4331           MR. BENZINE: Well, a couple more --

4332           MR. SLOBODIN: Were you instructed by the FBI not to talk  
4333 about it?

4334           MR. OSTERHUES: Yeah. You're asserting something you just  
4335 said you don't even know what it is.

4336           MS. GANAPATHY: I'm not asserting anything. I'm saying  
4337 we're here on a voluntary basis.

4338           MR. OSTERHUES: You're instructing him to not answer the  
4339 question.

4340           MS. GANAPATHY: I'm saying we can't get into that today,  
4341 and if you have questions about that, you should ask the other party  
4342 involved, which you're free to do.

4343           MR. OSTERHUES: We've asked this question of every witness.

4344           MS. GANAPATHY: Yeah, and I've allowed him to answer yes or  
4345 no. I've even allowed him to give you the date, but the substance of  
4346 that interaction, you know, it just implicates sensitivities that I  
4347 might not be privy to and I just don't want to --

4348           MR. BENZINE: But if you don't know the sensitivities, you  
4349 can't object to the question.

4350           MS. GANAPATHY: Well, they might be there. I don't know.



4351 BY MR. OSTERHUES:

4352 Q. Doctor, when you talked to the FBI, did they tell you not  
4353 to discuss your conversation with anyone?

4354 A. No. They did not say that.

4355 BY MR. BENZINE:

4356 Q. Was the discussion classified?

4357 A. I don't believe it was, no.

4358 Q. All right. Then what I would like you to do is to answer  
4359 this question: Did you answer their questions substantively similar  
4360 to how you answered ours today?

4361 A. Yes.

4362 MR. BENZINE: Thank you.

4363 That's all I have. We can go off the record.

4364 [Recess.]

4365 FURTHER EXAMINATION BY THE MINORITY

4366 BY [REDACTED]

4367 Q. Thank you again, Dr. Auchincloss, for being here. I just  
4368 have a few questions to wrap up some things that we've been talking  
4369 about today.

4370 You are not testifying today that there was an NIH coverup  
4371 related to gain-of-function research. Correct?

4372 A. I am not testifying that.

4373 Q. And you are not testifying that Dr. Fauci lied to cover up  
4374 gain-of-function research at the Wuhan Institute of Virology.  
4375 Correct?

4376 A. Most assuredly not.

4377 Q. And if anyone were to walk out of this room today and  
4378 characterize your testimony as having established that Dr. Fauci lied  
4379 to cover up gain-of-function research at the WIV, that would be wrong.  
4380 Correct?

4381 A. That would be wrong and it would go back to this problem  
4382 that people can talk about gain-of-function research, but what we  
4383 really want to talk about is gain-of-function research of concern.

4384 Q. Thank you. And if anyone walked out of this room today and  
4385 characterized your testimony as revealing that the COVID-19 virus was  
4386 likely created by gain-of-function research funded by Dr. Fauci and  
4387 the National Institute of Allergy and Infectious Diseases, that would  
4388 be inaccurate and a misrepresentation of your statement. Correct?

4389 A. Most assuredly.

4390 [REDACTED] All right. Thank you very much, Dr.

4391 Auchincloss.

4392 BY [REDACTED]

4393 Q. Just a few, again, sort of like big picture concluding  
4394 questions from me: So you had a very close seat as the U.S.  
4395 Government identified and responded to the COVID-19 pandemic, and I'm  
4396 curious. What are your thoughts to the extent you've had an  
4397 opportunity to reflect on that challenge, that undertaking?

4398 You know, what are the major lessons from the pandemic and  
4399 our government's response and how would those help us be better  
4400 prepared to prevent or respond to the inevitable next pandemic?

4401           A.    Well, I'm incredibly proud of the institute that I helped  
4402 lead. We've had our own after action assessments, actually multiple  
4403 times now, and we have identified things that we could do better, but  
4404 I think in the big picture, it's pretty extraordinary what the  
4405 institute accomplished.

4406           Q.    Any particular -- I mean, obviously, there are after action  
4407 reports. I imagine you agreed largely with them, but, you know, any  
4408 particular things that stick out to you personally just from where you  
4409 sat that you think went very well and, you know, confirmed sort of the  
4410 plan and the process or things that everybody could do better, as is  
4411 always the case?

4412           A.    The vaccine trials were extraordinary. The speed of some  
4413 of therapeutic trials were extraordinary.

4414                    I was disappointed that we didn't do better with monoclonal  
4415 antibodies as a frontline treatment. We never seemed to be able to  
4416 get that off the ground.

4417                    The biggest problems that we had during the pandemic were  
4418 really operational and a lot of it had to do with the flow of funding,  
4419 which was cumbersome, slow, and hard to control.

4420           Q.    Actually, you predicted my next question. So you mentioned  
4421 when we first were talking hours ago the importance of the  
4422 congressional supplemental early on in the pandemic and the impact  
4423 that had on accelerating the timeline for treatments, vaccines.

4424                    Is consistent funding, even outside of the context of a  
4425 pandemic, important for NIH and NIAID to do its work for preventing

4426 and responding to future pandemics?

4427 A. No question about it. I talked about the \$1.5 billion  
4428 supplement that you gave to NIAID. That was vitally important, but in  
4429 the end, we ended up spending closer to \$5 billion because we had  
4430 money that was being funneled through the department to help pay for  
4431 some of the vaccine trials.

4432 Towards the end of the pandemic, as people were kind of  
4433 looking in the rearview mirror, the money that we had received for  
4434 further antiviral research and further vaccine research was suddenly  
4435 rescinded, and Congress has thought it was unnecessary to further fund  
4436 pandemic preparedness in the future, and I kind of find myself  
4437 scratching my head, saying we've just been through an historical  
4438 event, wake up.

4439 Q. So I think I know the answer to this question, but would  
4440 further cutting NIAID's budget harm our ability to prevent, prepare  
4441 for, and address the inevitable next pandemic?

4442 A. Further cutting the NIAID or -- I can't remember whether  
4443 you said NIAID --

4444 Q. NIAID.

4445 A. -- or NIH.

4446 Yes. It would be disastrous, and the House proposal for a  
4447 23 percent cut to NIAID will cripple us.

4448 ██████████ Thank you.

4449 We can go off the record.

4450 MS. GANAPATHY: No further questions?

4451 MR. BENZINE: No. All good.

4452 MS. GANAPATHY: Okay. Great.

4453 [Whereupon, at 3:53 p.m., the interview concluded.]

4454 CERTIFICATE OF NOTARY PUBLIC.

4455 I, CATHERINE B. CRUMP, the officer before whom the  
4456 foregoing deposition was taken, do hereby testify that the witness  
4457 whose testimony appears in the foregoing deposition was duly sworn by  
4458 me; that the testimony of said witness was taken by me  
4459 stenographically and thereafter reduced to typewriting under my  
4460 direction; that said deposition is a true record of the testimony  
4461 given by said witness; that I am neither counsel for, related to, nor  
4462 employed by any of the parties to the action in which this deposition  
4463 was taken; and further, that I am not a relative or employee of any  
4464 attorney or counsel employed by the parties hereto nor financially or  
4465 otherwise interested in the outcome of the action.

4466 \_\_\_\_\_  
4467 CATHERINE B. CRUMP  
4468 Notary Public in and for the  
4469 District of Columbia

4470 My Commission Expires: October 31, 2027