

# Congress of the United States

## House of Representatives

SELECT SUBCOMMITTEE ON THE CORONAVIRUS PANDEMIC  
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### STAFF MEMORANDUM

**TO:** Select Subcommittee on the Coronavirus Pandemic Republican Members

**FROM:** Select Subcommittee on the Coronavirus Pandemic Republican Staff

**DATE:** May 31, 2024

**RE:** Key Takeaways of Dr. Anthony Fauci's Transcribed Interview

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On January 8 and 9, 2024, Dr. Anthony Fauci, former Director of the National Institute of Allergy and Infectious Diseases (NIAID), testified in a transcribed interview before the Select Subcommittee on the Coronavirus Pandemic (Select Subcommittee). Below are some key takeaways from this interview.

**I. The lab leak theory is not a conspiracy theory.**

Dr. Fauci's transcribed interview corroborated other testimony by U.S. public health officials, including the former Director of the National Institutes of Health (NIH), Dr. Francis Collins, that the lab leak theory is not a conspiracy theory and that he continues to maintain an open mind about the origins of SARS-CoV-2, despite public and private statements which appear to indicate otherwise.

<b>Finding:</b>	The hypothesis that the COVID-19 pandemic was the result of a lab leak or lab related accident is not a conspiracy theory.
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Q.	Just you sitting here today, do you think the possibility or the hypothesis that the coronavirus emerged from a laboratory accident is a conspiracy theory?
A.	Well, it's a possibility. I think people have made conspiracy aspects from it. And I think you have to separate the two when you keep an open mind, that it could be a lab leak or it could be a natural occurrence. I've mentioned in this committee that I believe the evidence that I've seen weighs my opinion towards one, which is a natural occurrence, but I still leave an open mind. So I think that in

and of itself isn't inherently a conspiracy theory, but some people spin off things from that that are kind of crazy.<sup>1</sup>

The investigation into the origins of COVID-19 is ongoing and there is no incontrovertible proof of either a zoonotic or a lab origin of SARS-CoV-2. Dr. Fauci even acknowledged that the U.S. would need considerable cooperation from China to potentially confirm that the virus came from a lab, and that this is highly unlikely.

Q. What would be evidence, in your mind, to kind of move the needle towards a lab origin?

A. I think we would need much, much cooperation from the Chinese to be able to do that, yeah.

Q. Do you think -- we're 4 years and 9 days post pandemic beginning, post virus coming out. Do you think we'll ever know?

A. Given the relationship and the tension and the back-and-forth-type accusations that have gone on, I think that makes it less and less likely that we'll ever know.<sup>2</sup>

Former Centers for Disease Control and Prevention (CDC) Director, Dr. Robert Redfield, testified to the Select Subcommittee that he believed that COVID-19's origin may only be determined through the intelligence community rather than the scientific community.

A. You know, I thought about this a lot of how we're going to get to the answer that you're striving to get to: What is the origin? I don't think that answer's going to come from the scientific community. I think that answer's going to come from the intelligence community.<sup>3</sup>

This is further indication that the lab leak is entirely plausible, and that the Chinese Communist Party has and continues to block any fulsome investigation. Yet, the debate was so charged that Americans were censored on social media, and it led to a change in the way scientific debate was conducted.<sup>4</sup>

## **II. Certain consequential COVID-era policies lacked supporting scientific evidence.**

Dr. Fauci's transcribed interview revealed that some of the most consequential policies imposed during the U.S. government's COVID-19 pandemic response lacked sufficient scientific

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<sup>1</sup> Transcribed Interview of Anthony Fauci, M.D., former Dir., Nat'l Inst. of Allergy & Infectious Diseases, Nat'l Insts. of Health, at 2 – 116-117 (Jan. 8 – 9, 2024).

<sup>2</sup> Fauci TI, at 2 – 123.

<sup>3</sup> Investigating the Origins of COVID-19: Hearing before the Select Subcomm. on the Coronavirus Pandemic (March 8, 2023) (Statement of Dr. Robert Redfield, Former CDC Director).

<sup>4</sup> Sarah Wheaton, *How the coronavirus split science in two*, POLITICO (Dec. 8, 2021).

evidence to support them.

**Finding:** The “6 feet apart” social distancing program that federal public health officials endorsed was likely not based on any science or data.

One of the most consequential COVID-19 pandemic-era guidelines was social distancing, which is commonly defined as maintaining at least six feet of separation from another person. This guideline was promulgated and implemented nationwide and nearly everyone in the country felt its effects—particularly students.

The six feet of separation recommendation had real life consequences. This guideline made it nearly impossible for schools nationwide to re-open due to the pressure from teachers’ unions to follow this guideline. In addition, businesses had to adapt at great cost or risk complete closure.

The six feet rule was one of the phrases and rules every single American knew during the pandemic, and it was largely arbitrary. In fact, an article in the British Medical Journal in August 2020, explained these rigid rules were based on an oversimplification of outdated science and experience of past viruses.<sup>5</sup> The six feet rule caused widespread economic and social damage to the American collective.

When asked about the scientific evidence and data that was analyzed before federal public health officials issued the six feet guidance, Dr. Fauci testified that it just appeared out of thin air.

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|----|--|
| Q. | Do you recall when discussions regarding, kind of, the at least a 6 foot threshold began?  |
| A. | The 6 foot in the school?  |
| Q. | Six foot overall. I mean, 6-foot was applied at businesses—  |
| A. | Yeah.  |
| Q. | --it was applied in schools, it was applied here. At least how the messaging was applied was that 6-foot distancing was the distance that needed to be --        |
| A. | You know, I don't recall. It sort of just appeared. I don't recall, like, a discussion of whether it should be 5 or 6 or whatever. It was just that 6 foot is -- |
| Q. | Did you see any studies that supported 6 feet?   |

<sup>5</sup> Nicholas R. Jones, *et al.*, *Two meters or one: what is the evidence for physical distancing in COVID-19?*, BMJ (Aug. 25, 2020).

A. I was not aware of studies that in fact, that would be a very difficult study to do

...

A. Yeah. Yeah. I think it would fall under the category of empiric. Just an empiric decision that wasn't based on data or even data that could be accomplished. But I'm thinking hard as I'm talking to you.

Q. Uh huh.

A. I don't recall, like, a discussion of, "Now it's going to be" it sort of just appeared, that 6 feet is going to be the distance.<sup>6</sup>

**Finding:** Dr. Fauci admitted that vaccine mandates could lead to vaccine hesitancy and that this was not sufficiently studied ahead of time.

Much like the six feet of social distancing guideline, mandatory vaccination policies were consequentially imposed on millions of students, workers, military servicemembers, and the public. However, Dr. Fauci testified there needs to be an “after-the-event evaluation” to see if vaccine mandates were counterproductive. Dr. Fauci seemingly implied these “social-type studies” were not done prior to the U.S. government imposing vaccine mandates.

Q. Do you think mandating vaccines can result in some hesitancy?

A. ...I think one of the things that we really need to do after the fact, now, to -- you know, after-the-game, after-the-event evaluation of things that need to be done, we really need to take a look at the psyche of the country, have maybe some social-type studies to figure out, does the mandating of vaccines in the way the country's mental framework is right now, does that actually cause more people to not want to get vaccinated, or not? I don't know. But I think that's something we need to know.<sup>7</sup>

**Finding:** Dr. Fauci testified he did not recall any supporting evidence for masking children.

Dr. Fauci also testified that he was not aware of any evidence supporting the masking of children, and that it's still “up in the air” whether mask-wearing was associated with learning loss and speech development issues in children.

Q. Do you recall reviewing any studies or data supporting masking for children?

<sup>6</sup> Fauci TI, at 2 – 183-184.

<sup>7</sup> Fauci TI, at 2 – 202-203.

A. You know, I might have, Mitch, but I don't recall specifically that I did. I might have.

Q. Since the -- there's been a lot of studies that have come out since the pandemic started, but specifically on this there have been significant on kind of like the learning loss and speech and development issues that have been associated with particularly young children wearing masks while they're growing up. They can't see their teacher talk and can't learn how to form words. Have you followed any of those studies?

A. No. But I believe that there are a lot of conflicting studies too, that there are those that say, yes, there is an impact, and there are those that say there's not. I still think that's up in the air.<sup>8</sup>

### **III. Dr. Fauci was unable to recall numerous issues and events surrounding the pandemic.**

Over his two-day transcribed interview, Dr. Fauci claimed he “did not recall” COVID-19 information and conversations relevant to the Select Subcommittee’s investigations more than 100 times. While it is expected Dr. Fauci would not be able to recall every conversation, e-mail, event, and issue over his nearly 40-year career as NIAID Director, some of these assertions were not credible.

**Finding:** Dr. Fauci testified he did not recall or was not aware of significant information regarding EcoHealth Alliance Inc. (EcoHealth), its NIAID grants, or its President, Dr. Peter Daszak.

The Select Subcommittee has uncovered a myriad of issues with EcoHealth’s actions, including but not limited to their stewardship of federal funds and their collusion with senior NIAID officials. However, despite his position as Director of NIAID, Dr. Fauci was unable to recall with any acceptable level of specificity details about the EcoHealth grant.

Dr. Fauci testified he did not know Dr. Daszak before the outbreak of the pandemic:

Q. Let me just ask, what is the extent to which you knew Dr. Daszak prior to the pandemic, let's say?

A. Prior to the pandemic, I really don't recall any specific interaction with him. In the course of all of these activities that were going on, someone – I guess it was in the press – showed a picture of me with Dr. Daszak. I take probably thousands of pictures with people at scientific meetings. So the picture shows I've met him. If you ask

<sup>8</sup> Fauci TI, at 2 – 136.

me, do I have a relationship of back-and-forth discussions with him, the answer to that would be "no."

Q. Would that relationship, as you just described it, be pretty similar to other well-known folks in their respective fields who have grants with the agency?

A. I would say less so. And the reason I say "less so" is that there are people who are grantees who are in an area of research that I am very familiar with and that I'm involved with. For example, my relationship with many people in the field of HIV/AIDS research is something in which I talk to them all the time. Sometimes I collaborate with them on research. I see them at the scientific meetings that I go to. That is not the relationship I had with Dr. Daszak.<sup>9</sup>

Dr. Fauci could not recall any of the details regarding when he discovered that EcoHealth was nearly two years late in submitting their year 5 progress report for their grant:

Q. Do you recall when you first found out that the year 5 progress report was missing from the EcoHealth grant?

A. I don't recall precisely. It was somewhere on a briefing that the staff gave to me. I don't know exactly when that was. It could have been later. I don't know.

Q. Okay. Do you think, just to the best of your recollection, whether it was before you were aware that the year 5 progress report was late before May 2021 or it would have been after?

A. I don't recall.<sup>10</sup>

In fact, Dr. Fauci was not even able to comment on this issue, as he claimed the issue would not typically have been elevated to him:

A. I can't comment on that because that kind of compliance issues never raises to the level of me, the director of the institute. So I would be hesitant to speculate on something that -- a process that I essentially never get involved in.<sup>11</sup>

Despite the fact EcoHealth was conducting risky gain-of-function (GoF) research at the Wuhan Institute of Virology (WIV), Dr. Fauci seemed to hardly know anything about the details of the grant during his tenure as Director of NIAID.

<sup>9</sup> Fauci TI, at 1 – 59.

<sup>10</sup> Fauci TI, at 1 – 75.

<sup>11</sup> Fauci TI, at 1 – 76.

Dr. Fauci was similarly unhelpful in explaining the grant process:

Q. Okay. So we've walked through kind of the, I guess, the standard practice of standard operating procedure of how a grant gets approved. And you had testified previously that you do not individually approve grants, which is substantially similar to what you just said, and they go through multiple levels of peer review. "So I would not have by standard way things work, have seen this, read it, or individually approved it." You were discussing the EcoHealth grant. The -- and, again, if I'm wrong, please correct me -- the use of "standard" there at least implies that there is a not standard way that this would work. Is there -- are there procedures where a grant could get funded without going through these steps?

A. I've never heard of that.

Q. Okay. Have there ever -- and, again, to the best of your recollection -- have there ever been any grants that you individually approved outside of the en bloc process?

A. I don't individually approve grants.

Q. I want to -- we want to ask a couple questions about grants that involve a foreign component. Do you know the process for vetting or certifying foreign labs to then receive U.S. taxpayer money?

A. I don't think I could give you chapter and verse of it, but there is -- first of all, whenever you have a foreign grant, the State Department has to know about it at least. That's one thing. And the other thing, it requires special attention of the council.

Q. Which council, just for clarity?

A. The National Advisory Council of the institute. So often you see something that gets special attention. And it'll be, you know, too much money, blah, blah, blah. It says foreign grant. They have to get special attention of the council.

Q. Does -- as much as you know, what's the involvement of the State Department?

A. You know, I don't know for sure. I'd hesitate to surmise. But there's some involvement that I think has to do of at least making them be aware of it.

Q. I guess what we're trying to learn going forward is, obviously, U.S. labs are vetted, certified, and there's a standard of how U.S. labs operate. Are foreign labs held to the same standard as U.S. labs when they receive U.S. money, or are they the standards of the country in which they operate?

A. I am not certain. I have heard -- again, I think it was subsequent to -- of course, that was never brought up.

Q. Uh-huh.

A. When I was the director, no one ever asked me, you know, who determines, you know, what the standards of a foreign lab are. But so the answer to your question is I don't know, okay? <sup>12</sup>

In terms of the information that Dr. Fauci was receiving about EcoHealth, he was unaware that some of it was coming from Dr. Daszak himself:

Q. I guess, did you know that when you were getting these talking points, you were getting them straight from Dr. Daszak in EcoHealth?

A. I don't recall that I was. I know I got them from Greg, who was my information gatherer. I know he got them from a number of sources, but I don't specifically remember, well, this was from Daszak, and this was from Baric, and this was from -- I knew it was from multiple sources.

Q. Would it be -- and if you don't know, that's okay. Would it be common for Mr. Folkers to reach out beyond expertise at NIAID to get this kind of information?

A. Sometimes he would do that, he would call a grantee, but I'm not so sure he did. I think he spoke mostly with David. Yeah. Again, I can't tell from this whether Greg went out to an outside person. But, you know, he generally doesn't, but occasionally, he will.

Q. It would appear that Dr. Morens emailed Dr. Lipkin and Dr. Daszak and asked for information on the new coronavirus, and this is what Dr. Daszak sent back, and then it got transferred into an email to you.

A. It looks like this was David Morens to Greg, Greg to me. That's what it looks like. <sup>13</sup>

<sup>12</sup> Fauci TI, at 1 – 85-86.

<sup>13</sup> Fauci TI, at 1 – 205-206.

Given the level of communication and collusion the Select Subcommittee uncovered between Dr. David Morens, Senior Scientific Advisor to Dr. Fauci, and Dr. Daszak, it is concerning that information Dr. Fauci does recall about EcoHealth’s grant appeared to have come straight from Dr. Daszak.

Dr. Fauci spuriously testified he was not involved with communications regarding EcoHealth during NIH’s compliance investigation.

#### **IV. Dr. Fauci agreed with key Trump Administration travel restriction policies.**

The Trump Administration’s decision to restrict travel—first from China, and then from other countries—was extremely controversial at the time. Then Presidential candidate Joe Biden, while on the campaign trail in 2020, implied this decision was part of “Donald Trump’s record of hysterical xenophobia and fear mongering.”<sup>14</sup> However, Dr. Fauci testified that he unequivocally agreed with all of President Trump’s pandemic travel restrictions.

**Finding:** Dr. Fauci supported all of President Trump’s pandemic travel restrictions.

Q. Did you agree with President Trump's decision to restrict travel from China?

A. I did, and I said there were caveats to restrictions. I agreed with it, but I said we have to be careful because sometimes when you do restrictions they have negative consequences in that you don't have open access to help or even information. But fundamentally, I agreed at that time, since we had almost no infections that we knew of in our country, that at least a temporary restriction would be important.

Q. Did you also agree with the EU travel restriction?

A. I agreed with the suggestion that that be done, yes.

Q. Did you agree with the U.K. travel restriction?

A. Yes, I did.<sup>15</sup>

**Finding:** The Biden Administration White House Counsel’s Office prevented Dr. Fauci from answering questions about whether he recommended travel restrictions.

Q. Did you recommend instituting travel restrictions in response to the pandemic?

<sup>14</sup> Glenn Kessler, *Biden, Travel Bans and Accusations of Xenophobia: A Chronology*, THE WASH. POST (Jan. 28, 2021).

<sup>15</sup> Fauci TI, at 2 – 126.

WH Counsel. I'm going to step in here.<sup>16</sup>

V. **Dr. Fauci refused to admit that the government—including himself—oversold the power of COVID-19 vaccines.**

Throughout the pandemic, the American people were subjected to a barrage of serious misinformation about COVID-19 vaccines. However, the government itself was sometimes guilty of promulgating highly misleading or outright false information. For example, numerous officials asserted that COVID-19 vaccines were effective at preventing transmission of the virus.

**Finding:** Dr. Fauci refused to walk-back his 2021 statement that COVID-19 vaccines make you “a dead end to the virus.”

Q. You said the vaccine made you a dead end for the virus. Do you recall that statement?... It was May 2021. "When you get vaccinated, you not only protect your own health and that of the family, but also you contribute to the community health by preventing the spread of the virus throughout the community. In other words, you become a dead end to the virus."

A. Right. That was at a time when the data had shown, at least with the variance that we were talking about, that there was a significant degree of protection against infection as well as against serious disease. As I mentioned during one of the previous questions, as we develop different variants, particularly the Omicron variant, the protection against actual infection, which would protect you from getting infected... and essentially make it a dead end for you not a dead end for the community, but a dead end for you -- that was a correct statement. But that statement really, as we got more and more information about the waning of protection against infection – so, right now, I believe if you ask me – which you will – or anybody else, that, right now, vaccines do not necessarily protect very well at all against infection, but the ability to protect you from getting into the hospital is still pretty strong.<sup>17</sup>

**Finding:** Dr. Fauci defended President Biden’s misleading vaccine statements.

Dr. Fauci defended President Biden’s misleading statements at a 2021 CNN Town Hall that “[i]f you’re vaccinated, you’re not going to be hospitalized, you’re not going to be in the ICU unit and you’re not going to die.”<sup>18</sup> Specifically, Dr. Fauci indicated he believed President

<sup>16</sup> Fauci TI, at 2 – 125.

<sup>17</sup> Fauci TI, at 2 – 194-195.

<sup>18</sup> Daniel Dale & Tara Subramaniam, *Fact check: Biden makes false claims about COVID-19, auto prices and other subjects at CNN town hall*, CNN (July 22, 2021).

Biden actually meant “for the most part” rather than “100 percent.” However, that is not what President Biden stated.

Q. Along the same lines, in July of 2021, President Biden was giving a townhall, and he said, "If you're vaccinated, you're not going to be hospitalized, you're not going to be in the IC unit, and you're not going to die." To my knowledge, President Biden is not a public health expert, so I'm not going to -- he's not...he doesn't have the benefit of speaking in generalities like you just said.

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A. Yeah. But I believe, I believe sincerely, that the President meant "for the most part," as opposed to "100 percent."<sup>19</sup>

#### **VI. Dr. Fauci trusted his staff regarding the origins of COVID-19, despite an obvious conflict of interest.**

The Select Subcommittee established that Dr. Morens has a conflict of interest with regard to EcoHealth and Dr. Daszak. For example, Dr. Morens testified in his transcribed interview that Dr. Daszak was “one of [his] oldest and best friends.”<sup>18</sup>

Email correspondence produced to the Select Subcommittee, pursuant to a subpoena, indicates Dr. Morens communicated with Dr. Daszak very frequently, often about topics that were directly related to EcoHealth’s grant activity with NIAID. At times, Dr. Morens even shared internal NIAID deliberations and documents, provided forewarning about potentially damaging Freedom of Information Act (FOIA) productions, and provided Dr. Daszak with edits on a letter that was to be sent to NIH regarding EcoHealth’s grant.<sup>19</sup> On May 22, 2024, the Select Subcommittee published a memorandum detailing Dr. Morens’s inappropriate relationship with Dr. Daszak and released more than 150 pages of evidence establishing their collusion.<sup>20</sup>

**Finding:** Dr. Fauci claimed his staff had no conflicts of interest regarding COVID origins.

Dr. Fauci testified that his staff had no conflicts of interest regarding the investigation of COVID-19 origins:

Q. ...I was wondering if you had thoughts on whether Dr. Daszak should have filed competing interest statements when he was weighing in on these issues, whether through the National Academies or other venues.

A. You know, I hesitate to speculate about what someone else should do. The only people that I am involved with is my own staff, who

<sup>19</sup> Fauci TI, at 2 – 196.

we've mentioned many times in this discussion, who don't have a conflict of interest.<sup>20</sup>

It seems highly unlikely that Dr. Morens worked as Dr. Fauci's Senior Advisor for more than 20 years without Dr. Fauci being aware of his close relationship with Dr. Daszak. For example, in one email Dr. Morens wrote that Dr. Fauci "often" asked him how Peter [Daszak] was doing.<sup>21</sup>

On Tuesday and again today I had face to face meetings with Tony to discuss science issues. He seems much less alarmed and even a bit philosophical about the whole thing. He asked how Peter was doing, as he often does, and seemed to commiserate with him to a degree.

It therefore appears that Dr. Fauci was at least aware that Dr. Morens and Dr. Daszak were in frequent contact. Pursuant to that apparent fact, Dr. Fauci's testimony that his staff had no conflicts of interest is misleading.

## **VII. Dr. Fauci played semantics with the definition of Gain-of-Function research.**

Rather than admitting that NIAID funded GoF research, under the commonly understood definition (as the Deputy Director of the NIH Dr. Lawrence Tabak disclosed in his transcribed interview and subsequent hearing),<sup>22</sup> Dr. Fauci simply refused to make this distinction.

At a May 22, 2021 Senate Health, Education, Labor, and Pensions Committee (HELP) hearing, Senator Rand Paul asked Dr. Fauci a line of questioning regarding U.S. funding of GoF research at the WIV. In response, Dr. Fauci unequivocally and unambiguously stated, "the NIH and NIAID – categorically has not funded gain-of-function research to be conducted in the Wuhan Institute of Virology."<sup>23</sup>

In his transcribed interview, the Select Subcommittee asked Dr. Fauci to clarify his statement to Senator Paul. Dr. Fauci again expressed he was working under the "operative definition" of GoF.<sup>24</sup>

A. So, when I -- to repeat, when I'm asked is something gain of function, I'm referring to the operative definition of gain of function according to the framework of the 3PCO...That's my definition.

<sup>20</sup> Fauci TI, at 2 – 111.

<sup>21</sup> E-mail from David Morens, M.D., Senior Advisor, Nat'l Inst. of Allergy & Infectious Diseases, Nat'l Insts. of Health, to Gerald Keusch, M.D., Professor, Boston University (Nov. 18, 2021).

<sup>22</sup> Transcribed Interview of Lawrence Tabak, D.D.S., Ph.D., Principal Dep. Dir., Nat'l Insts. of Health, at 29 (Jan. 5, 2024).

<sup>23</sup> An Update from Federal Officials to Combat COVID-19: Hearing Before Sen. Comm. On Health, Education, Labor & Pensions, 117<sup>th</sup> Cong. (May 11, 2021) (statement of Dr. Anthony Fauci, Dir., Nat'l Inst. Of Allergy and Infectious Diseases, Nat'l Insts. Of Health); Fauci TI, at 1 – 47-48.

<sup>24</sup> Fauci TI, at 1 – 156.

That is the regulatory operational definition. And as we were talking about before, other people use the word "gain of function" this, "gain of function"—that, and everybody's got their own interpretation of it. But when you're deciding whether a grant should be funded, this is the operational definition. And when I was asked anywhere -- by the Congress, by the Senate, by Senator Paul -- this is what I was referring to.<sup>25</sup>

The lack of clarification in the Senate HELP hearing was blatantly misleading. These kinds of ambiguous answers assume the American people – of whom Dr. Fauci reports to – could read his mind and knew he was talking about the highly technical and specific GoF definition from the 2017 Framework for Guiding Funding Decisions About Proposed Pandemic Pathogens (P3CO framework).<sup>26</sup> His inability to properly define the definition of GoF does not immunize NIAID or NIH from research that was actually conducted.

**Finding:** Dr. Fauci intentionally avoided stating that NIAID funded GoF research on coronaviruses in Wuhan, China, by asserting that GoF is a nuanced term.

A. Right. I was communicating to Senator Paul when I used the word "gain of function" my-- my definition of "gain of function" is the operative definition of "gain of function," which we have just discussed now under the P3CO. So, when I said to Senator Paul that we have not funded from EcoHealth with a sub award to Wuhan gain of function research, I was referring to the operative definition under the P3CO (emphasis added).<sup>27</sup>

Dr. Fauci later stated, again:

A. So, when I -- to repeat, when I'm asked is something gain-of-function, I'm referring to the operative definition of gain-of-function according to the framework of the P3CO... That's my definition. That is the regulatory operational definition. And as we were talking about before, other people use the word "gain-of-function"-this, "gain-of-function"-that, and everybody's got their own interpretation of it. But when you're deciding whether a grant should be funded, this is the operational definition (emphasis added).<sup>28</sup>

The Select Subcommittee attempted to distinguish between various federal frameworks and the broad, general understanding of GoF, but Dr. Fauci refused to confirm a general understanding of the term:

<sup>25</sup> *Id.*

<sup>26</sup> FRAMEWORK FOR GUIDING FUNDING DECISIONS ABOUT PROPOSED RESEARCH INVOLVING ENHANCED POTENTIAL PANDEMIC PATHOGENS. U.S. DEP'T OF HEALTH & HUMAN SERVS. (2017).

<sup>27</sup> Fauci TI, at 1 – 58.

<sup>28</sup> Fauci TI, at 1 – 156.

Q. The last thing I'll say is we interviewed Dr. Tabak on Friday -- it's been a long weekend -- and we asked him a similar question. "What's described in the EcoHealth year 5 progress report would fit the definition -- the broad definition of gain-of-function research?" And he answered, "The generic, broad description of what gain-of-function is, yes." Would you agree with Dr. Tabak?

A. You know, again, we're going in circles, because it's going to get the same 1 confusion that the chairman was just talking about.

Q. I'm --

A. Because then, if I say yes, then, "Ah, yes, he says it was gain-of-function." It is not gain-of-function of concern that is associated with the regulatory operative definition of gain-of-function.

Q. No. And I'm entirely willing to stipulate that and stipulate that it didn't need to go through the P3CO and it didn't meet the definition of ePPP. And I'll end on this, and if it's the same answer it's the same answer. But we've asked Dr. Auchincloss this question. We've asked Dr. Tabak this question. Both have said that it meets the definition, the broad definition of gain-of-function research. I'm not trying to catch you in a trap. I'm not trying to catch you --

A. But the thing is I have been living a life over the last few years of getting total distortion of things that I've said and done, and you know that. So if you want me to --

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Q. And I agree that that is what you meant. I'm not trying to go against that. I'm just -- when people read things in black and white and words are said, it's hard to distinguish sometimes.

A. Yes.<sup>29</sup>

Given Dr. Tabak's recent testimony, NIAID did fund GoF, as generally and broadly understood, at the WIV before the COVID-19 outbreak. Dr. Fauci's unilateral, repeated, and unequivocal denunciation of GoF research funding is employing semantics to avoid accountability.

Apparently, Dr. Fauci presumed the American people would intuitively understand when he said "GoF research," what he really meant was his own "operative definition." It is entirely

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<sup>29</sup> Fauci TI, at 1 – 225-256.

unclear why Dr. Fauci was not able to provide the nuanced, accurate, definition Dr. Tabak provided to the Select Subcommittee. As it is, Dr. Fauci's testimony before the Select Subcommittee and Senate were misleading at best and dishonest at worst.

### **VIII. The NIH grant process is entirely built on a system of inherent trust.**

The NIAID grant process is an incredibly convoluted, yet immensely important, operation that involves countless moving parts. There are major systematic weaknesses that could allow for a national security issue to arise. One such issue is that when a grant is awarded, the principal investigator is entirely responsible for the work, conduct, and communication of any subgrantees, including in adversarial nations, with very little oversight from NIAID.

The utilization of foreign laboratories in high-level research is common practice in the scientific community. While it is required that grant applications include details of foreign laboratories and foreign scientists if participating in research, there is little NIAID oversight into these international entities. Unlike U.S. labs, foreign counterparts do not appear to be vetted, certified, or operate under the same standards as U.S. researchers or laboratories. In his testimony, Dr. Fauci was unaware of how, or even if, NIAID reviews the standards of these labs.

Q. I guess what -- and, again, it might be in the divisions and in the council that this happens -- but trying to get an understanding of, like, if there's -- how individuals and labs are getting vetted. If there's an Iranian nuclear lab listed on a grant -- is NIAID just going to check the box and move ahead?

A. You know, I, honestly ... I -- that's not what I get involved with.<sup>30</sup>

Q. Okay. So to your knowledge, NIAID wouldn't kind of independently verify the biosafety of a foreign lab.

A. Again, I'd have to say I'm not sure. To my knowledge, I wouldn't be able to make a statement that I would be confident it would be.<sup>31</sup>

This work could potentially expose the U.S. to issues of grave national security, yet the highest level of leadership are not involved in the oversight of foreign labs, and operate entirely on a system of inherent trust. These taxpayer funded grants allow for highly consequential scientific research to be conducted, even in known adversarial nations by known adversarial scientists. A collaborative effort between NIAID and the intelligence community is necessary to ensure that the millions of U.S. dollars funneled to foreign labs through subgrant awards are spent to further U.S. national interests. A partnership with the intelligence community would also ensure that American scientific intellectual property and technology are properly safeguarded. It is concerning Dr. Fauci testified he was aware that no national security review is conducted during the grant application process.

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<sup>30</sup> Fauci TI, at 1 – 88.

<sup>31</sup> Fauci TI, at 1 – 87.

Q. Do you know if NIAID grants go through any type of national security review as part of the process?

A. National security review?

Q. So, like, through the National Security Council or –

A. No.

Q. -- or anyone in the [intelligence community] --

A. Not to my knowledge.<sup>32</sup>

**Finding:** NIAID’s inherent trust in grantees and the overall grant system leaves significant room for adversaries to exploit.

The initial grant application process and subsequent internal oversight procedure is riddled with flaws. Simply put, there is not enough discussion surrounding the application operation. If a grant does not need to go to the Advisory Council for additional approval, which consists of a second level of review that per the NIAID website is described as “a smaller hurdle,”<sup>33</sup> it is approved en bloc and then sent to the Director where they are again blindly approved.

Q. Who gives the final approval?

A. You know, technically, I sign off on each council, but I don't see the grants and what they are. I never look at what grants are there. It's just somebody at the end of the council where they're all finished and they go, "Here," and you sign it.<sup>34</sup>

Q. Right. So I'm assuming that you had to rely on Dr. Erbeling's division to sort of get you the relevant information for the -- on the grant, among maybe other sources.

A. Yeah. I mean, I had no direct access into the grants. This was always, as was said in the questioning before, this was handled very much at the programmatic level.<sup>35</sup>

The scientific research conducted by these grant awards is significant and consequential to the U.S., yet as it currently stands there is room for adversaries to exploit U.S. national

<sup>32</sup> Fauci TI, at 1 – 89.

<sup>33</sup> National Institute of Allergy and Infectious Disease, Second-Level Review – Advisory Council (last accessed May 30, 2024).

<sup>34</sup> Fauci TI, at 1 – 83.

<sup>35</sup> Fauci TI, at 1 – 75.

interests. There needs to be more accountability for awarded grants, and it is not irrational to hope the Director would be informed of final approval.

As the head of NIAID, Dr. Fauci must assume responsibility for the grants they fund. If the buck stops with him, one would hope he has at least has some level of understanding of the billions of taxpayer dollars the NIAID is awarding. It is deeply concerning that Dr. Fauci is entirely unaware of the grants he is personally approving. The lack of high-level checks and balances of NIAID grants is alarming.