



**U.S. Department of Justice**

*United States Attorney  
Southern District of New York*

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*86 Chambers Street  
New York, New York 10007*

May 23, 2025

**BY ECF**

The Honorable Mary Kay Vyskocil  
United States District Judge  
500 Pearl Street, Room 2230  
New York, New York 10007

Re: *American Association of University Professors, et al. v. United States  
Department of Justice, et al.*, 25 Civ. 2429 (MKV)

Dear Judge Vyskocil:

This Office represents the defendants (the “Government”) in the above-captioned matter. We write respectfully to clarify certain facts in the Government’s Opposition to Plaintiffs’ Motion for a Preliminary Injunction, ECF No. 91, and the accompanying declaration from Jon Lorsch, ECF No. 92 (“Lorsch Declaration”). These points relate to the factual background in this matter, but have no impact on the legal arguments made in the Government’s brief.

Specifically, first, the Lorsch Declaration stated that, on March 10, 2025, the National Institutes of Health (“NIH”) sent Columbia University correspondence notifying the University that 396 grants had been terminated. (Lorsch Declaration ¶ 17.) Since the declaration was filed, it has come to the attention of Dr. Lorsch and this Office that, due to substantively duplicative entries on the list sent to Columbia, the March 10 letter related to approximately 233 grants (not 396). Second, there was another, materially similar termination letter that was inadvertently not referenced in the Lorsch Declaration and was sent to Columbia on March 14, 2025, regarding an additional set of less than 30 grants. Third, paragraph 17 of the Lorsch Declaration and page 3 of the Government’s brief state that the March 10 letter informed the University that the grants had been terminated; in fact, the letter stated that the grants “will be” terminated, and as referenced in paragraph 19 of the Lorsch Declaration, the terminations had to be separately effectuated through issuance of a revised Notice of Award for each grant. Fourth, and finally, paragraph 19 of the Lorsch Declaration provided the number of grants for which NIH had issued revised Notices of Award and the number of reinstated grants, and it has come to Dr. Lorsch and this Office’s attention that these numbers also require revision.

Accordingly, the Government respectfully submits the attached Amended Declaration of Jon Lorsch, which reflects corrected information on the above points and makes certain other revisions to incorporate this information, reflect updated information as of the Amended Declaration signature date, and for clarity. As noted above, these changes have no impact on the Government’s legal arguments.

The Honorable Mary Kay Vyskocil  
May 23, 2025  
Page 2

We thank the Court for its attention to this matter.

Respectfully submitted,

JAY CLAYTON  
United States Attorney for the  
Southern District of New York

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cc: Counsel of Record (by ECF)

**UNITED STATES DISTRICT COURT  
FOR THE SOUTHERN DISTRICT OF NEW YORK**

AMERICAN ASSOCIATION OF  
UNIVERSITY PROFESSORS., et al.

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Plaintiffs

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Civil Case No. 25-cv-02429 (MKV)

v.

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U.S. DEPARTMENT OF JUSTICE, et al.

\*

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Defendants

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**AMENDED DECLARATION OF JON LORSCH, Ph.D.**

I, Jon Lorsch, Ph.D., hereby declare that my testimony below is true and correct to the best of my knowledge and belief and is given under penalty of perjury, pursuant to 28 U.S.C. § 1746:

1. I am the Acting Deputy Director for Extramural Research at the National Institutes of Health (NIH), an operating division of the U.S. Department of Health and Human Services (HHS). I have held this position since April 7, 2025.

2. In addition to my current role, I am the Director of the National Institute of General Medical Sciences (NIGMS), a position I have held since 2013, where I oversee NIGMS's mission-related activities, supporting basic research that increases understanding of biological processes and lays the foundation for advances in disease diagnosis, treatment, and prevention. I am also a Senior Investigator in the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD), a position I have held since 2014.

3. As Acting Deputy Director for Extramural Research, I am the principal scientific

advisor to the NIH Director on all matters relating to the substance, quality, and effectiveness of the NIH extramural research program. I am responsible for overseeing the Office of Extramural Research under the Office of the NIH Director. The Office of Extramural Research “provides the corporate framework for the NIH research administration and works to ensure the scientific integrity, public accountability, and effective stewardship of the NIH research grant portfolio.” Office of the Director, NIH, <https://www.nih.gov/about-nih/what-we-do/nih-almanac/office-director-nih> (last visited April 22, 2025).

4. I make this declaration based on personal knowledge acquired by me in the course of performing my official duties, information contained in the records of the relevant HHS components, and information supplied to me by current employees of the relevant HHS components.

5. The NIH funds biomedical and behavioral research. Its mission is “to seek fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to enhance health, lengthen life, and reduce illness and disability.” *See* <https://www.nih.gov/about-nih/what-we-do/mission-goals> (last accessed April 28, 2025). As one of eight agencies of the U.S. Public Health Service, 42 U.S.C. 281(b), the NIH is an operating division of HHS. The NIH’s authority to conduct and sponsor research and set research priorities arises from the Public Health Services Act (PHSA), 42 U.S.C. § 241, et seq.

6. Section 301 of the PHSA, 42 U.S.C. § 241, sets forth the general authority of the Secretary of Health and Human Services to conduct and support “research, investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases and impairments of man. . . .” This authority has been

delegated to the Director of the NIH, and further delegated to the Directors of each institute within the NIH.

7. Section 402 of the PHSA, 42 U.S.C. § 282, is the foundational authority of the NIH Director which includes authority to conduct “priority-setting reviews,” “assess research priorities,” and “ensure that the resources of the [NIH] are sufficiently allocated . . . .” *See, e.g.*, Section 402(b)(4),(5), and (6). This is consistent with the NIH’s inherent authority to determine funding priorities in awarding discretionary grants within a finite amount of appropriations.

8. The NIH exercises broad discretion in awarding and administering grants. The Secretary awards grants “to those applicants whose approved projects will in the Secretary’s judgment best promote the purposes of the statute authorizing the grant and the regulations of this part.” 42 CFR § 52(a). The applicants for and recipients of NIH grant awards are institutions, which designate a principal investigator to lead the scientific and technical direction of research projects funded under the grant. 2 CFR § 200.1, 42 CFR § 52.2.

9. Consistent with the discretionary nature of NIH grants, and the finite amount of the NIH’s appropriations, the process of selecting and awarding grants is highly competitive. Due to finite resources, the NIH is only able to fund approximately 20% of grant applications. *See* <https://report.nih.gov/nihdatabook/category/10> (last accessed April 28, 2025). Accordingly, one of the NIH’s core functions is to serve as an effective steward of the extramural research portfolio by ensuring that the limited available funding is directed to only the most promising science consistent with agency priorities.

10. Through the NIH grant award, the NIH agrees to support the recipient with a specified level of funding for a specific period. The award document, in turn requires recipients

of NIH grant funds to comply with all Federal statutes, regulations, policies, and terms and conditions stated in the Notice of Award (NOA). The NOA is the governing legal document.

11. The NIH Grants Policy Statement (GPS) is a term and condition applicable to all NIH grant awards. Since 2021, the NIH GPS has stated that its grant terms and conditions, including terms and conditions in 2 CFR Part 200, are incorporated into NIH NOAs. A copy of the relevant sections of the current NIH GPS are attached as Exhibit A. Recipients accept the terms of the NOAs when they draw down funds from the Payment Management System (PMS). One term and condition of the NOA is therefore 2 CFR § 200.340, which allows the Government to terminate a grant “pursuant to the terms and conditions of the Federal award, including, to the extent authorized by law, if an award no longer effectuates the program goals or agency priorities.” 2 CFR § 200.340; *see also* GPS 8.5.2 (stating “NIH may also terminate the grant in whole or in part as outlined in 2 CFR Part 200.340”).

12. As a grantee, Columbia University was subject to the above laws, regulations, policies, and terms and conditions.

13. On January 29, 2025, President Trump issued Executive Order 14188, entitled “Additional Measures to Combat Anti-Semitism,” which instructed agencies to combat antisemitism vigorously. In February 2025, a multi-agency task force was created for purposes of combatting antisemitism.

14. On February 10, 2025, Dorothy A. Fink, M.D., HHS Acting Secretary, issued a Secretarial Directive on DEI-Related Funding (Secretarial Directive). Exhibit B. This Secretarial Directive was issued pursuant to HHS authorities “to ensure that taxpayer dollars are used to advance the best interests of the government . . . [which] includes avoiding expenditure of federal funds on programs . . . that discriminate on the basis of race, color, religion, sex,

national origin, or another protected characteristic.” *Id.* The Secretarial Directive directed the “review of. . . grants to determine whether those . . . grants are in the best interest of the government and consistent with current policy priorities.” *Id.*

15. Consistent with the Secretarial Directive, on February 21, 2025, the Acting Director for the NIH issued a Directive on NIH Priorities, Restoring Scientific Integrity and Protecting the Public Investment in NIH Awards (“Directive”). Exhibit C. This Directive expressed that the NIH is “committed to promoting only the highest level of scientific integrity, public accountability, and social responsibility in the programs it funds.” *Id.* The Directive stated, “[g]rants, contracts, cooperative agreements, and other transactions deemed inconsistent with the NIH’s mission may, where permitted by applicable law, be subject to funding restrictions, terminated or partially terminated, paused, and/or not continued or renewed, in compliance with all procedural requirements.” *Id.*

16. On March 7, 2025, HHS placed a hard funds restriction on all Columbia awards HHS-wide. A “hard funds restriction” means that if Columbia tried to draw down funds from the PMS for expenses incurred after the restriction was put in place, they would not be able to do so without further approval. The payment restriction is an operational mechanism and does not terminate or otherwise cancel grant awards.

17. On March 10, 2025, the NIH Director of the Office of Policy for Extramural Research Administration (OPERA) sent Columbia University correspondence notifying the University that approximately 233 grants would be terminated for nonalignment with agency priorities of funding safe research environments. The NIH sent a second letter on March 14, 2025, regarding an additional 29 grants. The grants in the letters were identified as inconsistent with NIH policy and requirements, as outlined in the NIH GPS and 2 CFR § 200.340(a)(4), which provides for

termination “if any award no longer effectuates the program goals or agency priorities.” A copy of the March 10 correspondence to Columbia University is attached as Exhibit D, and a copy of the March 14 correspondence is attached as Exhibit E. Each letter stated that the identified awards no longer effectuated agency priorities and failed to satisfy NIH stewardship obligations and criteria to ensure taxpayer funds are used in ways “that benefit the American people and improve their quality of life.” *Id.* The letters further stated that it is the NIH’s policy that funded institutions should foster “safe, equal, and healthy working and learning conditions conducive to high-quality research and free inquiry.” *Id.* Recent events, including antisemitism and actions concerning the safety and wellbeing of Jewish students taking place at Columbia University and Columbia University’s inaction, contradict that policy. *Id.* The letters also indicated that the NIH considered alternatives to terminating the funding but concluded that there were no viable alternatives. *See id.* at. 2. The NIH did not terminate the grants pursuant to Title VI of the Civil Rights Act.

18. The NIH is the only division or sub-agency within HHS to terminate grant awards with Columbia University due to antisemitic conduct on Columbia’s campus.

19. To effectuate the March 10, 2025 and March 14, 2025 termination letters, the NIH began the process of issuing a revised NOA for each grant. Of the grants listed on the spreadsheets attached to the NIH’s March 10 and March 14 letters, the NIH issued revised NOAs for approximately 148 before pausing that process pending negotiations with Columbia University about restoring the funding. On April 11, 2025, the NIH notified Columbia University that a number of the grants referenced in the March 10 and March 14 letters would be reinstated because of progress made in the negotiations. Seven of these had already had termination NOAs



sent out; the NIH sent further revised NOAs reinstating those seven. Negotiations regarding restoring the grant funding are ongoing.

20. The NIH has established a first-level grant appeal procedure for Columbia University and its affiliate institutional grant recipients to challenge these terminations. As reflected in the March 10, 2025 and March 14, 2025 letters, NIH policy provides for an administrative appeal to object and provide information and documentation challenging the terminations. Though the letters stated that appeals had to be submitted to the NIH as directed “no later than 30 days after” the letters were received, *id.*, the deadline for appeals submission has been extended until June 23, 2025, with the potential for further extensions.

21. Additionally, on or after March 7, 2025, HHS components, including NIH, terminated contracts with Columbia for convenience. A copy of a sample termination notice is attached as Exhibit F.

I declare under penalty of perjury that the foregoing is true and correct.

Executed this 23rd day of May, 2025.

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JON LORSCH

# **EXHIBIT A**

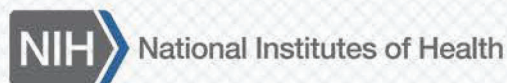


# NIH GRANTS POLICY STATEMENT

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US DEPARTMENT OF HEALTH AND HUMAN SERVICES

NATIONAL INSTITUTES OF HEALTH



APRIL 2024

## PART II: TERMS AND CONDITIONS OF NIH GRANT AWARDS

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### Subpart A: General

## 3 OVERVIEW OF TERMS AND CONDITIONS

Part II includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards. Subpart A (IIA) includes those terms and conditions that apply, in general, to NIH awards. Subpart B (IIB) either expands on IIA coverage or specifies additional or alternate terms and conditions for particular types of awards, recipients, or activities.

These terms and conditions are not intended to be all-inclusive. All awards or a specified subset of awards also may be subject to additional requirements, such as those included in executive orders and appropriations acts.

[NIH recipients are responsible for complying with all requirements of the Federal award.](#) NIH grants awards are based on the application submitted to, and approved by, the NIH and are subject to the terms and conditions incorporated either directly or by reference in the following:

- The grant program legislation and program regulation cited in the NoA.
- The NIH Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.
- Conditions on activities and expenditure of funds in other statutory requirements, such as those included in [appropriations acts](#). This also includes any recent legislation.
- 2 CFR Part 200.
- The NoA including all terms and conditions cited on the document or attachments.

Notice of requirements not specified in the NIHGPS generally will be provided in the NoA, but such notice is not required for the award to be subject to the requirements of pertinent statutes and regulations. An individual award also may contain award-specific terms and conditions. For example, the GMO may include terms or conditions necessary to address concerns about an applicant's management systems.

Program and administrative policies and the terms and conditions of individual awards are intended to supplement, rather than substitute for, governing statutory and regulatory requirements. Thus, the requirements of the NIHGPS apply in addition to governing statutory and regulatory requirements not cited herein, and award-specific terms apply in addition to the requirements of the NIHGPS.

This NIHGPS is an aid to the interpretation of statutory and regulatory requirements. These terms and conditions are intended to be compliant with governing statutes and the requirements of 2 CFR Part 200, as modified by previously approved waivers and deviations. However, in the case of a conflict, the statutes and regulations govern.

If there is a perceived conflict between or among these three categories of requirements—statutory and regulatory requirements, the terms and conditions in the NIHGPS, and award-specific terms and conditions—or if the recipient has other questions concerning award terms and conditions, the recipient

should request written clarification from the GMO. This may be done at any time; however, if the inclusion of the term or condition would cause the recipient not to accept the award or to be unable to comply, the question should be raised before funds are requested from the HHS payment system. By drawing funds from the HHS payment system, the recipient agrees to the terms and conditions of the award.

### **3.1 FEDERALWIDE STANDARD TERMS AND CONDITIONS FOR RESEARCH GRANTS**

In order to create greater consistency in the administration of Federal research awards, all Federal research agencies now utilize a standard core set of administrative terms and conditions on research and research-related awards that are subject to 2 CFR Part 200, to the extent practicable. The core set of administrative requirements for participating Federal research agencies and other pertinent documents are posted on the [National Science Foundation's web site](#). Recipients are encouraged to review the companion documents which include a Prior Approval Matrix, National Policy Requirement Matrix, Subaward Requirement Matrix, and Agency-Specific Requirements. NIH implementation of these Federalwide research terms and conditions is also known as the "NIH Standard Terms of Award".

See [Administrative Requirements—Changes in Project and Budget—NIH Standard Terms of Award](#) for more details.



before taking action unless public health or welfare concerns require immediate action. However, even if a recipient is taking corrective action, NIH may take proactive actions to protect the Federal government's interests, including placing specific conditions on awards or precluding the recipient from obtaining future awards for a specified period, or may take action designed to prevent future non-compliance, such as closer monitoring.

### **8.5.1 Specific Award Conditions: Modification of the Terms of Award**

During grant performance, the GMO may include specific award conditions in the grant award to require correction of identified financial or administrative deficiencies as a means of protecting NIH's interests and effecting positive change in a recipient's performance or compliance. When specific conditions are imposed, the GMO will notify the recipient in writing of the nature of the conditions, the reason why they are being imposed, the type of corrective action needed, the time allowed for completing corrective actions, and the method for requesting reconsideration of the conditions. See 42 CFR Part 52.9 and 2 CFR Part 200.339.

The NIH awarding IC may withdraw approval of the PD/PI or other senior/key personnel specifically referenced in the NoA if there is a reasonable basis to conclude that the PD/PI and other such named senior/key personnel are no longer qualified or competent to perform the research objectives. In that case, the awarding IC may request that the recipient designate a new PD/PI or other named senior/key personnel.

Generally, the decision to modify the terms of an award (e.g., by imposing specific award conditions) is discretionary on the part of the NIH awarding IC and is not appealable.

### **8.5.2 Remedies for Noncompliance or Enforcement Actions: Suspension, Termination, and Withholding of Support**

If a recipient has failed to comply with the terms and conditions of award, NIH may take one or more enforcement actions which include disallowing costs, withholding of further awards, or wholly or partly suspending the grant, pending corrective action. NIH may also terminate the grant in whole or in part as outlined in 2 CFR Part 200.340. The regulatory procedures that pertain to suspension and termination are specified in 2 CFR Parts 200.340 through 200.343.

- a. NIH or the pass-through entity must provide the non-Federal entity a notice of termination
- b. If the award is terminated for the non-Federal entity's material failure to comply with the Federal statutes, regulations, or terms and conditions of the Federal award, the notification must state that:
  1. The termination decision will be reported to the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS);
  2. The information will be available in the OMB-designated integrity and performance system for a period of five years from the date of the termination, then archived;
  3. Awarding agencies that consider making a Federal award to the non-Federal entity during that five year period must consider that information in judging whether the non-Federal entity is qualified to receive the Federal award, when the Federal share of the Federal award is expected to exceed the simplified acquisition threshold over the period of performance;
  4. The non-Federal entity may comment on any information the OMB-designated integrity and performance system contains about the non-Federal entity for future consideration by HHS awarding agencies. The non-Federal entity may submit comments to the recipient integrity and performance portal accessible through CPARS.
  5. Federal awarding agencies will consider the non-Federal entity comments when determining whether the non-Federal entity is qualified for a future Federal award.
- c. Upon termination of an award, NIH must provide the information required under FFATA to the Federal web site established to fulfill the requirements of FFATA and update or notify any other relevant government-wide systems or entities of any indications of poor performance as required by 41 U.S.C. 417b and 31 U.S.C. 3321. See also the requirements for Suspension and Debarment at 2 CFR Part 180.

NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision. However, NIH may decide to terminate the grant if the recipient does not take appropriate corrective action during the period of suspension. NIH may immediately terminate a grant when necessary, such as to protect the public health and welfare from the effects of a serious deficiency. Termination may be appealed under NIH and HHS grant appeals procedures (see [Administrative Requirements—Grant Appeals Procedures](#)).

A grant also may be terminated, partially or totally, by the recipient or by NIH with the consent of the recipient. If the recipient decides to terminate a portion of a grant, NIH may determine that the remaining portion of the grant will not accomplish the purposes for which the grant was originally awarded. In any such case, NIH will advise the recipient of the possibility of termination of the entire grant and allow the recipient to withdraw its termination request. If the recipient does not withdraw its request for partial termination, NIH may initiate procedures to terminate the entire grant.

See [Cost Considerations—Allowability of Costs/Activities—Selected Items of Cost](#) for the allowability of termination costs. Allowability of these costs does not vary whether a grant is terminated by NIH, terminated at the request of the recipient, or terminated by mutual agreement.

Withholding of support is a decision not to make a non-competing continuation award within the current competitive segment. Support may be withheld for one or more of the following reasons:

- Adequate Federal funds are not available to support the project.
- A recipient failed to show satisfactory progress in achieving the objectives of the project.
- A recipient failed to meet the terms and conditions of a previous award.

- For whatever reason, continued funding would not be in the best interests of the Federal government.

The recipient may appeal NIH's determination to deny (withhold) a non-competing continuation award because the recipient failed to comply with the terms and conditions of a previous award.

### 8.5.3 Other Enforcement Actions

Depending on the nature of the deficiency, NIH may use other means of promoting recipient compliance. Other options available to NIH include, but are not limited to conversion from an advance payment method to a reimbursement method or disallow (deny) all or part of the cost of the activity or action not in compliance. Other actions may include suspension or debarment of an organization or individual under Government-wide Debarment and Suspension rules provided at 45 CFR Part 76, and other available legal remedies, such as civil action. Suspension under 45 CFR Part 76, implementing E.O.s 12549 and 12689, "Debarment and Suspension," is a separate action from the "suspension" of an award as a post-award remedy, as described in [Suspension, Termination, and Withholding of Support](#) above. The subject of debarment and suspension as an eligibility criterion is addressed in [Completing the Pre-Award Process—Determining Eligibility of Individuals](#) and [Public Policy Requirements and Objectives—Debarment and Suspension](#).

### 8.5.4 Recovery of Funds

NIH may identify and administratively recover funds paid to a recipient at any time during the life cycle of a grant. Debts may result from cost disallowances, unobligated balances, unpaid share of any required matching or cost sharing, funds in the recipient's account that exceed the final amount determined to be allowable, or other circumstances. NIH guidance on the repayment of grant funds that are unrelated to audit findings can be found on the [OER Web site](#).

### 8.5.5 Debt Collection

The debt collection process is governed by the Federal Claims Collection Act, as amended (Public Law [P.L.] 89-508, 80 Stat. 308, July 19, 1966); the Federal Debt Collection Act of 1982 (P.L. 97-365, 96 Stat. 1749, October 25, 1982); the Debt Collection Improvement Act (P. L. 104-134, 110 Stat. 1321, April 26, 1996); and, the Federal Claims Collection Standards (31 CFR Parts 900-904), which are implemented for HHS in 45 CFR 30. NIH is required to collect debts due to the Federal government and, except where prohibited by law, to charge interest on all delinquent debts owed to NIH by recipients.

When NIH determines the existence of a debt under a grant, written debt notification will be provided to the recipient. Unless otherwise specified in law, regulation, or the terms and conditions of the award, debts are considered delinquent if they are not paid within 30 days from the date the debt notification is mailed to the recipient. Delinquent debts are subject to the assessment of interest, administrative cost charges, and penalties. The interest on delinquent debts accrues on the amount due beginning on the date the debt notification is mailed to the recipient.

If a recipient appeals an adverse monetary determination under 42 CFR Part 50, Subpart D, or 45 CFR Part 16, interest will accrue but assessment will be deferred pending a final decision on the appeal. If the appeal is not successful, interest will be charged beginning with the date the debt notification was mailed to the recipient, not the date of the appeal decision. Interest charges will be computed using the prevailing rate in effect on the date the debt notification is mailed, as specified by the Department of the Treasury and 45 CFR Part 30.13(a)(2).



# **EXHIBIT B**

**SECRETARIAL DIRECTIVE ON DEI-RELATED FUNDING**

February 10, 2025

The Department of Health and Human Services has an obligation to ensure that taxpayer dollars are used to advance the best interests of the government. This includes avoiding the expenditure of federal funds on programs, or with contractors or vendors, that promote or take part in diversity, equity, and inclusion (“DEI”) initiatives or any other initiatives that discriminate on the basis of race, color, religion, sex, national origin, or another protected characteristic. Contracts and grants that support DEI and similar discriminatory programs can violate Federal civil rights law and are inconsistent with the Department’s policy of improving the health and well-being of all Americans.

These contracts and grants can cause serious programmatic failures and yet it is currently impossible to access sufficient information from a centralized source within the Department of Health and Human Services to assess them. Specifically, there is no one method to determine whether payments the agency is making to contractors, vendors, and grantees for functions related to DEI and similar programs are contributing to the serious problems and acute harms DEI initiatives may pose to the Department’s compliance with Federal civil rights law as well as the Department’s policy of improving the health and well-being of all Americans. It is also currently impossible to assess whether payments the Department is making are free from fraud, abuse, and duplication, as well as to assess whether current contractual arrangements, vendor agreements, and grant awards related to these functions are in the best interests of the United States. *See* FAR 12.403(b), 49.101; 45 C.F.R. § 75.371-372. Finally, it is also impossible to determine with current systems whether current contracts and grant awards are tailored to ameliorate these specific problems and the broader problem of DEI and similar programs rather than exacerbate them. The Department has an obligation to ensure that no taxpayer dollars are lost to abuse or expended on anything other than advancing the best interests of the nation.

For these reasons, pursuant to, among other authorities, FAR 12.403(b) and 49.101 and 45 C.F.R. § 75.371- 372, the Secretary of Health and Human Services hereby DIRECTS as follows:

**Agency personnel shall briefly pause all payments made to contractors, vendors, and grantees related to DEI and similar programs for internal review for payment integrity. Such review shall include but not be limited to a review for fraud, waste, abuse, and a review of the overall contracts and grants to determine whether those contracts or grants are in the best interest of the government and consistent with current policy priorities. In addition, if after review the Department has determined that a contract is inconsistent with Department priorities and no longer in the interest of the government, such contracts may be terminated pursuant to the Department’s authority to terminate for convenience contracts that are not “in the best interests of the Government,” see FAR 49.101(b); 12.403(b). Furthermore, grants may be terminated in accordance with federal law.**

This Directive shall be implemented through the Department's contracts and payment management systems by personnel with responsibility for such systems who shall, in doing so, comply with all notice and procedural requirements in each affected award, agreement, or other instrument. Whenever a DEI or similar contract or grant is paused for review, Department personnel shall immediately send such payment to Scott Rowell, Deputy Chief of Staff for Operations, for prompt review to determine whether or not the payment is appropriate and should be made. Payments on paused contracts shall remain paused and already terminated contracts shall remain terminated pending completion of that review to the maximum extent permitted by law and all applicable notice and procedural requirements in the affected award, agreement, or other instrument.

I thank you for your attention to this matter, as well as your efforts to ensure that no taxpayer dollars are misspent.

A handwritten signature in blue ink, reading "Dorothy A. Fink", is positioned above a horizontal line.

Dorothy A. Fink, M.D., Acting Secretary

# **EXHIBIT C**

**Directive on NIH Priorities**

Agency: National Institutes of Health

Office of the Director

Action: Directive

**FOR FURTHER INFORMATION CONTACT:**

National Institutes of Health

Office of the Director

EFFECTIVE DATE: February 21, 2025

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**Restoring Scientific Integrity and Protecting the Public Investment in NIH Awards**

The National Institutes of Health (NIH) is the largest public funder of biomedical and behavioral research in the world. The public trusts NIH with substantial funds to foster creative discoveries that will improve health and prevent disease in this Country. Accordingly, NIH is committed to promoting only the highest level of scientific integrity, public accountability, and social responsibility in the programs it funds. And NIH promises to prioritize the funding of projects that will generate a high return on the public's investment, so that taxpayer dollars are not going to waste. Every dollar should be used to make Americans live longer, healthier lives.

This mission requires NIH to ensure that it is not supporting low-value and off-mission research programs, including but not limited to studies based on diversity, equity, and inclusion (DEI) and gender identity. While this description of NIH's mission is consistent with recent Executive Orders issued by the President, I issue this directive based on my expertise and experience; consistent with NIH's own obligation to pursue effective, fiscally prudent research; and pursuant to NIH authorities that exist independently of, and precede, those Executive Orders.

Research programs based primarily on artificial and non-scientific categories, including amorphous equity objectives, are antithetical to the scientific inquiry, do nothing to expand our knowledge of living systems, provide low returns on investment, and ultimately do not enhance health, lengthen life, or reduce illness. Worse, DEI studies are often used to support unlawful discrimination on the basis of race and other protected characteristics, which harms the health of Americans. Therefore, it is the policy of NIH not to prioritize such research programs.

Likewise, research programs based on gender identity are often unscientific, have little identifiable return on investment, and do nothing to enhance the health of many Americans. Many such studies ignore, rather than seriously examine, biological realities. It is the policy of NIH not to prioritize these research programs either.

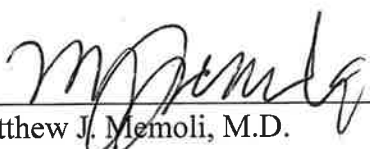
For these reasons and pursuant to, among other authorities, 42 U.S.C. § 282(b) and 45 C.F.R. Part 75 (45 C.F.R. §§ 75.207, 75.210, 75.371–373),<sup>1</sup> the Director of NIH hereby directs:

NIH personnel shall conduct an internal review of all contract solicitations and notices of funding opportunities; applications pending Type 1 and Type 2 awards; existing awards; cooperative agreements; and other transactions. Such review shall be aimed at ensuring NIH grants, contracts, cooperative agreements, and other transactions do not fund or support low-value and off-mission research activities or projects – including DEI and gender identity research activities and programs. NIH personnel should also ensure grants, contracts, cooperative agreements, and other transactions are free from fraud, abuse, and duplication, and are being implemented consistent with federal law.

This Directive shall be implemented by all relevant NIH personnel, including but not limited to those in the Office of Extramural Research, Office of Intramural Research, and the Division of Program Coordination, Planning, and Strategic Initiatives. Grants, contracts, cooperative agreements, and other transactions deemed inconsistent with NIH's mission may, where permitted by applicable law, be subject to funding restrictions, terminated or partially terminated, paused, and/or not continued or renewed, in compliance with all procedural requirements.

Notwithstanding this Directive, and consistent with any court orders that may apply, no open award disbursements may be paused in reliance upon Office of Management and Budget Memorandum M-25-13 or any Executive Order underlying that Memorandum. Previous instructions ordering the immediate release of such funds remain in effect. Also, consistent with any court orders that may apply, this Directive does not instruct personnel to condition or withhold federal funding pursuant to Section 4 of Executive Order 14,187 (Protecting Children from Chemical and Surgical Mutilation) based on the fact that a healthcare entity or health professional provides care or treatment.

Dated: February 21, 2025

  
Matthew J. Memoli, M.D.  
Acting Director of NIH

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<sup>1</sup> To be clear, these citations are illustrative, not exhaustive. Further explanation of the range of statutory and regulatory authorities that support actions taken pursuant to this Directive will be issued as appropriate.

# **EXHIBIT D**





National Institutes of Health  
Office of Extramural Research

March 10, 2025

Angela V. Olinto, Ph.D.  
Provost, Columbia University  
Email: [provost@columbia.edu](mailto:provost@columbia.edu)

Dear Dr. Olinto:

NIH is hereby providing notice that funding for the projects in the attached spreadsheet will be terminated pursuant to the National Institutes of Health ("NIH") Grants Policy Statement (GPS),<sup>1</sup> and 2 C.F.R. § 200.340(a)(4).

As reflected in the Notices of Award for the most recent budget period of these projects, the NIH Grants Policy Statement is incorporated as a term and condition of award. The GPS "includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards."<sup>2</sup> According to the GPS, "NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340."<sup>3</sup> At the time the Notices of Award were issued for the most recent budget period, 2 C.F.R. § 200.340(a)(4) permitted termination "[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities."

These awards no longer effectuate agency priorities. NIH is obligated to carefully steward grant awards to ensure taxpayer dollars are used in ways that benefit the American people and improve their quality of life. Your project does not satisfy these criteria.

NIH is responsible for ensuring that its limited resources are appropriately allocated. NIH policy is that grant dollars should support institutions that foster safe, equal, and healthy working and learning conditions conducive to high-quality research and free inquiry<sup>4</sup>—and should not subsidize institutions that are not built on American values of free speech, mutual respect, and open debate. In this vein, NIH is aware of recent events at Columbia University involving antisemitic action that suggest the institution has a disturbing lack of concern for the safety and wellbeing of Jewish students. Columbia's ongoing inaction in the face of repeated and severe harassment and targeting of Jewish students has ground day-to-day campus operations to a halt, deprived Jewish students of learning and research opportunities to which they are entitled, and brought shame upon the University and our nation as a whole. Supporting research in such an

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<sup>1</sup> <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

<sup>2</sup> NIH GPS, Section 3.

<sup>3</sup> *Id.* at Section 8.5.2.

<sup>4</sup> NIH GPS, Section 4.



environment is plainly inconsistent with NIH's priorities and *raison d'être* of funding and championing the very best American research and educational institutions.

Although "NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,"<sup>5</sup> no corrective action is possible here. The actions described above are incompatible with agency priorities, and no modification of the projects could align the projects with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.<sup>6</sup> Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 200.344. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget's regulations to *USAspending.gov*.<sup>7</sup>

### **Administrative Appeal**

You may object and provide information and documentation challenging these terminations. NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.<sup>8</sup>

You must submit a request for such review to Director Memoli no later than 30 days after this letter is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.<sup>9</sup>

The request for review must include a copy of this decision, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.<sup>10</sup>

Sincerely,

Michelle G. Bulls -S

Digitally signed by Michelle G.  
Bulls -S  
Date: 2025.03.10 16:01:39 -04'00'

Michelle G. Bulls  
Director, Office Policy for Extramural Administration  
Chief Grants Management Officer - National Institutes of Health  
Email: [michelle.bulls@nih.gov](mailto:michelle.bulls@nih.gov)

cc:

William Berger, Assistant Vice President for Sponsored Projects Administration, Columbia University

<sup>5</sup> NIH GPS, Section 8.5.2.

<sup>6</sup> See 2 C.F.R. § 200.343.

<sup>7</sup> 2 C.F.R. § 200.341(c).

<sup>8</sup> See 42 C.F.R. Part 50, Subpart D.

<sup>9</sup> *Id.* § 50.406(a).

<sup>10</sup> *Id.* § 50.406(b).

# **EXHIBIT E**



**National Institutes of Health**  
Office of Extramural Research

March 14, 2025

Angela V. Olinto, Ph.D.  
Provost, Columbia University  
Email: [provost@columbia.edu](mailto:provost@columbia.edu)

Dear Dr. Olinto:

Effective today, March 14, 2025, NIH is hereby providing notice that funding for the projects in the attached spreadsheet will be terminated pursuant to the National Institutes of Health ("NIH") Grants Policy Statement (GPS),<sup>1</sup> and 2 C.F.R. § 200.340(a)(4).

As reflected in the Notices of Award for the most recent budget period of these projects, the NIH Grants Policy Statement is incorporated as a term and condition of award. The GPS "includes the terms and conditions of NIH grants and cooperative agreements and is incorporated by reference in all NIH grant and cooperative agreement awards."<sup>2</sup> According to the GPS, "NIH may ... terminate the grant in whole or in part as outlined in 2 CFR Part 200.340."<sup>3</sup> At the time the Notices of Award were issued for the most recent budget period, 2 C.F.R. § 200.340(a)(4) permitted termination "[b]y the Federal awarding agency or pass-through entity, to the greatest extent authorized by law, if an award no longer effectuates the program goals or agency priorities."

These awards no longer effectuate agency priorities. NIH is obligated to carefully steward grant awards to ensure taxpayer dollars are used in ways that benefit the American people and improve their quality of life. Your project does not satisfy these criteria.

NIH is responsible for ensuring that its limited resources are appropriately allocated. NIH policy is that grant dollars should support institutions that foster safe, equal, and healthy working and learning conditions conducive to high-quality research and free inquiry<sup>4</sup>—and should not subsidize institutions that are not built on American values of free speech, mutual respect, and open debate. In this vein, NIH is aware of recent events at Columbia University involving antisemitic action that suggest the institution has a disturbing lack of concern for the safety and wellbeing of Jewish students. Columbia's ongoing inaction in the face of repeated and severe harassment and targeting of Jewish students has ground day-to-day campus operations to a halt, deprived Jewish students of learning and research opportunities to which they are entitled, and brought shame upon the University and our nation as a whole. Supporting research in such an

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<sup>1</sup> <https://grants.nih.gov/grants/policy/nihgps/nihgps.pdf>.

<sup>2</sup> NIH GPS, Section 3.

<sup>3</sup> *Id.* at Section 8.5.2.

<sup>4</sup> NIH GPS, Section 4.

environment is plainly inconsistent with NIH's priorities and *raison d'être* of funding and championing the very best American research and educational institutions.

Although "NIH generally will suspend (rather than immediately terminate) a grant and allow the recipient an opportunity to take appropriate corrective action before NIH makes a termination decision,"<sup>5</sup> no corrective action is possible here. The actions described above are incompatible with agency priorities, and no modification of the projects could align the projects with agency priorities.

Costs resulting from financial obligations incurred after termination are not allowable.<sup>6</sup> Nothing in this notice excuses either NIH or you from complying with the closeout obligations imposed by 2 C.F.R. §§ 200.344. NIH will provide any information required by the Federal Funding Accountability and Transparency Act or the Office of Management and Budget's regulations to *USAspending.gov*.<sup>7</sup>

### **Administrative Appeal**

You may object and provide information and documentation challenging these terminations. NIH has established a first-level grant appeal procedure that must be exhausted before you may file an appeal with the Departmental Appeals Board.<sup>8</sup>

You must submit a request for such review to Director Memoli no later than 30 days after this letter is received, except that if you show good cause why an extension of time should be granted, Dr. Memoli may grant an extension of time.<sup>9</sup>

The request for review must include a copy of this decision, must identify the issue(s) in dispute, and must contain a full statement of your position with respect to such issue(s) and the pertinent facts and reasons in support of your position. In addition to the required written statement, you shall provide copies of any documents supporting your claim.<sup>10</sup>

Sincerely,

**Michelle G. Bulls -S**

Digitally signed by Michelle G. Bulls

-S

Date: 2025.03.14 09:52:52 -04'00'

Michelle G. Bulls

Director, Office of Policy for Research Administration, OER

Chief Grants Management Officer - National Institutes of Health

Email: [michelle.bulls@nih.gov](mailto:michelle.bulls@nih.gov)

cc:

William Berger, Assistant Vice President for Sponsored Projects Administration, Columbia University

<sup>5</sup> NIH GPS, Section 8.5.2.

<sup>6</sup> See 2 C.F.R. § 200.343.

<sup>7</sup> 2 C.F.R. § 200.341(c).

<sup>8</sup> See 42 C.F.R. Part 50, Subpart D.

<sup>9</sup> *Id.* § 50.406(a).

<sup>10</sup> *Id.* § 50.406(b).

# **EXHIBIT F**



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

National Institutes of Health  
Eunice Kennedy Shriver National  
Institute of Child Health and  
Human Development  
Bethesda, Maryland 20892

**DATE:** March 7, 2025

**FROM:** Alice Pagán Pereira, Contracting Officer

**TO:** The Trustees of Columbia University in the City of New York

**SUBJECT:** Notification of Termination of Multiple Task Orders

Dear Contractor,

Pursuant to FAR Clause 52.249-5, Termination for Convenience of the Government (Educational and Other Nonprofit Institutions) (AUG 2016), the task orders listed below are hereby terminated for the convenience of the Government, effective immediately. No further expenses shall be incurred under the following contract and task orders:

- HHSN201300010I/HHSN27500005 – *“Pharmacokinetic/Pharmacodynamic Evaluation of Levonorgestrel Butanoate of Female Contraception”*
- 75N94020D00013 – *“Contraceptive Development Program NICHD Contraceptive Clinical Trials Network – Female Sites”*
- 75N94020D00013/75N94023F00001 – *“Ovaprene Phase 1 - Protocol Finalization, Procurement of Regulatory Approval, and Complete Start-Up Activities for the Ovaprene Vaginal Device Clinical Trial and Colposcopy Subset”*
- 75N94020D00013/75N94020F00001 - *“Contraceptive Clinical Trials Network – Female Sites - Core Function Activities”*

Additional information will follow.

Should you have any questions, please feel free to reach out.

Alice Pagán Pereira  
Contracting Officer  
NICHD Office of Acquisitions