

July 5, 2022

## Dear Friends:

Over the past several years, the John Paul II Medical Research Institute (JP2MRI) has received the following frequently asked questions: (1) What is the John Paul II Medical Research Institute?; (2) Why was the Institute formed and what is its mission?; (3) Does any other pro-life organization around the world conduct pro-life medical research like JP2MRI with the objective to eliminate embryonic stem cells and aborted fetal cells in the biopharmaceutical industry?; (4) Does the Institute receive financial support from the Catholic Church or other major Catholic organizations?; (5) What diseases does the Institute focus on treating?; (5) Is the Institute working on a COVID-19 vaccine and how does it differentiate from the current mRNA vaccines?; and (6) Is the government supporting JP2MRI's vaccine research? This letter provides answers to these often asked questions.

Dr. Alan Moy is the founder of John Paul II Medical Research Institute, a non-profit medical research organization located in Coralville, Iowa, USA. He is a pulmonary physician-scientist, who until 2005, had a distinguished academic career while working as a tenured faculty member at the University of Iowa. During that time, Dr. Moy became viewed as a leading expert in cellular and tissue engineering and his research was supported by the National Institutes of Health (NIH) and several private research foundations in the area of cardiopulmonary disease. In 2005, Dr. Moy left academia and co-founded Cellular Engineering Technologies (CET), a biotechnology company located in Coralville, Iowa. CET's mission is to manufacture stem cells and research reagents and therapies derived from ethical human tissue sources. In 2009, the Small Business Commerce Association, which recognizes the top 5 percent of small businesses throughout the country, selected CET for its Best Business Award in the commercial biotechnology category. Dr. Moy has been recognized in the Who's Who in America and in the Leading Physicians of the World by the International Association of Healthcare Professionals. In 2005, Dr. Moy also established a solo pulmonary practice at a local Catholic hospital with the objective to obtain postnatal tissue like cord blood, umbilical cord and placenta, in order to capitalize and develop adult stem cell technologies. He has cared for hundreds of patients with COVID and provided early treatment for these patients- thereby saving their lives and preventing hospitalization and managing complications of this disease regardless of their COVID vaccine status. Dr. Moy has spoken nationally against current COVID vaccines and vaccine and mask mandates. He has published several editorials in religious media outlets on the scientific and medical ethics surrounding COVID vaccines and morally-illicit medicines.

In the space below, I will share the Institute's experiences about the grave nature and impact of morally-illicit cells on biotechnology and Catholic healthcare; the problems with the current COVID vaccines; the manner in which Operation Warp Speed was conducted; and the years of Vatican management on the issue of aborted fetal cells utilized in pharmaceutical products. Much of this information is not known to Catholics or secular audiences. Moreover, many Catholics and pro-life

Christians are unaware that they are financially supporting secular medical research organizations with billions of dollars annually, when these organizations either endorse or utilize embryonic stem cell research and aborted fetal research. Consequently, Catholics and pro-life individuals are in effect unknowingly supporting a culture of death. This trend has to change.

JP2MRI is the only non-profit Catholic and pro-life organization in the world that is pro-actively conducting medical research that is addressing the horrific practice of using morally-illicit cells in the production of products and services by the secular scientific community and pharmaceutical industry. This has recently been underscored by COVID-19 vaccines that use aborted fetal cells in either the manufacturing and/or testing of these vaccines. Many Catholics around the world have become disabled and lost their lives or lost their jobs and religious freedom because of these vaccines. However, COVID-19 vaccines are only the tip of the iceberg. Aborted fetal cells have been used for the past 70 years to produce childhood vaccines, gene therapies, cell therapies, diagnostics, research reagents and protein therapeutics. These products comprise over a 100 billion dollar global annual market, and one which is growing at a rate of 8 percent per year. This disturbing trend represents one of the biggest threats to all Catholics and the viability of Catholic healthcare.

The medicines and therapies referenced above have to be administered in a hospital setting. As a result, Catholic hospitals ultimately face losing their Catholic identity if they adopt these products; or risk losing market share to secular hospitals if they refuse to adopt these morally-illicit medicines. Catholic healthcare workers are already losing their jobs because they refuse to cooperate with these medical trends and administer these medicines. Many Catholic scientists and other personnel are losing their jobs in the biopharmaceutical industry, government and academia because they have chosen to exercise their moral conscience and refused to participate in the use of morally-illicit aborted fetal cells. Catholics and pro-life patients have refused to use drugs that are morally-tainted from abortion- placing their lives in jeopardy, if an ethical option does not exist. Military personnel have been denied religious exemptions from the COVID vaccine mandates and subsequently discharged from the military -placing our country at risk of combat readiness.

In 2005, the *Pontifical Academia of Life (PAL)*, which was started by Saint Pope John Paul II, published a position that addressed the moral permissibility of vaccines that are morally tainted from abortion. The Vatican stated that while such vaccines were morally permissible, they were not morally obligatory for Catholics. Further, the Vatican directed Catholics to urge the pharmaceutical industry to develop medicines that avoid cells derived from abortion.

What is not appreciated is that the 2005 PAL position on vaccines was not initiated because of some astute observation by some Vatican Pontificate Academy that noticed a trend in the secular biopharmaceutical industry. It was brought to the attention to the Vatican by Debi Vinnedge, a homemaker who in 1999 started *Children of God for Life*. However, it should have been the responsibility of the *Pontificate Academy of Science*, which was formed in 1936 which had the expertise and responsibility to bring these moral scientific issues to the Holy See long before 2005.

In 2008, the *Congregation for the Doctrine of Faith* issued *Dignitas Personae*, which reaffirmed the PAL position. Regrettably, little has been done by major Catholic stakeholders (which include the Vatican; United States Conference of Catholic Bishops; Catholic universities and medical centers; large Catholic foundations; Catholic Health Association of the United States; and every major Catholic hospital corporation) to deploy its vast resources to organize and develop 2500 Crosspark Rd W230, Coralville, IA 52241

biotechnologies that are consistent with Catholic teaching. Since the COVID vaccine introduction, the problem has only escalated for Catholics, even from established Catholic institutions and leaders. For example, Catholic universities and hospitals now enforce COVID-19 vaccines on students and employees. Catholic dioceses endorse COVID vaccines; pursue Catholic school and church closures and lockdowns; and require futile and harmful mask mandates for school children. Even Pope Francis proclaims that the vaccine is a moral obligation and holds private audiences with the Pfizer CEO.

Since 2006, JP2MRI has lobbied all of these Catholic institutions to support ethical research to address this problem. JP2MRI has written to 55 US bishops and every Archbishop to speak out against morally-illicit research. Unfortunately, not one bishop has responded to our letter and pledged to speak out on this topic within their diocese. We have spoken to the Vatican hierarchy who have expressed little interest in creating a global research program to develop a pro-life biotechnology industry sector, which could pro-actively counter secular biomedical research institutions like the National Institutes of Health (NIH) which funds some research programs that support a culture of death. Instead, the Vatican chooses to hold a biennial conference controlled by Dr. Robin Smith, a non-Catholic, who invites speakers like Chelsea Clinton, Anthony Fauci, Stephane Bancel of Moderna and Albert Bourla of Pfizer who all support secular healthcare, vaccine mandates and a culture of death agenda. Many of these speakers even support criminal and legal retribution against anyone, particularly doctors and scientists, who disagree with their views.

Regrettably, JP2MRI has never received any support from these aforementioned Catholic institutions- thereby leaving the burden of this incredible problem on the shoulders of JP2MRI. Through a series of miraculous and divine interventions, the Institute, through the financial support of lay Catholics around the world, has been able to accomplish a seemingly impossible task. Like the battle of overturning *Roe v. Wade*, the campaign to create a pro-life biotechnology sector has been led by a small group of Catholic lay people. JP2MRI has been the leader working on building a pro-life biotechnology industry sector for the past 17 years. JP2MRI is a perfect example how the laity espouses *Apostolicam Actuositatem*.

JP2MRI is a first-in-kind non-profit research organization that addresses two global objectives in biotechnology: (1) creating disruptive biotechnology that addresses scientific and ethical deficits in the biopharmaceutical industry; and (2) producing novel treatments and cures to address longstanding and unmet needs for all individuals, especially a neglected religious consumer market. JP2MRI's core therapeutic priorities include: 1) neurodegenerative diseases; 2) rare diseases; 3) oncology; and 4) regenerative medicine.

To date, JP2MRI's scientific accomplishments include: 1) Helping develop a method that creates safer pluripotent stem cells using a novel, patented technology for creating induced pluripotent stem cells (iPSC) with lower cancer risk and which eliminates the need for embryonic stem cells; 2) Developing the world's largest portfolio of adult stem cells; 3) Deploying modern genetic methods to transform adult stem cells from cord blood and placenta tissue into immortalized human stem cell lines that not only are more ethical than aborted fetal cells, but also offer scientific advantages to morally-illicit cells in the bioproduction of medicines, diagnostics and research reagents; and (4) Developing a platform that produces traditional COVID-19 vaccines and other respiratory vaccines to address large unmet medical needs. This COVID-19 vaccine platform is not only moral, but it has the potential to offer a safer and more robust and durable immunity against COVID-19 when compared to current mRNA and other gene therapy vaccines that

have received emergency use authorization.

In the space below, I will share JP2MRI's discussions on COVID-19 medical managements and vaccine research with the United States government. When the COVID-19 pandemic started in January 2020, the genetic sequence of the original Wuhan strain was first published. This allowed Pfizer and Moderna to design their mRNA vaccines. In March 2020, Phase 1 clinical trials were already starting in the state of Washington without any animal safety studies. The lack of proper preclinical testing has now resulted in extraordinary and serious adverse events in patients. In February of 2020, Dr. Moy published an editorial in *Doximity*, a physician social media platform, explaining why anti-malarial drugs should be used as repurposed medicines for treating COVID. He even sent a letter in February, 2020 to Dr. Anthony Fauci to lobby for the repurposing of anti-malaria drugs for treating COVID based on a provided list of peer-reviewed scientific articles that were cited and published over the past 20 years. Although Dr. Moy received a response from Dr. Fauci's deputy that NIH was considering it, the Institute later learned that this was untrue.

In June 2020, the Institute wrote a letter to Health and Human Services Secretary Alex Azar and warned him that mRNA and gene therapy vaccines had a high risk of failure, and posed a significant risk for generating viral mutations. We mentioned that if the United States government did not develop traditional attenuated vaccine technologies, it would pose a national security threat to our country. In that letter, we raised concerns that *Operation Warp Speed* was not supporting research on traditional attenuated vaccines, which have long been considered the gold standard. We stated that JP2MRI was working on developing an attenuated live vaccine platform, and that the government should direct some research support towards this type of vaccine program. Secretary Azar directed us to speak with Mr. Paul Mango, Secretary Azar's Deputy Chief of Staff for *Operation Warp Speed*, with whom we raised these concerns. It was clear from our discussion with Mr. Mango that *Operation Warp Speed* was politically driven, and that Dr. Fauci was the ultimate decision maker on what companies and vaccine programs would be supported by *Operation Warp Speed*. It was clear that a live attenuated vaccine would not be supported as long as Dr. Fauci was making decisions on government vaccine programs.

From January 2020 to June 2020, Dr. Moy reviewed hundreds of scientific articles written by many scientists reporting their experience in trying to develop vaccines for SARS and MERS over the past two decades. He reviewed preclinical animal studies and clinical trials on previous coronavirus vaccine research to understand what went wrong and what lessons could be learned. What he learned was that subunit vaccines and killed vaccines were ineffective and lacked a robust and durable immune response. He learned that nasally delivered attenuated live vaccines produced a more robust immune response in animal models. However, new technologies would be required in order to develop attenuated vaccines. When he reviewed the clinical data from the vaccine rollout as of February of 2021, he knew that the mRNA vaccines from Pfizer and Moderna, and the adenovirus vaccine from Johnson and Johnson, would fail to produce a robust and durable immunity because their approaches were based on the same failed subunit approaches as those previously attempted after SARS and MERS. Unfortunately, our regulatory agencies, advisors to the FDA and the CDC, academia and industry, all continued to pursue subunit vaccine approaches. Albert Einstein is often credited with the saying, "The definition of insanity is doing the same thing over and over again and expecting different results."

Since COVID-19 vaccines are manufactured or tested with aborted fetal cells; do not provide a robust and durable immunity; promote mutational variants; and were developed without proper safety testing in animals, JP2MRI's donors beseeched us to develop a vaccine that is ethical, effective and safe. In

response, JP2MRI has developed a vaccine platform that has resulted in a pipeline of attenuated vaccine candidates that are ready for further testing. These milestones were conducted under budget and ahead of our anticipated schedule. In March of 2021, while speaking at a Catholic conference in Chicago, Dr. Moy told the audience that COVID vaccines based on subunit vaccine approaches would not protect against COVID or prevent transmission because they do not enhance what is called "respiratory mucosal immunity." This observation is now well recognized and accepted by scientists and the general public. The vaccine technologies at this time do a very poor job of enhancing respiratory mucosal immunity. More robust and durable coronavirus vaccines that enhance respiratory mucosal immunity have to be developed from the ground up. JP2MRI has developed new technologies that have the potential to enhance respiratory mucosal immunity and we are initiating those studies soon through academic collaborations.

While JP2MRI is located in Iowa, it receives over 90 percent of its donations from outside of Iowa. The Institute has received donations from 38 countries and 17 percent of our annual donations currently come from outside the United States. The reason for such global interest in JP2MRI comes from the fact that we are the only non-profit organization which is developing ethical biotechnologies. We have a track record of success in solving some of the most complex technical issues that have vexed academia, government and industry. Our research costs are less than 25 percent of the cost that established secular research organizations spend. JP2MRI's philosophy is to apply donations to support critical medical research milestones to deliver a proof-of-concept finding, which then in turn, will be leveraged to secure additional public and private funding to help establish de-risked clinical trial sites around the world.

The Institute pursues an annual Capital Campaign to support its aforementioned therapeutic priorities and current efforts to develop an attenuated COVID-19 vaccine. To help ensure that we accomplish this critical research goal, we need continued support from our donors. The Institute's mission and operation should appeal to donors of varying backgrounds due to its direct impact on their health and welfare, regardless of whether or not they hold strong conservative Catholic values. As previously mentioned, we are the only non-profit Catholic organization in the world that is taking a pro-active research role to reverse decades of secular biotechnology that has led to products and services on the backs of unborn children. On the business side, the Institute operates a non-profit biotechnology business model where, unlike established secular medical research foundations and academia, drug development and finding cures is our primary focus and not publishing papers and marketing. The Institute has a strong track record of advancing therapeutics for a variety of unmet medical needs at a cost that is much lower than that found in academia, government and industry. The Institute's long-term objective is to not only advance important cultural and medical issues, but change the future of healthcare and biotechnology for unmet and neglected consumers. If JP2MRI does not succeed at the end of the day, it is our firmly held belief that Catholic healthcare will sadly not endure. For that reason, JP2MRI is seeking the support of Catholic media outlets, lay organizations and all those who share the objective of advancing the Catholic Magisterium and want more efficient and cost-effective ways to find cures. Please support this worthy and important endeavor and thank you very much for your consideration.

Warm regards,

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Jay Kamath, J.D.

CEO

John Paul II Medical Research Institute