



Certificate of Analysis

Thaw and Culture Details

Cell Line Name	BCHi017-A-7	
WiCell Lot Number	DB68709	
Provider/Client	Boston Children's Hospital – Dr. Elizabeth Buttermore	
Banked By	Boston Children's Hospital – Dr. Elizabeth Buttermore	
Thaw and Culture Recommendations	WiCell recommends thawing 1 vial into 6 wells of a 6 well plate using mTeSR™ Plus and Matrigel®. WiCell recommends thawing using ROCK Inhibitor for best results.	
Protocol	WiCell Feeder Independent Pluripotent Stem Cell Protocol	
Culture Platform Prior to Freeze	Medium: StemFlex™	Matrix: Matrigel®
Passage Number	p11 Cells were cultured for 11 passages prior to freeze and post reprogramming. Plated cells at thaw should be labeled passage 12.	
Date Viald	07-March-2025	
Vial Label	HNDS0164-01 #D IPSC CNC40 +/- P3+8 10CM 1:6 MT+ MGEL 90%KOSR/10% DMSO G3 03/07/2025	
Biosafety and Use Information	Appropriate biosafety precautions should be followed when working with these cells. The end user is responsible for ensuring that the cells are handled and stored in an appropriate manner. WiCell is not responsible for damages or injuries that may result from the use of these cells. Cells distributed by WiCell are intended for research purposes only and are not intended for use in humans.	



Certificate of Analysis

Results

Test Description	Test Provider	Test Method	Test Specification	Result
Karyotype	WiCell	G-T-L Banding performed on 20 metaphase cells	Expected karyotype	See Report
	Results: 46,XY Interpretation: This is a normal karyotype; no clonal abnormalities were detected at the stated band level of resolution.			
Post-Thaw Viable Cell Recovery	WiCell	Thaw using specified Thaw & Culture Recommendations	Recoverable attachment after passage	Pass
Identity by STR	WiCell	PowerPlex 16 HS System by Promega™	Defines STR profile of deposited cell line	See Report
Mycoplasma	WiCell	PCR	Amplification of mycoplasma specific DNA detected with negative result	Pass
Sterility	Steris	Native Product Direct Transfer using FTM and TSB (ST/07)	Negative for growth following 14 days of culture	Pass

Approval Date	WiCell Quality Assurance Approval
21-May-2026	<div style="text-align: right; font-size: small;">5/21/2026</div> <div style="border: 1px solid black; padding: 2px; width: fit-content;"> <input checked="" type="checkbox"/> HEB <small>HEB WiCell Quality Assurance Signed by: Bruner, Haley</small> </div>

The material provided under this certificate has been subjected to the tests specified and the results and data described herein are accurate based on WiCell's reasonable knowledge and belief. Appropriate Biosafety Level practices and universal precautions should always be used with this material. For clarity, the foregoing is governed solely by WiCell's Terms and Conditions of Service, which can be found at <http://www.wicell.org/privacyandterms>.

Date Reported: August 27, 2025

Cell Line: BCHi017-A-7-DB68709

Submitted Passage #: 12

Date of Sample: 8/22/2025

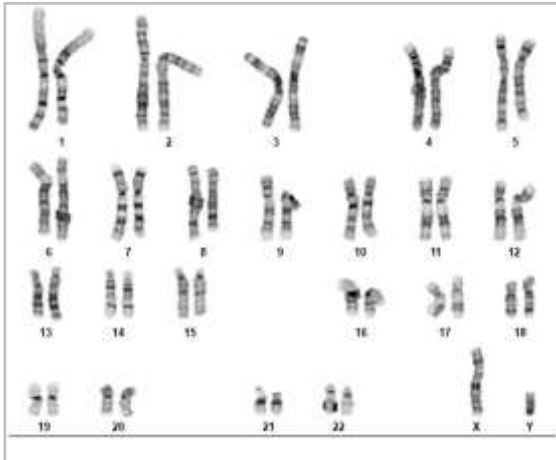
Specimen: Human iPSC

Results: 46,XY

Cell Line Sex: Male

Reason for Testing: LOT_RELEASE

Investigator: WiCell Stem Cell Bank, WiCell



Cell: 8

Slide: G01

Slide Type: Karyotype

Total Counted: 20

Total Analyzed: 8

Total Karyogrammed: 4

Band Resolution: 475 - 525

Interpretation:

This is a normal karyotype; no clonal abnormalities were detected at the stated band level of resolution.

Completed by: Dawn Davis, CG(ASCP)

Reviewed and Interpreted by: Justin Schleede, PhD, FACMG

For internal use only

Date: _____ **Sent By:** _____ **Sent To:** _____ **QC Review By:** _____

Limitations: This assay allows for microscopic visualization of numerical and structural chromosome abnormalities. The size of structural abnormality that can be detected is >3-10Mb, dependent upon the G-band resolution obtained from this specimen. For the purposes of this report, band level is defined as the number of G-bands per haploid genome. It is documented here as "band level", i.e., the range of bands determined from the four karyograms in this assay. Detection of heterogeneity of clonal cell populations in this specimen (i.e., mosaicism) is limited by the number of metaphase cells examined, documented here as "# of cells counted".

This assay was conducted solely for listed investigator/institution. The results of this assay are for research use only. Unless otherwise mutually agreed in writing, the services provided to you hereunder by WiCell Research Institute, Inc. ("WiCell") are governed solely by WiCell's Terms and Conditions of Service, found at www.wicell.org/privacyandterms. Any terms you may attach to a purchase order or other document that are inconsistent, add to, or conflict with WiCell's Terms and Conditions of Service are null and void and of no legal force or effect.



Short Tandem Repeat

Form SOP-89.01
Version 15.0

Requestor: WiCell Stem Cell Bank, WiCell

Sample Receipt Date: 25Aug25, 22Aug25, 21Aug25, 19Aug25, 15Aug25, 26Aug25, 29Aug25

STR Amplification Date: 09Sep25

Sample Name	CVCL_C7VX-WB68985 p42	CVCL_C7VL-WB68996 p35	CVCL_D3YC-WB69004 p35	BCHi017-A-9-DB68710 p12	BCHi017-A-7-DB68709 p12	BCHi017-A-11-DB68711 p14
WiCell CTR No. ¹	108864	108863	108861	108860	108859	108854
FGA	<div style="background-color: black; color: white; padding: 10px; text-align: center;"> Identifying information has been redacted to protect donor confidentiality. If more information is required, please contact info@wicell.org </div>					
TPOX						
D8S1179						
vWA						
Amelogenin						
Penta_D						
CSF1PO						
D16S539						
D7S820						
D13S317						
D5S818						
Penta_E						
D18S51						
D21S11						
TH01						
D3S1358						
Allelic Polymorphisms	28	28	28	27	27	27
Matches ²	See Results	See Results	See Results	108859, 108854	108860, 108854	108859, 108860
Comments						

¹ CTR No.: Characterization Test Request Number; also known as a laboratory accessioning number.

² The STR profile of the sample(s) listed are a 100% match for the given sample unless otherwise specified.



Short Tandem Repeat

Form SOP-89.01
Version 15.0

Requestor: WiCell Stem Cell Bank, WiCell

Sample Receipt Date: 25Aug25, 22Aug25, 21Aug25, 19Aug25, 15Aug25, 26Aug25, 29Aug25

STR Amplification Date: 09Sep25

Sample Name	BCHi016-A-3-DB68708 p20	BCHi016-A-1-DB68707 p18	WIBR3-S2-WB68916 p32	EIFIIIi002-A-DB68808 p8	CVCL_C7VP-WB68993 p32	WIBR3-WB69008 p33
WiCell CTR No. ¹	108818	108817	108780	108779	108776	108953
FGA	<div style="background-color: black; width: 100%; height: 100%; display: flex; align-items: center; justify-content: center;"> <p style="color: white; text-align: center;">Identifying information has been redacted to protect donor confidentiality. If more information is required, please contact info@wicell.org</p> </div>					
TPOX						
D8S1179						
vWA						
Amelogenin						
Penta_D						
CSF1PO						
D16S539						
D7S820						
D13S317						
D5S818						
Penta_E						
D18S51						
D21S11						
TH01						
D3S1358						
Allelic Polymorphisms	26	26	28	27	28	28
Matches ²	108817	108818	See Results		See Results	See Results
Comments						

¹ CTR No.: Characterization Test Request Number; also known as a laboratory accessioning number.

² The STR profile of the sample(s) listed are a 100% match for the given sample unless otherwise specified.



Short Tandem Repeat

Form SOP-89.01
Version 15.0

Requestor: WiCell Stem Cell Bank, WiCell

Sample Receipt Date: 25Aug25, 22Aug25, 21Aug25, 19Aug25, 15Aug25, 26Aug25, 29Aug25

STR Amplification Date: 09Sep25

Sample Name	BCHi019-A-11-DB68717 p14	BCHi019-A-9-DB68715 p13	BCHi018-A-7-DB68712 p12
WiCell CTR No. ¹	108892	108891	108890
FGA	Identifying information has been redacted to protect donor confidentiality. If more information is required, please contact info@wicell.org		
TPOX			
D8S1179			
vWA			
Amelogenin			
Penta_D			
CSF1PO			
D16S539			
D7S820			
D13S317			
D5S818			
Penta_E			
D18S51			
D21S11			
TH01			
D3S1358			
Allelic Polymorphisms	28	28	27
Matches ²	108891	108892	
Comments			

¹ CTR No.: Characterization Test Request Number; also known as a laboratory accessioning number.

² The STR profile of the sample(s) listed are a 100% match for the given sample unless otherwise specified.



Short Tandem Repeat

Form SOP-89.01
Version 15.0

Requestor: WiCell Stem Cell Bank, WiCell

Sample Receipt Date: 25Aug25, 22Aug25, 21Aug25, 19Aug25, 15Aug25, 26Aug25, 29Aug25

STR Amplification Date: 09Sep25

Assay Description: Short Tandem Repeat (STR) analysis is performed using the PowerPlex® 16 HS System by Promega™. Results are reported as 13 CODIS STR markers, Amelogenin for sex determination and two low-stutter, highly discriminating pentanucleotide STR markers.

Results: The genotypic profiles comprise a range of 26-28 allelic polymorphisms across the 15 STR loci analyzed. Samples 108863, 108953, 108780, 108776, 108861 and 108864 are a 100% match to each other and to 108862, 108816, 108815, 108777, 108755, 108624, 108613, 108572, 108571, 108531, and additional profiles. Additional matches can be provided upon request.

Interpretation: The concentration of DNA required to achieve an acceptable STR genotype (signal/ noise) was equivalent to that required for the standard procedure (~1 ng/amplification reaction) from human genomic DNA. These results suggest that the cells submitted correspond to the cell lines as named and were not contaminated with any other human cells or a significant amount of mouse feeder layer cells.

Sensitivity: Sensitivity limits for detection of STR polymorphisms unique to either this or other human cell lines is ~2-4%.

9/12/2025	9/16/2025	9/12/2025
<p>X Amber Kuhn</p> <hr/> <p>Tech #1 Characterization Signed by: Kuhn, Amber</p>	<p>X Michael Mussar</p> <hr/> <p>Tech #2 Characterization Signed by: Mussar, Michael</p>	<p>X Dawn Graham</p> <hr/> <p>QA Review Quality Assurance Signed by: Graham, Dawn</p>

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Mycoplasma Assay Report

PCR-based assay performed by WiCell
WiCell Stem Cell Bank, WiCell

26Aug25

Form SOP-83.01
Version 7.0

Sample Name	Result	Interpretation
CVCL_C7VX-WB68985 p42 (108864)	Negative	Band was not seen at 270bp, indicating the absence of mycoplasma.
CVCL_C7VL-WB68996 p35 (108863)	Negative	Band was not seen at 270bp, indicating the absence of mycoplasma.
CVCL_C7VW-WB68972 p41 (108862)	Negative	Band was not seen at 270bp, indicating the absence of mycoplasma.
CVCL_D3YC-WB69004 p35 (108861)	Negative	Band was not seen at 270bp, indicating the absence of mycoplasma.
BCHi017-A-9-DB68710 p12 (108860)	Negative	Band was not seen at 270bp, indicating the absence of mycoplasma.
BCHi017-A-7-DB68709 p12 (108859)	Negative	Band was not seen at 270bp, indicating the absence of mycoplasma.
Positive (+) Control	Positive	
Negative (-) Control	Negative	

Assay Description
Sample is tested for presence of mycoplasma using EZ-PCR™ Mycoplasma Detection Kit (Sartorius).

8/26/2025	8/26/2025	8/27/2025
X StephDos Santos <hr/> Tech #1 Characterization Signed by: Dos Santos, Stephany	X Dylan Peters <hr/> Tech #2 Characterization Signed by: Peters, Dylan	X Dawn Graham <hr/> QA Review Quality Assurance Signed by: Graham, Dawn

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A gel image is available upon request.

Native Product Sterility Report



WiCell Research Institute
504 S Rosa Road, Rm 101
Madison, WI 53719

SAMPLE #: 25050630
DATE RECEIVED: 22-May-25
TEST INITIATED: 27-May-25
TEST COMPLETED: 10-Jun-25

SAMPLE NAME / DESCRIPTION: BCHi013-A-1-DB68699
BCHi013-A-3-DB68700
BCHi014-A-10-DB68702
BCHi014-A-12-DB68703
BCHi014-A-9-DB68701
BCHi015-A-2-DB68704
BCHi015-A-3-DB68705
BCHi015-A-5-DB68706
BCHi016-A-1-DB68707
BCHi016-A-3-DB68708
BCHi017-A-7-DB68709
BCHi017-A-11-DB68711
BCHi017-A-9-DB68710
BCHi018-A-11-DB68714
BCHi018-A-7-DB68712
UNIQUE IDENTIFIER: N/A

TEST RESULTS:

# Tested	# Positives (Growth)	- Control
15	0	2 Negatives

TEST SUMMARY:

# Samples	Media Type	Volume (mL)	Incubation Temperature (° C)	Incubation Duration (Days)
15	TSB	40	20-25	14
15	FTG	40	30-35	14

REFERENCE:

Processed according to LAB-003: Sterility Test Procedure

PD #:

000053

TEST METHODOLOGY:

USP - Direct Transfer

Native Product Sterility Report



COMMENTS: Sample # 25050630

AUTHORIZED BY



DATE

12 JUN 2025

Specific test results may not be indicative of the characteristics of any other samples from the same lot or similar lots. This test report shall not be reproduced, except in full, without prior written approval. Liability is limited to the costs of the tests. Results applied to samples as received.