



Thaw and Culture Details

Cell Line Name	JFHZ4
WiCell Lot Number	WB66573
Provider	Jain Foundation
Banked By	WiCell
Thaw and Culture Recommendations	WiCell recommends thawing 1 vial into 3 wells of a 6 well plate.
Culture Platform	Feeder Independent
	Medium: TeSR™-E8™
	Matrix: Matrigel®
Protocol	WiCell Feeder Independent E8 Medium Protocol
Passage Number	p8 These cells were cultured for 7 passages prior to freeze and post reprogramming. WiCell adds +1 to the passage number to best represent the overall passage number of the cells at thaw.
Date Vialied	28-August-2017
Vial Label	JFHZ4 p8 WB66573
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.

Testing Performed by WiCell

Test Description	Test Provider	Test Method	Test Specification	Result
Karyotype by G-banding	WiCell	SOP-CH-003	Expected karyotype	Pass
Post-Thaw Viable Cell Recovery	WiCell	SOP-CH-305	≥ 15 Undifferentiated Colonies, ≤ 30% Differentiation and recoverable attachment after passage	Pass
Identity by STR	UW Translational Research Initiatives in Pathology Laboratory	PowerPlex 16 HS System by Promega	Defines profile	Pass
Sterility	Steris	ST/07	Negative	Pass
Mycoplasma	WiCell	SOP-QU-004	Negative	Pass



Testing Reported by Provider

This testing was performed prior to banking unless otherwise specified.

Test Description	Method	Result
Genetic Analysis	Karyotype by G-Banding	Normal Karyotype
Pluripotency	Multiplex RT-PCR to quantify endogenous expression of 7 genes. Scores generated from the analysis predict probability samples are iPSC-like.	Passing sample score ≥ 0.9
Mycoplasma	Commercially available mycoplasma detection kit.	Negative
Human Virus Testing	HIV I/II CPT Code 87389; detects both antigen and antibodies for HIV I and HIV II. HBV CPT Code 87340; detects Hepatitis B surface antigen. HCV CPT Code 86803; Immunoassay detects Hepatitis C antibody.	Donor samples tested negative for the following human viruses. HIV I HIV II HBV HCV
Identity	Multiplex STR analysis of 9 commonly used alleles.	Match of iPS cell line to incoming donor material.

Approval Date	Quality Assurance Approval
18-October-2017	11/16/2017 X JKG JKG Quality Assurance Signed by: Gay, Jenna



Chromosome Analysis Report: 068672

Date Reported: Tuesday, October 10, 2017

Cell Line: JFHZ4-WB66573 12832

Passage#: 8

Date of Sample: 9/29/2017

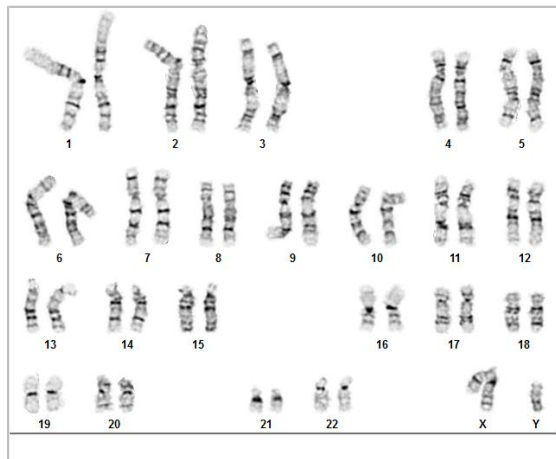
Specimen: Human IPS

Results: 46,XY

Cell Line Gender: Male

Reason for Testing: lot release testing

Investigator: [REDACTED]



Cell: 33

Slide: G01

Slide Type: Karyotype

Total Counted: 20

Total Analyzed: 8

Total Karyogrammed: 4

Band Resolution: 425 - 475

Interpretation:

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

Completed by: [REDACTED]

Reviewed and Interpreted by: [REDACTED]

A signed copy of this report is available upon request.

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 may not be relied upon by any other party without the prior written consent of the Director of the WiCell Cytogenetics Laboratory. The results of this assay are for research use only. If the results of this assay are to be used for any other purpose, contact the Director of the WiCell Cytogenetics Laboratory.

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Short Tandem Repeat Analysis

Department of Pathology and Laboratory Medicine
TRIP Laboratory (Molecular)
<http://www.pathology.wisc.edu/research/trip>

Sample Report:

12832-STR
Sample Name on Tube: 12832-STR
88.2 ng/ μ L, (A260/280=1.89)
Sample Type: Cells
Cell Count: ~2 million cells

Requestor:

WiCell Research Institute
Quality Department

Sample Date: N/A

Receive Date: 10/02/17
Assay Date: 10/05/17
File Name: STR 171006 wmr
Report Date: 10/11/17

STR Locus	STR Genotype Repeat #	STR Genotype
FGA	16-18,18.2,19,19.2,20,20.2,21,21.2,22, 22.2, 23, 23.2, 24, 24.2, 25, 25.2, 26-30, 31.2, 43.2, 44.2,45.2, 46.2	Identifying information has been redacted to protect donor confidentiality. If more information is required, please, contact WiCell's Technical Support .
TPOX	6-13	
D8S1179	7-18	
vWA	10-22	
Amelogenin	X,Y	
Penta_D	2.2, 3.2, 5, 7-17	
CSF1PO	6-15	
D16S539	5, 8-15	
D7S820	6-14	
D13S317	7-15	
D5S818	7-16	
Penta_E	5-24	
D18S51	8-10, 10.2, 11-13, 13.2, 14-27	
D21S11	24,24.2,25,25.2,26-28,28.2,29,29.2, 30, 30.2,31, 31.2,32,32.2,33,33.2, 34,34.2,35,35.2,36-38	
TH01	4-9,9.3,10-11,13.3	
D3S1358	12-20	

Results: Based on the 12832-STR cells submitted by WiCell QA dated and received on 10/05/17, this sample (Label on Tube: 12832-STR) defines the STR profile of the human stem cell line JFHZ4 comprising 23 allelic polymorphisms across the 15 STR loci analyzed.

Interpretation: No STR polymorphisms other than those corresponding to the human JFHZ4stem cell line were detected and 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. This result suggests that the 12832-STR sample submitted corresponds to the JFHZ4stem cell line and was not contaminated with any other human stem 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 stem cell lines is ~2-5%.

X_{RMB}

Digitally Signed on 10/12/17

TRIP Laboratory, Molecular

X_{WMR}

Digitally Signed on 10/12/17

, PhD, Director / Co-Director
UWHC Molecular Diagnostics Laboratory / UWSMPH TRIP Laboratory

Native Product Sterility Report



WiCell
504 S Rosa Rd, Rm 101
Madison, WI 53719

**CORRECTED
REPORT**

SAMPLE #: 17090875
DATE RECEIVED: 14-Sep-17
TEST INITIATED: 18-Sep-17
TEST COMPLETED: 02-Oct-17

SAMPLE NAME / DESCRIPTION: MCW003i-40001883-WB66553_12835, MCW047i-U2234-WB66549_12836, MCW071i-U2177-WB66552_12837, MCW086i-40000176-WB66545_12838, MCW090i-40000374-WB66557_12839, MCW091i-U2202-WB66554_12840, MCW097i-400001654-WB66548_12841, MCW112i-40000893-WB66551_12842, MCW116i-40001890-WB66550_12843, MCW073i-40000527-WB66570_12844, MCW060i-U2183-WB66559_12845, JFHZ4-WB66573_12846, JFHZ5-WB66587_12847, JFHZ6-WB66583_12848, JFMD6-WB66581_12849, JFNY2-WB66584_12850, JFRB5-WB66569_12851, JFWT2-WB66586_12852, JFWT4-WB66582_12853, UCSD239i-APP2-1-WB66585_12854, MCW100i-U2341-WB66575_12881, MCW114i-U2144-WB66566_12882, iPS(IMR90)-2-WB66588_12883, UCSD035i-4-4-WB62259_12884, UCSD064i-20-2-WB63303_12885, UCSD143i-87-1-WB57685_12886, UCSD161i-93-1-WB54536_12887, UCSD199i-107-1-WB59910_12888, UCSD209i-24-1-WB57661_12889, UCSD081i-1-14-WB61903_12890

UNIQUE IDENTIFIER: NA
PRODUCT REGISTRATION: Other: Human iPS Cells

TEST RESULTS:

# Tested	# Positives (Growth)	- Control
30	0	2 Negatives

TEST SUMMARY:

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

REFERENCE: Processed according to LAB-003: Sterility Test Procedure
METHOD VALIDATION / PD #: 000053
TEST METHODOLOGY: USP - Direct Transfer

Native Product Sterility Report

CORRECTED
REPORT



STERIS

COMMENTS:

Sample # 17090875

Report revised due to Customer request to update Sample Name / Description.

REVIEWED BY

DATE

09/04/17

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.



Mycoplasma Detection Assay Report

Testing Performed by WiCell

Lot Release Testing

October 3, 2017

FORM SOP-QU-004.01

Version G Edition 02

Reported by: KR

Reviewed by: JB

BD Monolight 180

#	Sample Name	Reading A		A Ave	Reading B		B Ave	Ratio B/A	Result	Comments/Suggestions
		RLU1	RLU2		RLU1	RLU2				
1	JFHZ4-WB66573 12823	261	241	251	98	88	93	0.37	Negative	
2	Positive (+) Control	439	428	433.5	32189	32447	32318	74.55	Positive	
3	Negative (-) Control	699	716	707.5	79	80	79.5	0.11	Negative	

