

Thaw and Culture Details

Cell Line Name	MIN09i-33114.C						
WiCell Lot Number	WB19768						
Provider	Massachusetts General Hospital						
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: mTeSR™1						
Matrix: Matrigel®							
Protocol	WiCell Feeder Independent mTeSR [™] 1 Protocol						
Passage Number	p15 These cells were cultured for 14 passages prior to freeze. WiCell adds +1 to the passage number at freeze so that the number on the vial best represents the overall passage number of the cells at thaw.						
Date Vialed	19-May-2015						
Vial Label	MIN09i-33114.C p15 WB19768						
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
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	Biotest Laboratories	ST/07	Negative	Pass
Mycoplasma	WiCell	SOP-QU-004	Negative	Pass
Karyotype by G-banding	WiCell	SOP-CH-003	Report karyotype	Pass

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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.



Testing Reported by Provider

Test Description & Method	Result
Genetic Analysis by Karyotype	Normal
Embryoid Body Formation	RT(q)PCR (GATA2 - Meso; AFP, Sox17 - Endo; Pax6, MAP2 - Ectoderm)
Pluripotency Markers; AP, Oct4, Nanog, SSEA-3, SSEA-4, TRA1-60	All Markers Expressed

Quality Assurance Approval			
2/20/2020			
Х нев			
HEB			
Quality Assurance Signed by: Bruner, Haley			

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Cell Line Gender: Male

Reason for Testing: lot release testing

Date Reported: Saturday, November 05, 2016 Cell Line: MIN09i-33114.C-WB19768 11915 Passage#: 15 Date of Sample: 10/31/2016 Specimen: iPSC Results: 46,XY



Interpretation:

88

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

Completed by: Reviewed and Interpreted by: A signed copy of this report is ava	CG(ASCP) PhD, FACMG ailable 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: 11915-STR Sample Name on Tube: 11915-STR 86.4 ng/μL, (A260/280=1.72) Sample Type: Cells Cell Count: ~2 million cells

Requestor: WiCell Research Institute Quality Department WiCell[®] info@wicell.org (888) 204-1782

Sample Date: N/A Receive Date: 11/07/16 Assay Date: 11/08/16 File Name: 161116 blb Report Date: 11/16/16

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
TPOX	6-13	been redacted to
D8S1179	7-18	protect donor
vWA	10-22	confidentiality. If
Amelogenin	X,Y	more information
Penta_D	2.2, 3.2, 5, 7-17	is required,
CSF1PO	6-15	please, contact
D16S539	5, 8-15	WiCell's Technical Support.
D7S820	6-14	<u>oupport.</u>
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	

<u>Results:</u> Based on the 11915-STR cells submitted by WiCell QA dated and received on 11/07/16, this sample (Label on Tube: 11915-STR) defines the STR profile of the human stem cell line MIN09i-33114.C comprising 28 allelic polymorphisms across the 15 STR loci analyzed.

<u>Interpretation:</u> No STR polymorphisms other than those corresponding to the human MIN09i-33114.C stem 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 11915-STR sample submitted corresponds to the MIN09i-33114.C stem cell line and was no t contaminated with any other human stem cells or a significant amount of mouse feeder layer cells.

<u>Sensitivity:</u> 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 11/17/16	X WMR Digitally Signed on 11/17/16
TRIP Laboratory, Molecular	PhD, Director / Co-Director UWHC Molecular Diagnostics Laboratory / UWSMPH TRIP Laboratory

Testing was accomplished by analysis of human genetic polymorphisms at STR loci. This methodology has not yet been approved by the FDA and is for investigational use only. Acknowledge TRIP in your publications, posters & presentations. For details, see: http://www.pathology.wisc.edu/research/trip/acknowledging TRIP agrees to maintain the confidentiality of any information provided to it in connection with its performance of this STR analysis on the same conditions as set forth in paragraph 2 of WiCell's Terms and Conditions of Service (http://www.wicell.org/media.acux/1a429b84-2b54-44a4-8ad8-5c05db93dd8a).

Sterility Report

Making life-saving products possible

WiCell Research Institute,	Inc.	BIOTEST SAMPLE #	15071050			
WiCell Quality Assurance 505 South Rosa Road, Suit Madison, WI 53719	re 120	VALIDATION #	NG			
Maaison, wi 337 19		TEST PURPOSE	NG			
PRODUCT	Zeng02i-iPSH14-WB19497 11328 WIC01i-02-1c-WB18031 11329 WIP06i-iPSCas9Het-WB18995 11330 WA01-WB16377 11331 MIN07i-33113.2D-WB19574 11332 MIN22i-33113.2I-WB19575 11333 MIN08i-33114.B-WB19546 11334 MIN09i-33114.C-WB19768 11335 MIN12i-33362.C-WB19545 11336 WC-24-02-DS-M-WB18754 1337					
PRODUCT LOT	NA					
STERILE LOT	NA	BI LOT	NA			
STERILIZATION LOT	NA	BI EXPIRATION DATE	NA			
STERILIZATION DATE	NA	DATE RECEIVED	2015-07-14			
STERILIZATION METHOD	NA	TEST INITIATED	2015-07-15			
SAMPLING BLDG / ROOM	IG BLDG / ROOM NA		2015-07-29			
REFERENCE	Processed according to LAB-003: S	Sterility Test Procedure				
	Ten (10) products were each divided between 40 mL TSB and 40 mL FTG. The samples were then cultured at 20-25 C and 30-35 C respectively and were monitored for a minimum of 14 days.					
	BI Manufacturers Specifications					
RESULTS Sterile	# POSITIVES # TESTED 0 10	POSITIVE CONTR NA	OL NEGATIVE CONTROL 2 Negatives			
COMMENTS NA						
	Lowland	DATE 🏒	9J4L15			
Specific test results may n	to be indicative of the characteristics of any other samples from	the same lot or similar lots. Liability is li	mited to the costs of the tests.			

Biotest Laboratories = 9303 West Broadway Ave. = Brooklyn Park, MN 55445 = USA = (763) 315-1200

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Mycoplasma Detection Assay Report Testing Performed by WiCell

Testing Performed by WiCell Lot Release Test November 4th, 2016 FORM SOP-QU-004.01 Version F Edition 01 Reported by: SM and OG Reviewed by: JB Berthold Flash n' Glo 539

		Reading A		Α	Read	ling B	В	Ratio		
#	Sample Name	RLU1	RLU2	Ave	RLU1	RLU2	Ave	B/A	Result	Comments/Suggestions
1	MIN09i-33114.C-WB19768 11915	82	84	83	33	31	32	0.39	Negative	
2	Positive (+) Control	101	97	99	4238	4314	4276	43.19	Positive	
3	Negative (-) Control	214	216	215	23	24	23.5	0.11	Negative	

