

#### Certificate of Analysis - Amended

Product Description	WA01 Oct4-eGFP Knock In					
Cell Line Provider	University of Wisconsin- Laboratory of Dr. James Thomson					
Lot Number	WA01(Oct4KI)-MCB-1	WA01(Oct4KI)-MCB-1				
Date Vialed	04-October-2008					
Passage Number	p60					
Culture Platform	Feeder Independent					
	Media <sup>1</sup> : TeSR Matrix: Matrigel					

The following testing specifications have been met for the specified product lot:

Test Description	Test Provider	Test Method	Test Specification	Result
Post-Thaw Viable Cell Recovery	WiCell	SOP-CH-305	<ul> <li>≥ 15 Undifferentiated Colonies,</li> <li>≤ 30% Differentiation</li> </ul>	Pass
Identity by STR	UW Molecular Diagnostics Laboratory	PowerPlex 1.2 System by Promega	Consistent with known profile	Pass
Sterility - Direct transfer method	Apptec	30744	Negative	Pass
Mycoplasma	Bionique	M250	No contamination detected	Pass
Karyotype by G-banding	WiCell	SOP-CH-003	Normal karyotype	Pass

<sup>1</sup> These cells were cultured in the presence of G418 (Geneticin, Invitrogen catalog 11811) at a concentration of 50µg/ml. Not used for thawing, passaging, or freezing.

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.

Amendment(s):

Reason for Amendment		
CoA updated to include copyright information.	See signature	
CoA updated for clarification of test specifications, added media foornote, and removed text regarding technical services	05-October-2010	
CoA updated for format changes, clarification of test specifications, test method, addition of test provider, culture platform, and electronic signature, and reference to WiCell instead of the NSCB		
Original CoA	22-April-2009	

Date of Lot Release	Quality Assurance Approval		
22-April-2009	12/30/2013 AMC Quality Assurance Signed by:		



Histocompatibility/Molecular Diagnostics Laboratory

University of Wisconsin Hospital and Clinics

## Short Tandem Repeat Analysis\*

Sample Report: 6618-STR WA01(Oct4KI)-MCB-1 UW HLA#: 59824

Sample Date: 11/06/08 Received Date: 11/07/08

Requestor: WiCell Research Institute

Test Date: 11/07/08

File Name: 081107

Report Date: 11/16/08

Sample Name: (label on tube) 6618-STR

**Description:** DNA Extracted by WiCell  $251.81 \text{ ng/}\mu\text{L}$ ; 260/280 = 1.91

Locus	Repeat #	STR Genotype
D16S539	5, 8-15	9,13
D7S820	6-14	8,12
D13S317	7-15	8,11
D5S818	7-15	9,11
CSF1PO	6-15	12,13
TPOX	6-13	8,11
Amelogenin	NA	X,Y
TH01	5-11	9.3,9.3
vWA	11, 13-21	15,17

Comments: Based on the 6618-STR DNA submitted by WI Cell dated 11/06/08 and received on 11/07/08, this sample (UW HLA# 59824) matches exactly the STR profile of the human stem cell line H1 comprising 15 allelic polymorphisms across the 8 STR loci analyzed. No STR polymorphisms other than those corresponding to the human H1 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 suggest that the 6618-STR DNA sample submitted corresponds to the H1 stem cell line and was not contaminated with any other human stem cells or a significant amount of mouse feeder layer cells. Sensitivity limits for detection of STR polymorphisms unique to either this or other human stem cell lines is ~5%. These results were communicated via phone to the Cytogenetics laboratory of the WiCell Research Institute on Monday, October 27, 2008. A preliminary copy of this report was issued via electronic mail to the WI Cell Research Institute on Monday, November 17, 2008.

<sup>\*</sup> Testing to assess engraftment following bone marrow transplantation 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.

Test Facility:

This report is confidential. No part may be used for advertising or public announcement without written permission. Results apply only to the sample(s) tested

# WuXi AppTec

Report Number 795304 Page 4 of 7

December 16, 2008 P.O. #:

WiCell Research Institute

### STERILITY TEST REPORT

Sample Information:	hES Cells 3: WA01 (Oct4KI)-MCB-1
Date Received: Date in Test: Date Completed:	November 25, 2008 December 01, 2008 December 15, 2008
Test Information:	Test Codes: 30744, 30744A Immersion, USP / 21 CFR 610.12 Procedure #: BS210WCR.201 (Modified: Alternate media used.)

TEST PARAMETERS	PRODUCT				
Approximate Volume Tested	0.5 mL	0.5 mL			
Number Tested	2	2			
Type of Media	SCD	FTM-T-L-S			
Media Volume	400 mL	400 mL			
Incubation Period	14 Days	14 Days			
Incubation Temperature	20 °C to 25 °C	30 °C to 35 °C			
RESULTS	2 NEGATIVE	2 NEGATIVE			

Page 1 Signed

Reviewed:

Page 1 Signed

QA Reviewed:

Testing conducted in accordance with current Good Manufacturing Practices.



BIONTOME TESTING LABORATORIES INC.

APPENDIX IV

Document#: Edition#: Effective Date: Title: DCF3013D 10 07/15/2003 **M-250 FINAL REPORT SHEET** 

M-250 FINAL REPORT

Direct Specimen Culture Procedure 3008, 3011, 3013

TO: Wicell QA

BTL SAMPLE ID#: 55226

P.O.#:

DATE REC'D: 11/04/2008

TEST/CONTROL ARTICLE:

6618 WA01 (OCT4 KI) MCB1

LOT#: NA

DIRECT CULTURE SET-UP (DAY 0)	DATE: 11/05/20	08
INDICATOR CELL LINE (VERO)	SEE DNA FLUOROCHROME RECORD SHEET	
		DATE
THIOGLYCOLLATE BROTH	DAY 7 + 🔿	11/12/2008
	DAY 28 + 💬	12/03/2008
BROTH-FORTIFIED COMMERCIAL		
0.5 mL SAMPLE	DAY 7 + 🔿	11/12/2008
6.0 mL BROTH	DAY 28 + 🕤	12/03/2008
BROTH-MODIFIED HAYFLICK		
0.5 mL SAMPLE	DAY 7 + 🕤	11/12/2008
6.0 mL BROTH	DAY 28 + 🛇	12/03/2008
BROTH-HEART INFUSION		
0.5 mL SAMPLE	DAY 7 + 🕤	11/12/2008
6.0 mL BROTH	DAY 28 + 🕤	12/03/2008
3		

(See Reverse)

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#### APPENDIX IV

Document#:	DCF3013	D	910		10 H		1/2	Rev. /
Edition#:	10							
Effective Date:	07/15/20	003						
Title:	M-250 F	M-250 FINAL REPORT SHEET			in Tarka			
SAMPLE ID#: 552	26			AER	OBIC	MICROAE	ROPHILIC	DĄTE
AGAR PLATES-FORTIF COMMERCIAL	IED	DAY DAY DAY	14	+ + +	000	+ + +	000	11/12/2008 11/19/2008 11/26/2008
AGAR PLATES-MODIFI HAYFLICK	ED	DAY DAY DAY	14	+ + +	000	+ + +	000	11/12/2008 11/19/2008 11/26/2008
AGAR PLATES-HEART INFUSION		DAY DAY DAY	14	+ + +	000	+ + +	000	11/12/2008 11/19/2008 11/26/2008
BROTH SUBCULTURES	(DAY 7)			DATE	: 11	/12/2008		
AGAR PLATES-FORTIF COMMERCIAL	IED	DAY DAY DAY	14	+ + +	000	+ + +	000	11/19/2008 11/26/2008 12/03/2008
AGAR PLATES-MODIFI HAYFLICK	ED	DAY DAY DAY	14	+ + +	000	+ + +	000	11/19/2008 11/26/2008 12/03/2008
AGAR PLATES-HEART INFUSION	2	DAY DAY DAY	14	+ + +	000	+ + +	000	11/19/2008 11/26/2008 12/03/2008

RESULTS: No detectable mycoplasmal contamination

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Laboratory Director

M-250 Procedural Summary: The objective of this test is to ascertain whether or not detectable mycoplasmas are present in an in vitro cell culture sample, be it a primary culture, hybridoma, master seed stock or cell line. This procedure combines an indirect DNA staining approach to detect non-cultivable mycoplasmas with a direct culture methodology utilizing three different mycoplasmal media formulations. The indirect approach involves the inoculation of the sample into a mycoplasma-free VERO (ATCC) indicator cell line and performing a DNA fluorochrome assay after 72-120 hours of incubation. The direct culture aspect of the test utilizes three different mycoplasmal media including both broth and agar formulations. The sample is inoculated into each of the 3 broth formulations and also onto duplicate plates (0.1 mL/plate) for each of the 3 agar formulations. Subculture from broth to fresh agar plates is carried out after 7 days incubation. Agar plates are incubated aerobically and microaerophillically in order to detect any colony forming units morphologically indicative of mycoplasmal contamination. Issuance of the final report with signature of the Scientific Director/Study Director signifies that the required controls were performed concurrently with the test sample(s) as detailed in the referenced SOPs and that all test conditions have been found to meet the required acceptance criteria for a valid test, including the appropriate results for the positive and negative controls.



MYCOPLASMA TESTING SERVICES

BIONIOUE TESTING LABORATORIES, INC

APPENDIX I	
Document #: Edition #: Effective date: Title:	DCF3008A 06 9/17/2003 DNA FLUOROCHROME ASSAY RESULTS
	DNA-FLUOROCHROME ASSAY RESULTS Procedures 3008, 3009, 3011
Sample ID # 55226	M-250 Date Rec'd: 11/04/2008 P.O. #
Indicator Cells Inoculated:	Date/Initials: 11/6/08 / JX
Fixation:	Date/Initials:II ID 08 / KG
Staining:	Date/Initials: II 10 08 / KG
TEST/CONTROL ARTICLE:	
6618 WA01 (OCT4 KI)	MCB1
LOT# <u>NA</u>	
<u>Wicell QA</u> WiCell Research Institu	te
The on Research Anster	
DNA FLUOROCHROME	ASSAV RESILTS.
<u> </u>	A reaction with staining limited to the nuclear region, which indicates no mycoplasmal contamination.
POSITIVE:	A significant amount of extranuclear staining which strongly suggests mycoplasmal contamination.
INCONCLUS	IVE:
	A significant amount of extranuclear staining consistent with low - level mycoplasmal contamination or nuclear degeneration.

A significant amount of extranuclear staining consistent with bacterial, fungal or other microbial contaminant or viral CPE. Morphology not consistent for mycoplasmal contamination.

COMMENTS:

Date: 11 10 08 Results Read by: K6 Date of Review: 1410 08 Reviewed by:



Report Date: November 11, 2008

#### Case Details:

Cell Line: WA01(Oct4KI)-MCB-1 (6618) Passage #: 62 **Date Completed:** 11/10/2008 Cell Line Gender: Male WiCell Stem Cell Bank Investigator: **Specimen:** hESC on Matrigel Date of Sample: 10/31/2008 Tests, Reason for: Wisc Bank- FTDL **Results:** 46,XY Completed by ST, CLSp(CG), on 11/10/2008 Reviewed and interpreted by KDM, PhD, FACMG, on 11/10/2008 *Interpretation:* No abnormalities were detected at the stated band level of resolution.

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Cell: S01-03 Slide: B Slide Type: Karyotyping Cell Results: Karyotype: 46,XY

# of Cells Counted: 20
# of Cells Karyotyped: 3
# of Cells Analyzed: 7
Band Level: 450-550

Results Transmitted by Fax / Email / Post Sent By:\_\_\_\_\_

Date:\_\_\_\_ Sent To:\_