

**Experiment Number:** 20116-02  
**Test Type:** 90-DAY  
**Route:** DOSED WATER  
**Species/Strain:** Mouse/B6C3F1

**P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

**Test Compound:** Aloe vera whole leaf extract (native)

**CAS Number:** ALOEVLEAFEXT

**Date Report Requested:** 10/23/2014

**Time Report Requested:** 13:47:06

**First Dose M/F:** NA / NA

**Lab:** NCTR

<b>C Number:</b>	C20116B
<b>Lock Date:</b>	Not Entered.
<b>Cage Range:</b>	All
<b>Date Range:</b>	All
<b>Reasons For Removal:</b>	All
<b>Removal Date Range:</b>	All
<b>Treatment Groups:</b>	All
<b>Study Gender:</b>	Both
<b>PWG Approval Date</b>	NONE

Experiment Number: 20116-02

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Test Compound: Aloe vera whole leaf extract (native)

Time Report Requested: 13:47:06

Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

<b>B6C3F1 Mouse Male CONTROL</b>	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	0	*TOTALS
		1	1	1	1	1	1	1	1	1	1	1	
		0	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	1	1	1	1	
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	0		
	1	1	1	1	1	1	1	1	1	1	1		
	3	3	3	3	4	4	4	4	5	5	5		
	1	2	3	4	1	2	3	4	1	2	3		

**Alimentary System**

Esophagus	+	+	+	+	+	+	+	+	+	+	+	12
Gallbladder	+	+	+	+	+	+	+	+	+	+	+	12
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	12
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	12
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	12
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	12
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	+	12
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	12
Liver	+	+	+	+	+	+	+	+	+	+	+	12
Pancreas	+	+	+	+	+	+	+	+	+	+	+	12
Salivary Glands	+	+	+	+	+	+	+	+	+	+	+	12
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	+	12
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	+	12

**Cardiovascular System**

Blood Vessel	+	+	+	+	+	+	+	+	+	+	+	12
Heart	+	+	+	+	+	+	+	+	+	+	+	12

**Endocrine System**

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	+	12
Adrenal Medulla	+	+	+	+	+	M	+	+	+	+	+	11
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	+	12

\* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

+ ..Tissue examined microscopically

A ..Autolysis precludes evaluation

X ..Lesion present

BLANK ..Not examined microscopically

I ..Insufficient tissue

Experiment Number: 20116-02

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/23/2014

Test Type: 90-DAY

Test Compound: Aloe vera whole leaf extract (native)

Time Report Requested: 13:47:06

Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

B6C3F1 Mouse Male CONTROL	DAY ON TEST												*TOTALS
	0	0	0	0	0	0	0	0	0	0	0	0	
	1	1	1	1	1	1	1	1	1	1	1	1	
	0	0	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	1	1	1	1	
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	0	
	0	0	0	0	0	0	0	0	0	0	0	0	
	1	1	1	1	1	1	1	1	1	1	1	1	
	3	3	3	3	4	4	4	4	5	5	5	5	
	1	2	3	4	1	2	3	4	1	2	3	4	
Parathyroid Gland	+	M	+	+	+	+	+	M	+	+	+	+	10
Pituitary Gland	+	+	+	+	+	+	+	+	+	+	+	+	12
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	+	+	12
<b>General Body System</b>													
NONE													
<b>Genital System</b>													
Epididymis	+	+	+	+	+	+	+	+	+	+	+	+	12
Preputial Gland	+	+	+	+	+	+	+	+	+	+	+	+	12
Prostate	+	+	+	+	+	+	+	+	+	+	+	+	12
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	+	+	12
Testes	+	+	+	+	+	+	+	+	+	+	+	+	12
<b>Hematopoietic System</b>													
Bone Marrow	+	+	+	+	+	+	+	+	+	+	+	+	12
Lymph Node, Mandibular	+	+	+	+	+	+	+	+	+	+	+	+	12
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	+	+	12
Spleen	+	+	+	+	+	+	+	+	+	+	+	+	12
Thymus	+	+	+	+	+	+	+	+	+	+	+	+	12
<b>Integumentary System</b>													
Mammary Gland	M	M	M	M	M	M	M	M	M	M	M	M	0
Skin	+	+	+	+	+	+	+	+	+	+	+	+	12

\* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

+ ..Tissue examined microscopically

A ..Autolysis precludes evaluation

X ..Lesion present

BLANK ..Not examined microscopically

I ..Insufficient tissue

Experiment Number: 20116-02  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: Mouse/B6C3F1

**P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
 Test Compound: Aloe vera whole leaf extract (native)  
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 10/23/2014  
 Time Report Requested: 13:47:06  
 First Dose M/F: NA / NA  
 Lab: NCTR

**B6C3F1 Mouse Male  
 CONTROL**

DAY ON TEST	0	0	0	0	0	0	0	0	0	0	0	0
	1	1	1	1	1	1	1	1	1	1	1	1
	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	1	1	1	1	1
ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0
	1	1	1	1	1	1	1	1	1	1	1	1
	3	3	3	3	4	4	4	4	5	5	5	5
	1	2	3	4	1	2	3	4	1	2	3	4
	<b>*TOTALS</b>											

**Musculoskeletal System**

Bone, Femur + + + + + + + + + + + + 12

**Nervous System**

Brain, Brain Stem + + + + + + + + + + + + 12

Brain, Cerebellum + + + + + + + + + + + + 12

Brain, Cerebrum + + + + + + + + + + + + 12

**Respiratory System**

Lung + + + + + + + + + + + + 12

Nose + + + + + + + + + + + + 12

Trachea + + + + + + + + + + + + 12

**Special Senses System**

Eye + + + + + + + + + + + + 12

Harderian Gland + + + + + + + + + + + + 12

**Urinary System**

Kidney + + + + + + + + + + + + 12

Urinary Bladder + + + + + + + + + + + + 12

**SYSTEMIC LESIONS**

Multiple Organ + + + + + + + + + + + + 12

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Date Report Requested: 10/23/2014

Test Type: 90-DAY

Test Compound: Aloe vera whole leaf extract (native)

Time Report Requested: 13:47:06

Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

<b>B6C3F1 Mouse Male</b> <b>1% WLN</b>	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	0	
		1	1	1	1	1	1	1	1	1	1	1	
		0	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	1	1	1	1	
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	<b>*TOTALS</b>
	0	0	0	0	0	0	0	0	0	0	0		
	0	0	0	0	0	0	0	0	0	0	0		
	1	1	1	1	2	2	2	2	3	3	3		
	1	2	3	4	1	2	3	4	1	2	3		

**Alimentary System**

Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	+	12
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	+	12
Liver	+	+	+	+	+	+	+	+	+	+	+	+	12

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

Preputial Gland								+	+		+	+	4
-----------------	--	--	--	--	--	--	--	---	---	--	---	---	---

**Hematopoietic System**

Spleen	+	+	+	+	+	+	+	+	+	+	+	+	12
--------	---	---	---	---	---	---	---	---	---	---	---	---	----

**Integumentary System**

NONE

**Musculoskeletal System**

NONE

\* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

+ ..Tissue examined microscopically

A ..Autolysis precludes evaluation

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BLANK ..Not examined microscopically

I ..Insufficient tissue

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Test Compound: Aloe vera whole leaf extract (native)

Time Report Requested: 13:47:06

Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

B6C3F1 Mouse Male 1% WLN	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	0	*TOTALS
		1	1	1	1	1	1	1	1	1	1	1	
		0	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	1	1	1	1	
	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	0	
		1	1	1	1	2	2	2	2	3	3	3	
		1	2	3	4	1	2	3	4	1	2	3	

Nervous System

NONE

Respiratory System

NONE

Special Senses System

NONE

Urinary System

Kidney

+ + + + + + + + + + + 12

SYSTEMIC LESIONS

Multiple Organ

+ + + + + + + + + + + 12

\* ..Total animals with tissue examined microscopically; Total animals with tumor

+ ..Tissue examined microscopically

X ..Lesion present

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CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

|   |             |   |   |   |   |   |   |   |   |   |   |   |                |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|----------------|
| <b>B6C3F1 Mouse Male</b><br><b>2% WLN</b> | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |
|   |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |                |
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 |                |
|   | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | <b>*TOTALS</b> |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |                |
|   | 1           | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |   |                |
|   | 9           | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 1 | 1 | 1 |   |                |
|   | 1           | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |   |                |

**Alimentary System**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Intestine Large, Cecum | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Large, Colon | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Liver                  | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

|                 |   |   |  |  |  |   |  |   |   |  |  |   |   |
|-----------------|---|---|--|--|--|---|--|---|---|--|--|---|---|
| Preputial Gland | + | + |  |  |  | + |  | + | + |  |  | + | 6 |
|-----------------|---|---|--|--|--|---|--|---|---|--|--|---|---|

**Hematopoietic System**

|        |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Spleen | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|----|

**Integumentary System**

NONE

**Musculoskeletal System**

NONE

\* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

+ ..Tissue examined microscopically

A ..Autolysis precludes evaluation

X ..Lesion present

BLANK ..Not examined microscopically

I ..Insufficient tissue

Experiment Number: 20116-02  
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 Route: DOSED WATER  
 Species/Strain: Mouse/B6C3F1

**P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

Test Compound: Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 10/23/2014  
 Time Report Requested: 13:47:06  
 First Dose M/F: NA / NA  
 Lab: NCTR

**B6C3F1 Mouse Male**  
**2% WLN**

| DAY ON TEST | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|-------------|----------------|---|---|---|---|---|---|---|---|---|---|---|
|             | I              | I | I | I | I | I | I | I | I | I | I | I |
|             | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 |
| ANIMAL ID   | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 1              | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|             | 9              | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 |
|             | 1              | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
|             | <b>*TOTALS</b> |   |   |   |   |   |   |   |   |   |   |   |

**Nervous System**

NONE

**Respiratory System**

NONE

**Special Senses System**

NONE

**Urinary System**

Kidney

+ + + + + + + + + + + + 12

**SYSTEMIC LESIONS**

Multiple Organ

+ + + + + + + + + + + + 12

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
 X ..Lesion present  
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Date Report Requested: 10/23/2014

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Test Compound: Aloe vera whole leaf extract (native)

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Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

|   |             |   |   |   |   |   |   |   |   |   |   |   |         |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---------|
| <b>B6C3F1 Mouse Male</b><br><b>3% WLN</b> | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|   |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |         |
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 |         |
|   | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *TOTALS |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |         |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |         |
|   | 7           | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 9 | 9 | 9 |   |         |
|   | 1           | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |   |         |

**Alimentary System**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Gallbladder               | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | M | + | + | + | + | 11 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Cardiovascular System**

|              |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Heart        | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Endocrine System**

|                    |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex     | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Adrenal Medulla    | + | + | + | + | + | + | + | + | + | + | M | + | 11 |
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

\* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

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Test Type: 90-DAY

Test Compound: Aloe vera whole leaf extract (native)

Time Report Requested: 13:47:06

Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

| B6C3F1 Mouse Male<br>3% WLN | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   | *TOTALS |
|-----------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---------|
|                             | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
| ANIMAL ID                   | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |         |
|                             | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                             | 7           | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 |         |
|                             | 1           | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |         |
| Parathyroid Gland           | M           | + | + | + | + | + | + | + | + | + | + | + | 11      |
| Pituitary Gland             | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Thyroid Gland               | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| <b>General Body System</b>  |             |   |   |   |   |   |   |   |   |   |   |   |         |
| NONE                        |             |   |   |   |   |   |   |   |   |   |   |   |         |
| <b>Genital System</b>       |             |   |   |   |   |   |   |   |   |   |   |   |         |
| Epididymis                  | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Preputial Gland             | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Prostate                    | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Seminal Vesicle             | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Testes                      | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| <b>Hematopoietic System</b> |             |   |   |   |   |   |   |   |   |   |   |   |         |
| Bone Marrow                 | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Lymph Node, Mandibular      | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Lymph Node, Mesenteric      | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Spleen                      | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Thymus                      | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| <b>Integumentary System</b> |             |   |   |   |   |   |   |   |   |   |   |   |         |
| Mammary Gland               | M           | M | M | M | M | M | M | M | M | M | M | M | 0       |
| Skin                        | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |

\* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

+ ..Tissue examined microscopically

A ..Autolysis precludes evaluation

X ..Lesion present

BLANK ..Not examined microscopically

I ..Insufficient tissue

Experiment Number: 20116-02  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: Mouse/B6C3F1

**P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
 Test Compound: Aloe vera whole leaf extract (native)  
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 10/23/2014  
 Time Report Requested: 13:47:06  
 First Dose M/F: NA / NA  
 Lab: NCTR

**B6C3F1 Mouse Male**  
**3% WLN**

| DAY ON TEST | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|-------------|----------------|---|---|---|---|---|---|---|---|---|---|---|
|             | 1              | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|             | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 |
| ANIMAL ID   | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0              | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 7              | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 |
|             | 1              | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
|             | <b>*TOTALS</b> |   |   |   |   |   |   |   |   |   |   |   |

**Musculoskeletal System**

Bone, Femur + + + + + + + + + + + + 12

**Nervous System**

Brain, Brain Stem + + + + + + + + + + + + 12

Brain, Cerebellum + + + + + + + + + + + + 12

Brain, Cerebrum + + + + + + + + + + + + 12

**Respiratory System**

Lung + + + + + + + + + + + + 12

Nose + + + + + + + + + + + + 12

Trachea + + + + + + + + + + + + 12

**Special Senses System**

Eye + + + + + + + + + + + + 12

Harderian Gland + + + + + + + + + + + + 12

**Urinary System**

Kidney + + + + + + + + + + + + 12

Urinary Bladder + + + + + + + + + + + + 12

**SYSTEMIC LESIONS**

Multiple Organ + + + + + + + + + + + + 12

\*\*\*END OF MALE DATA\*\*\*

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
 X ..Lesion present  
 I ..Insufficient tissue

M ..Missing tissue  
 A ..Autolysis precludes evaluation  
 BLANK ..Not examined microscopically

Experiment Number: 20116-02  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: Mouse/B6C3F1

**P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
 Test Compound: Aloe vera whole leaf extract (native)  
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 10/23/2014  
 Time Report Requested: 13:47:06  
 First Dose M/F: NA / NA  
 Lab: NCTR

| DAY ON TEST | 0       |   |   |   |   |   |   |   |   |   |   |   |
|-------------|---------|---|---|---|---|---|---|---|---|---|---|---|
|             |         | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|             | 0       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0       | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| ANIMAL ID   | 0       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 1       | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|             | 6       | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 |
|             | 1       | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
|             | *TOTALS |   |   |   |   |   |   |   |   |   |   |   |

**Alimentary System**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Gallbladder               | + | + | + | + | + | + | + | + | I | + | + | + | 11 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | M | + | + | 11 |

**Cardiovascular System**

|              |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Heart        | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Endocrine System**

|                    |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex     | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Adrenal Medulla    | + | + | + | + | + | + | + | M | + | + | + | + | 11 |
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
 X ..Lesion present  
 I ..Insufficient tissue

M ..Missing tissue  
 A ..Autolysis precludes evaluation  
 BLANK ..Not examined microscopically

Experiment Number: 20116-02

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/23/2014

Test Type: 90-DAY

Test Compound: Aloe vera whole leaf extract (native)

Time Report Requested: 13:47:06

Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

| B6C3F1 Mouse Female<br>CONTROL | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   | *TOTALS |
|--------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---------|
|                                | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
| ANIMAL ID                      | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |         |
|                                | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                                | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |         |
|                                | 6           | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 |         |
|                                | 1           | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |         |
| Parathyroid Gland              | +           | M | + | + | + | + | + | M | + | + | + | + | 10      |
| Pituitary Gland                | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Thyroid Gland                  | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| <b>General Body System</b>     |             |   |   |   |   |   |   |   |   |   |   |   |         |
| NONE                           |             |   |   |   |   |   |   |   |   |   |   |   |         |
| <b>Genital System</b>          |             |   |   |   |   |   |   |   |   |   |   |   |         |
| Clitoral Gland                 | +           | M | M | + | + | + | + | + | + | + | + | + | 10      |
| Ovary                          | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Uterus                         | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| <b>Hematopoietic System</b>    |             |   |   |   |   |   |   |   |   |   |   |   |         |
| Bone Marrow                    | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Lymph Node, Mandibular         | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Lymph Node, Mesenteric         | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Spleen                         | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Thymus                         | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| <b>Integumentary System</b>    |             |   |   |   |   |   |   |   |   |   |   |   |         |
| Mammary Gland                  | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Skin                           | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |
| <b>Musculoskeletal System</b>  |             |   |   |   |   |   |   |   |   |   |   |   |         |
| Bone, Femur                    | +           | + | + | + | + | + | + | + | + | + | + | + | 12      |

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
+ ..Tissue examined microscopically  
X ..Lesion present  
I ..Insufficient tissue

M ..Missing tissue  
A ..Autolysis precludes evaluation  
BLANK ..Not examined microscopically

Experiment Number: 20116-02

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/23/2014

Test Type: 90-DAY

Test Compound: Aloe vera whole leaf extract (native)

Time Report Requested: 13:47:07

Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

|  |             |   |   |   |   |   |   |   |   |   |   |   |                |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|----------------|
| <b>B6C3F1 Mouse Female<br/>CONTROL</b> | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |
|  |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |                |
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |
|  |             | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |                |
|  | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | <b>*TOTALS</b> |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |                |
|  | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |   |                |
|  | 6           | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 8 | 8 | 8 |   |                |
|  | 1           | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |   |                |

**Nervous System**

|                   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain, Brain Stem | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Brain, Cerebellum | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Brain, Cerebrum   | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Respiratory System**

|         |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung    | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Nose    | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Special Senses System**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Urinary System**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**SYSTEMIC LESIONS**

|                |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

+ ..Tissue examined microscopically

A ..Autolysis precludes evaluation

X ..Lesion present

BLANK ..Not examined microscopically

I ..Insufficient tissue

Experiment Number: 20116-02

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/23/2014

Test Type: 90-DAY

Test Compound: Aloe vera whole leaf extract (native)

Time Report Requested: 13:47:07

Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

|                               |             |   |   |   |   |   |   |   |   |   |   |   |         |  |
|-------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---------|--|
| B6C3F1 Mouse Female<br>1% WLN | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *TOTALS |  |
|                               |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |         |  |
|                               |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |  |
|                               |             | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |         |  |
|                               | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |  |
|                               |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |  |
|                               |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |  |
|                               |             | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 |         |  |
|                               |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4       |  |

Alimentary System

|                        |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Intestine Large, Cecum | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Large, Colon | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Liver                  | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

Cardiovascular System

NONE

Endocrine System

|                 |  |  |  |  |  |  |  |  |  |  |  |  |   |   |
|-----------------|--|--|--|--|--|--|--|--|--|--|--|--|---|---|
| Adrenal Cortex  |  |  |  |  |  |  |  |  |  |  |  |  | + | 1 |
| Adrenal Medulla |  |  |  |  |  |  |  |  |  |  |  |  |   | 0 |

General Body System

NONE

Genital System

NONE

Hematopoietic System

|        |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Spleen | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|----|

Integumentary System

NONE

Musculoskeletal System

\* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

+ ..Tissue examined microscopically

A ..Autolysis precludes evaluation

X ..Lesion present

BLANK ..Not examined microscopically

I ..Insufficient tissue

Experiment Number: 20116-02  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: Mouse/B6C3F1

**P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
 Test Compound: Aloe vera whole leaf extract (native)  
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 10/23/2014  
 Time Report Requested: 13:47:07  
 First Dose M/F: NA / NA  
 Lab: NCTR

| DAY ON TEST                |               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|----------------------------|---------------|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 Mouse Female</b> |               | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                            |               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                            | <b>1% WLN</b> | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| ANIMAL ID                  |               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                            |               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                            |               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                            |               | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 |
|                            |               | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| <b>*TOTALS</b>             |               |   |   |   |   |   |   |   |   |   |   |   |

|                              |  |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------|--|---|---|---|---|---|---|---|---|---|---|----|
| NONE                         |  |   |   |   |   |   |   |   |   |   |   |    |
| <b>Nervous System</b>        |  |   |   |   |   |   |   |   |   |   |   |    |
| NONE                         |  |   |   |   |   |   |   |   |   |   |   |    |
| <b>Respiratory System</b>    |  |   |   |   |   |   |   |   |   |   |   |    |
| NONE                         |  |   |   |   |   |   |   |   |   |   |   |    |
| <b>Special Senses System</b> |  |   |   |   |   |   |   |   |   |   |   |    |
| NONE                         |  |   |   |   |   |   |   |   |   |   |   |    |
| <b>Urinary System</b>        |  |   |   |   |   |   |   |   |   |   |   |    |
| Kidney                       |  | + | + | + | + | + | + | + | + | + | + | 12 |
| <b>SYSTEMIC LESIONS</b>      |  |   |   |   |   |   |   |   |   |   |   |    |
| Multiple Organ               |  | + | + | + | + | + | + | + | + | + | + | 12 |

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
 X ..Lesion present  
 I ..Insufficient tissue  
 M ..Missing tissue  
 A ..Autolysis precludes evaluation  
 BLANK ..Not examined microscopically



Experiment Number: 20116-02

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/23/2014

Test Type: 90-DAY

Test Compound: Aloe vera whole leaf extract (native)

Time Report Requested: 13:47:07

Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

|   |             |   |   |   |   |   |   |   |   |   |   |   |         |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---------|
| <b>B6C3F1 Mouse Female</b><br><b>2% WLN</b> | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | *TOTALS |
|   |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |         |
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|   |             | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |         |
|   | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |         |
|   | 2           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |   |         |
|   | 2           | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 4 | 4 | 4 |   |         |
|   | 1           | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |   |         |

**Alimentary System**

|                        |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|----|
| Intestine Large, Cecum | + | + | + | + | + | + | + | + | + | + | + | 11 |
| Intestine Large, Colon | + | + | + | + | + | + | + | + | + | + | + | 11 |
| Liver                  | + | + | + | + | + | + | + | + | + | + | + | 11 |

**Cardiovascular System**

NONE

**Endocrine System**

NONE

**General Body System**

NONE

**Genital System**

|       |  |  |  |  |  |  |  |  |  |  |  |  |   |   |
|-------|--|--|--|--|--|--|--|--|--|--|--|--|---|---|
| Ovary |  |  |  |  |  |  |  |  |  |  |  |  | + | 1 |
|-------|--|--|--|--|--|--|--|--|--|--|--|--|---|---|

**Hematopoietic System**

|        |   |   |   |   |   |   |   |   |   |   |   |    |
|--------|---|---|---|---|---|---|---|---|---|---|---|----|
| Spleen | + | + | + | + | + | + | + | + | + | + | + | 11 |
|--------|---|---|---|---|---|---|---|---|---|---|---|----|

**Integumentary System**

NONE

**Musculoskeletal System**

NONE

\* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

+ ..Tissue examined microscopically

A ..Autolysis precludes evaluation

X ..Lesion present

BLANK ..Not examined microscopically

I ..Insufficient tissue

Experiment Number: 20116-02  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: Mouse/B6C3F1

**P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
 Test Compound: Aloe vera whole leaf extract (native)  
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 10/23/2014  
 Time Report Requested: 13:47:07  
 First Dose M/F: NA / NA  
 Lab: NCTR

| DAY ON TEST                                 |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0              | 0 |
|---|-----------|---|---|---|---|---|---|---|---|---|---|----------------|---|
| <b>B6C3F1 Mouse Female</b><br><b>2% WLN</b> |           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1              | 1 |
|   |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0              | 0 |
|   |           | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1              | 1 |
|   | ANIMAL ID | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0              | 0 |
|   | 0         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0              |   |
|   | 2         | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2              |   |
|   | 2         | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4              |   |
|   | 1         | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4              |   |
|   |           |   |   |   |   |   |   |   |   |   |   | <b>*TOTALS</b> |   |

**Nervous System**

NONE

**Respiratory System**

NONE

**Special Senses System**

NONE

**Urinary System**

Kidney

+ + + + + + + + + + + 11

**SYSTEMIC LESIONS**

Multiple Organ

+ + + + + + + + + + + 11

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
 X ..Lesion present  
 I ..Insufficient tissue

M ..Missing tissue  
 A ..Autolysis precludes evaluation  
 BLANK ..Not examined microscopically

Experiment Number: 20116-02  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: Mouse/B6C3F1

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 Test Compound: Aloe vera whole leaf extract (native)  
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 10/23/2014  
 Time Report Requested: 13:47:07  
 First Dose M/F: NA / NA  
 Lab: NCTR

| DAY ON TEST                |               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|----------------------------|---------------|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 Mouse Female</b> |               | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                            |               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                            | <b>3% WLN</b> | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| ANIMAL ID                  |               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                            |               | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                            |               | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                            |               | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 2 | 2 | 2 | 2 |
|                            |               | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| <b>*TOTALS</b>             |               |   |   |   |   |   |   |   |   |   |   |   |

**Alimentary System**

|                           |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Gallbladder               | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | M | 11 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Cardiovascular System**

|              |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Heart        | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Endocrine System**

|                    |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex     | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Adrenal Medulla    | + | M | + | + | + | + | + | + | + | + | + | + | 11 |
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
 X ..Lesion present  
 I ..Insufficient tissue

M ..Missing tissue  
 A ..Autolysis precludes evaluation  
 BLANK ..Not examined microscopically

Experiment Number: 20116-02

P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 10/23/2014

Test Type: 90-DAY

Test Compound: Aloe vera whole leaf extract (native)

Time Report Requested: 13:47:07

Route: DOSED WATER

CAS Number: ALOEVLEAFEXT

First Dose M/F: NA / NA

Species/Strain: Mouse/B6C3F1

Lab: NCTR

| B6C3F1 Mouse Female<br>3% WLN | DAY ON TEST       |   |   |   |   |   |   |   |   |   |   |   | *TOTALS |
|-------------------------------|-------------------|---|---|---|---|---|---|---|---|---|---|---|---------|
|                               | 0                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
| ANIMAL ID                     | 0                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |         |
|                               | Parathyroid Gland | + | + | + | M | + | + | + | + | + | + | + | M       |
| Pituitary Gland               | +                 | M | + | + | + | + | + | + | + | + | + | + | 11      |
| Thyroid Gland                 | +                 | + | + | M | + | + | + | + | + | + | + | + | 11      |
| <b>General Body System</b>    |                   |   |   |   |   |   |   |   |   |   |   |   |         |
| NONE                          |                   |   |   |   |   |   |   |   |   |   |   |   |         |
| <b>Genital System</b>         |                   |   |   |   |   |   |   |   |   |   |   |   |         |
| Clitoral Gland                | +                 | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Ovary                         | +                 | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Uterus                        | +                 | + | + | + | + | + | + | + | + | + | + | + | 12      |
| <b>Hematopoietic System</b>   |                   |   |   |   |   |   |   |   |   |   |   |   |         |
| Bone Marrow                   | +                 | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Lymph Node, Mandibular        | +                 | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Lymph Node, Mesenteric        | +                 | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Spleen                        | +                 | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Thymus                        | +                 | + | + | + | + | + | M | + | + | + | + | + | 11      |
| <b>Integumentary System</b>   |                   |   |   |   |   |   |   |   |   |   |   |   |         |
| Mammary Gland                 | +                 | + | + | + | + | + | + | + | + | + | + | + | 12      |
| Skin                          | +                 | + | + | + | + | + | + | + | + | + | + | + | 12      |
| <b>Musculoskeletal System</b> |                   |   |   |   |   |   |   |   |   |   |   |   |         |
| Bone, Femur                   | +                 | + | + | + | + | + | + | + | + | + | + | + | 12      |

\* ..Total animals with tissue examined microscopically; Total animals with tumor

M ..Missing tissue

+ ..Tissue examined microscopically

A ..Autolysis precludes evaluation

X ..Lesion present

BLANK ..Not examined microscopically

I ..Insufficient tissue

Experiment Number: 20116-02  
 Test Type: 90-DAY  
 Route: DOSED WATER  
 Species/Strain: Mouse/B6C3F1

**P07: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

Test Compound: Aloe vera whole leaf extract (native)  
 CAS Number: ALOEVLEAFEXT

Date Report Requested: 10/23/2014  
 Time Report Requested: 13:47:07  
 First Dose M/F: NA / NA  
 Lab: NCTR

|                            |               | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |                |  |
|----------------------------|---------------|-------------|---|---|---|---|---|---|---|---|---|---|---|----------------|--|
| <b>B6C3F1 Mouse Female</b> | <b>3% WLN</b> | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0              |  |
|                            |               | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1              |  |
|                            |               | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0              |  |
|                            |               | 0           | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1              |  |
| ANIMAL ID                  |               | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |  |
|                            |               | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                |  |
|                            |               | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |                |  |
|                            |               | 0           | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 |                |  |
|                            |               | 1           | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | <b>*TOTALS</b> |  |

**Nervous System**

|                   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain, Brain Stem | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Brain, Cerebellum | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Brain, Cerebrum   | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Respiratory System**

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung    | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Nose    | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Special Senses System**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**Urinary System**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |

**SYSTEMIC LESIONS**

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**\*\* END OF REPORT \*\***

\* ..Total animals with tissue examined microscopically; Total animals with tumor  
 + ..Tissue examined microscopically  
 X ..Lesion present  
 I ..Insufficient tissue

M ..Missing tissue  
 A ..Autolysis precludes evaluation  
 BLANK ..Not examined microscopically