

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

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**  
Aloe vera whole leaf extract (native)  
**CAS Number:** ALOEVLEAFEXT

**Date Report Requested:** 09/06/2016  
**Time Report Requested:** 10:42:24  
**First Dose M/F:** 11/09/03 / 11/09/03  
**Lab:** NCTR

**NTP Study Number:** C20116B  
**Lock Date:** Not Entered.  
**Cage Range:** ALL  
**Date Range:** ALL  
**Reasons For Removal:** ALL  
**Removal Date Range:** ALL  
**Treatment Groups:** Include ALL  
**Study Gender:** Both  
**TDMSE Version:** 3.0.2.3\_002  
**PWG Approval Date:** NONE

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First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

<b>B6C3F1 MICE MALE</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	0	1	1	1	
<b>CONTROL</b>	ANIMAL ID	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		
		3	3	3	3	4	4	4	4	5	5	5	
		1	2	3	4	1	2	3	4	1	2	3	4
<b>* TOTALS</b>													

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

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Lab: NCTR

B6C3F1 MICE MALE CONTROL	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	0	ANIMAL ID		
		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	0	0			
		0	0	0	0	0	0	0	1	1	1	1			
		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	4		<b>* TOTALS</b>

Heart	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
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**ENDOCRINE SYSTEM**

Adrenal Cortex	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Adrenal Medulla	+	+	+	+	+	M	+	+	+	+	+	+	<b>11</b>
Islets, Pancreatic	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Parathyroid Gland	+	M	+	+	+	+	+	M	+	+	+	+	<b>10</b>
Pituitary Gland	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Thyroid Gland	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>

**GENERAL BODY SYSTEM**

NONE													
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**GENITAL SYSTEM**

Epididymis	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Preputial Gland	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Prostate	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Testes	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>

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 + .. Tissue examined microscopically  
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CAS Number: ALOEVLEAFEXT

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First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

<b>B6C3F1 MICE MALE</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	
<b>CONTROL</b>		0	0	0	0	0	0	0	0	0	0	0	
	ANIMAL ID	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	
												<b>* TOTALS</b>	

**HEMATOPOIETIC SYSTEM**

Bone Marrow	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Lymph Node, Mandibular	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Lymph Node, Mesenteric	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Spleen	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Thymus	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>

**INTEGUMENTARY SYSTEM**

Mammary Gland	M	M	M	M	M	M	M	M	M	M	M	M	<b>0</b>
Skin	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>

**MUSCULOSKELETAL SYSTEM**

Bone, Femur	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
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**NERVOUS SYSTEM**

Brain, Brain Stem	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Brain, Cerebellum	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Brain, Cerebrum	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>

**RESPIRATORY SYSTEM**

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+ .. Tissue examined microscopically  
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Lab: NCTR

B6C3F1 MICE MALE CONTROL	DAY ON TEST	0	0	0	0	0	0	0	0	0	0	0	0	* TOTALS
	ANIMAL ID	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	
		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	
Lung		+	+	+	+	+	+	+	+	+	+	+	+	12
Nose		+	+	+	+	+	+	+	+	+	+	+	+	12
Trachea		+	+	+	+	+	+	+	+	+	+	+	+	12
<b>SPECIAL SENSES SYSTEM</b>														
Eye		+	+	+	+	+	+	+	+	+	+	+	+	12
Harderian Gland		+	+	+	+	+	+	+	+	+	+	+	+	12
<b>URINARY SYSTEM</b>														
Kidney		+	+	+	+	+	+	+	+	+	+	+	+	12
Urinary Bladder		+	+	+	+	+	+	+	+	+	+	+	+	12
<b>SYSTEMIC LESIONS</b>														
Multiple Organ		+	+	+	+	+	+	+	+	+	+	+	+	12

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<b>B6C3F1 MICE MALE</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	0	1	1	1	
<b>1% WLN</b>	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		
		1	1	1	1	2	2	2	2	3	3	3	
		1	2	3	4	1	2	3	4	1	2	3	4
												<b>* TOTALS</b>	

**ALIMENTARY SYSTEM**

Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
Liver	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>

**CARDIOVASCULAR SYSTEM**

NONE

**ENDOCRINE SYSTEM**

NONE

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Preputial Gland									+	+		+	+	<b>4</b>
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**HEMATOPOIETIC SYSTEM**

Spleen	+	+	+	+	+	+	+	+	+	+	+	+	<b>12</b>
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**INTEGUMENTARY SYSTEM**

NONE

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<b>B6C3F1 MICE MALE</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	0	1	1	1	
<b>1% WLN</b>	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		
		1	1	1	1	2	2	2	2	3	3	3	
		1	2	3	4	1	2	3	4	1	2	3	4
<b>* TOTALS</b>													

**MUSCULOSKELETAL SYSTEM**

NONE

**NERVOUS SYSTEM**

NONE

**RESPIRATORY SYSTEM**

NONE

**SPECIAL SENSES SYSTEM**

NONE

**URINARY SYSTEM**

Kidney

+ + + + + + + + + + + +

12

**SYSTEMIC LESIONS**

Multiple Organ

+ + + + + + + + + + + +

12

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|                         |             |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE MALE</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 | 0 | 1 | 1 | 1 |   |
| <b>2% WLN</b>           | ANIMAL ID   | 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 |   |   |
|                         |             | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 1 | 1 | 1 |   |
|                         |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| <b>* TOTALS</b>         |             |   |   |   |   |   |   |   |   |   |   |   |   |

**ALIMENTARY SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |           |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Intestine Large, Cecum | + | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
| Intestine Large, Colon | + | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
| Liver                  | + | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |

**CARDIOVASCULAR SYSTEM**

NONE

**ENDOCRINE SYSTEM**

NONE

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|                 |   |   |  |  |   |  |   |   |  |  |   |          |
|-----------------|---|---|--|--|---|--|---|---|--|--|---|----------|
| Preputial Gland | + | + |  |  | + |  | + | + |  |  | + | <b>6</b> |
|-----------------|---|---|--|--|---|--|---|---|--|--|---|----------|

**HEMATOPOIETIC SYSTEM**

|        |   |   |   |   |   |   |   |   |   |   |   |   |           |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Spleen | + | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|-----------|

**INTEGUMENTARY SYSTEM**

NONE

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|                         |             |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE MALE</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 | 0 | 1 | 1 | 1 |   |
| <b>2% WLN</b>           | ANIMAL ID   | 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 |   |
|                         |             | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 1 | 1 | 1 |   |
|                         |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| <b>* TOTALS</b>         |             |   |   |   |   |   |   |   |   |   |   |   |   |

**MUSCULOSKELETAL SYSTEM**

NONE

**NERVOUS SYSTEM**

NONE

**RESPIRATORY SYSTEM**

NONE

**SPECIAL SENSES SYSTEM**

NONE

**URINARY SYSTEM**

|        |   |   |   |   |   |   |   |   |   |   |   |   |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney | + | + | + | + | + | + | + | + | + | + | + | + |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|

**12**

**SYSTEMIC LESIONS**

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

**12**

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|                         |             |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE MALE</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 | 0 | 1 | 1 | 1 |   |
| <b>3% WLN</b>           | 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 |   |   |
|                         |             | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 9 | 9 | 9 |   |
|                         |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| <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 |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* .. 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: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

|                         |             |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE MALE</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 |   |
| <b>3% WLN</b>           | 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 |   |   |
|                         |             | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 9 | 9 | 9 |   |
|                         |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| <b>* TOTALS</b>         |             |   |   |   |   |   |   |   |   |   |   |   |   |

|       |   |   |   |   |   |   |   |   |   |   |   |   |           |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Heart | + | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|-----------|

**ENDOCRINE SYSTEM**

|                |   |   |   |   |   |   |   |   |   |   |   |           |
|----------------|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Adrenal Cortex | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|----------------|---|---|---|---|---|---|---|---|---|---|---|-----------|

|                 |   |   |   |   |   |   |   |   |   |   |   |           |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Adrenal Medulla | + | + | + | + | + | + | + | + | + | M | + | <b>11</b> |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|-----------|

|                    |   |   |   |   |   |   |   |   |   |   |   |           |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|-----------|

|                   |   |   |   |   |   |   |   |   |   |   |   |           |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Parathyroid Gland | M | + | + | + | + | + | + | + | + | + | + | <b>11</b> |
|-------------------|---|---|---|---|---|---|---|---|---|---|---|-----------|

|                 |   |   |   |   |   |   |   |   |   |   |   |           |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Pituitary Gland | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|-----------|

|               |   |   |   |   |   |   |   |   |   |   |   |           |
|---------------|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Thyroid Gland | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|---------------|---|---|---|---|---|---|---|---|---|---|---|-----------|

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|            |   |   |   |   |   |   |   |   |   |   |   |           |
|------------|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Epididymis | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|------------|---|---|---|---|---|---|---|---|---|---|---|-----------|

|                 |   |   |   |   |   |   |   |   |   |   |   |           |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Preputial Gland | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|-----------|

|          |   |   |   |   |   |   |   |   |   |   |   |           |
|----------|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Prostate | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|----------|---|---|---|---|---|---|---|---|---|---|---|-----------|

|                 |   |   |   |   |   |   |   |   |   |   |   |           |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Seminal Vesicle | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|-----------|

|        |   |   |   |   |   |   |   |   |   |   |   |           |
|--------|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Testes | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|--------|---|---|---|---|---|---|---|---|---|---|---|-----------|

\* .. 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: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

|                         |             |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE MALE</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 | 0 | 1 | 1 | 1 |   |
| <b>3% WLN</b>           | 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 |   |   |
|                         |             | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 9 | 9 | 9 |   |
|                         |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| <b>* TOTALS</b>         |             |   |   |   |   |   |   |   |   |   |   |   |   |

**HEMATOPOIETIC SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | 12 |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | 12 |

**INTEGUMENTARY SYSTEM**

|               |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland | M | M | M | M | M | M | M | M | M | M | M | 0  |
| Skin          | + | + | + | + | + | + | + | + | + | + | + | 12 |

**MUSCULOSKELETAL SYSTEM**

|             |   |   |   |   |   |   |   |   |   |   |   |    |
|-------------|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone, Femur | + | + | + | + | + | + | + | + | + | + | + | 12 |
|-------------|---|---|---|---|---|---|---|---|---|---|---|----|

**NERVOUS SYSTEM**

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

**RESPIRATORY SYSTEM**

\* .. 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: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

| B6C3F1 MICE MALE<br>3% WLN   | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                 |  |
|------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|-----------------|--|
|                              | ANIMAL ID   | 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 |                 |  |
|                              |             | 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 | 4               |  |
|                              |             |   |   |   |   |   |   |   |   |   |   |   | <b>* TOTALS</b> |  |
| Lung                         |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b>       |  |
| Nose                         |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b>       |  |
| Trachea                      |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b>       |  |
| <b>SPECIAL SENSES SYSTEM</b> |             |   |   |   |   |   |   |   |   |   |   |   |                 |  |
| Eye                          |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b>       |  |
| Harderian Gland              |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b>       |  |
| <b>URINARY SYSTEM</b>        |             |   |   |   |   |   |   |   |   |   |   |   |                 |  |
| Kidney                       |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b>       |  |
| Urinary Bladder              |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b>       |  |
| <b>SYSTEMIC LESIONS</b>      |             |   |   |   |   |   |   |   |   |   |   |   |                 |  |
| Multiple Organ               |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b>       |  |

\*\*\* 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: MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

|                           |             |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE FEMALE</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 |   |
| <b>CONTROL</b>            | ANIMAL ID   | 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 |   |   |
|                           |             | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 8 | 8 | 8 |   |
|                           |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| <b>* TOTALS</b>           |             |   |   |   |   |   |   |   |   |   |   |   |   |

**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 |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* .. 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: MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

| B6C3F1 MICE FEMALE<br>CONTROL | 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 |          |
|                               | 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 |          |
| Heart                         | +           | + | + | + | + | + | + | + | + | + | + | + | 12       |
| <b>ENDOCRINE SYSTEM</b>       |             |   |   |   |   |   |   |   |   |   |   |   |          |
| Adrenal Cortex                | +           | + | + | + | + | + | + | + | + | + | + | + | 12       |
| Adrenal Medulla               | +           | + | + | + | + | + | + | M | + | + | + | + | 11       |
| Islets, Pancreatic            | +           | + | + | + | + | + | + | + | + | + | + | + | 12       |
| 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       |

\* .. 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: MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

| B6C3F1 MICE FEMALE<br>CONTROL | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | * TOTALS |
|-------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                               | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
| Lymph Node, Mandibular        |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 12       |
| Lymph Node, Mesenteric        |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 12       |
| Spleen                        |             | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 12       |
| Thymus                        |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 12       |
| <b>INTEGUMENTARY SYSTEM</b>   |             |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Mammary Gland                 |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 12       |
| Skin                          |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 12       |
| <b>MUSCULOSKELETAL SYSTEM</b> |             |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Bone, Femur                   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 12       |
| <b>NERVOUS SYSTEM</b>         |             |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Brain, Brain Stem             |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 12       |
| Brain, Cerebellum             |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 12       |
| Brain, Cerebrum               |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 12       |
| <b>RESPIRATORY SYSTEM</b>     |             |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Lung                          |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 12       |
| Nose                          |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 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

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

| B6C3F1 MICE FEMALE<br>CONTROL | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | * TOTALS |
|-------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                               | ANIMAL ID   | 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 | 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 |          |
| Trachea                       |             | + | + | + | + | + | + | + | + | + | + | + | + | 12       |
| <b>SPECIAL SENSES SYSTEM</b>  |             |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Eye                           |             | + | + | + | + | + | + | + | + | + | + | + | + | 12       |
| Harderian Gland               |             | + | + | + | + | + | + | + | + | + | + | + | + | 12       |
| <b>URINARY SYSTEM</b>         |             |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Kidney                        |             | + | + | + | + | + | + | + | + | + | + | + | + | 12       |
| Urinary Bladder               |             | + | + | + | + | + | + | + | + | + | + | + | + | 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

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

|                           |             |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE FEMALE</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 |   |
| <b>1% WLN</b>             | 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 |   |   |
|                           |             | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 |   |
|                           |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| <b>* TOTALS</b>           |             |   |   |   |   |   |   |   |   |   |   |   |   |

**ALIMENTARY SYSTEM**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |           |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Intestine Large, Cecum | + | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
| Intestine Large, Colon | + | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
| Liver                  | + | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |

**CARDIOVASCULAR SYSTEM**

NONE

**ENDOCRINE SYSTEM**

|                 |  |  |  |  |  |  |  |  |  |  |  |  |          |
|-----------------|--|--|--|--|--|--|--|--|--|--|--|--|----------|
| Adrenal Cortex  |  |  |  |  |  |  |  |  |  |  |  |  | <b>1</b> |
| Adrenal Medulla |  |  |  |  |  |  |  |  |  |  |  |  | <b>0</b> |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

NONE

**HEMATOPOIETIC SYSTEM**

|        |   |   |   |   |   |   |   |   |   |   |   |   |           |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Spleen | + | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|-----------|

**INTEGUMENTARY SYSTEM**

\* .. 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: MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

|                           |             |   |   |   |   |   |   |   |   |   |   |                 |   |
|---------------------------|-------------|---|---|---|---|---|---|---|---|---|---|-----------------|---|
| <b>B6C3F1 MICE FEMALE</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               |   |
| <b>1% WLN</b>             | 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 |                 |   |
|                           |             | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6               |   |
|                           |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3               | 4 |
|                           |             |   |   |   |   |   |   |   |   |   |   | <b>* TOTALS</b> |   |

NONE

**MUSCULOSKELETAL SYSTEM**

NONE

**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  
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: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

|                           |             |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE FEMALE</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 |   |
| <b>2% WLN</b>             | ANIMAL ID   | 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 | 3 | 3 | 3 | 3 | 4 | 4 | 4 |   |
|                           |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| <b>* TOTALS</b>           |             |   |   |   |   |   |   |   |   |   |   |   |   |

**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

\* .. 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: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

|                           |             |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE FEMALE</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 |   |
| <b>2% WLN</b>             | ANIMAL ID   | 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 | 3 | 3 | 3 | 3 | 4 | 4 | 4 |   |
|                           |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| <b>* TOTALS</b>           |             |   |   |   |   |   |   |   |   |   |   |   |   |

**MUSCULOSKELETAL SYSTEM**

NONE

**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: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

|                           |             |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>B6C3F1 MICE FEMALE</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 |   |
| <b>3% WLN</b>             | ANIMAL ID   | 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 |   |   |
|                           |             | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 2 | 2 | 2 |   |
|                           |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| <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 |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* .. 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: MICE/B6C3F1

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

| B6C3F1 MICE FEMALE<br>3% WLN | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |           |                 |
|------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|-----------|-----------------|
|                              | ANIMAL ID   | 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 |           |                 |
|                              |             | 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 | 1 | 2 | 2 | 2 |           |                 |
|                              |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4         | <b>* TOTALS</b> |
| Heart                        |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |                 |
| <b>ENDOCRINE SYSTEM</b>      |             |   |   |   |   |   |   |   |   |   |   |   |           |                 |
| Adrenal Cortex               |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |                 |
| Adrenal Medulla              |             | + | M | + | + | + | + | + | + | + | + | + | <b>11</b> |                 |
| Islets, Pancreatic           |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |                 |
| Parathyroid Gland            |             | + | + | + | M | + | + | + | + | + | + | M | <b>10</b> |                 |
| Pituitary Gland              |             | + | M | + | + | + | + | + | + | + | + | + | <b>11</b> |                 |
| Thyroid Gland                |             | + | + | + | M | + | + | + | + | + | + | + | <b>11</b> |                 |
| <b>GENERAL BODY SYSTEM</b>   |             |   |   |   |   |   |   |   |   |   |   |   |           |                 |
| NONE                         |             |   |   |   |   |   |   |   |   |   |   |   |           |                 |
| <b>GENITAL SYSTEM</b>        |             |   |   |   |   |   |   |   |   |   |   |   |           |                 |
| Clitoral Gland               |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |                 |
| Ovary                        |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |                 |
| Uterus                       |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |                 |
| <b>HEMATOPOIETIC SYSTEM</b>  |             |   |   |   |   |   |   |   |   |   |   |   |           |                 |
| Bone Marrow                  |             | + | + | + | + | + | + | + | + | + | + | + | <b>12</b> |                 |

\* .. 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: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

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First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

| B6C3F1 MICE FEMALE<br>3% WLN  | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | * TOTALS |
|-------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                               | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
| 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       |
| <b>NERVOUS SYSTEM</b>         |             |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Brain, Brain Stem             |             | + | + | + | + | + | + | + | + | + | + | + | + | 12       |
| Brain, Cerebellum             |             | + | + | + | + | + | + | + | + | + | + | + | + | 12       |
| Brain, Cerebrum               |             | + | + | + | + | + | + | + | + | + | + | + | + | 12       |
| <b>RESPIRATORY SYSTEM</b>     |             |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Lung                          |             | + | + | + | + | + | + | + | + | + | + | + | + | 12       |
| Nose                          |             | + | + | + | + | + | + | + | + | + | + | + | + | 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

Test Type: 90-DAY

Route: DOSED WATER

Species/Strain: MICE/B6C3F1

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Aloe vera whole leaf extract (native)

CAS Number: ALOEVLEAFEXT

Date Report Requested: 09/06/2016

Time Report Requested: 10:42:24

First Dose M/F: 11/09/03 / 11/09/03

Lab: NCTR

| B6C3F1 MICE FEMALE<br>3% WLN | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | * TOTALS |
|------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                              | ANIMAL ID   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
| Trachea                      |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 12       |
| <b>SPECIAL SENSES SYSTEM</b> |             |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Eye                          |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 12       |
| Harderian Gland              |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 12       |
| <b>URINARY SYSTEM</b>        |             |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Kidney                       |             | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 12       |
| Urinary Bladder              |             | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 12       |
| <b>SYSTEMIC LESIONS</b>      |             |   |   |   |   |   |   |   |   |   |   |   |   |          |
| 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