

**Experiment Number:** 10260 - 01

**Test Type:** Chronic PN

**Route:** DOSED FEED

**Species/Strain:** RATS/HSD

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

2-Hydroxy-4-methoxybenzophenone

**CAS Number:** 131-57-7

**Date Report Requested:** 12/17/2019

**Time Report Requested:** 15:52:30

**First Dose M/F:** 11/08/10 / 11/09/10

**Lab:** BAT

Final 3 - Core Only

**NTP Study Number:** C10260

**Lock Date:** 07/22/2014

**Cage Range:** ALL

**Date Range:** ALL

**Reasons For Removal:** 25021 TSAC                                    25020 NATD    25019 MSAC

**Removal Date Range:** ALL

**Treatment Groups:** Include ALL

**Study Gender:** Both

**TDMSE Version:** 3.0.2.3\_002

**PWG Approval Date:** 10/18/2016

Note: Animals arranged according to days on test.

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 Lab: BAT

HARLAN SPRAGUE DAWLEY RATS MALE 0 ppm Male	DAY ON TEST																									males (cont...)	
		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	
ANIMAL ID	5	5	5	6	6	6	6	6	6	6	6	6	6	6	7	7	7	7	7	7	7	7	7	7	7	7	7
	0	4	7	2	6	6	7	7	8	9	9	9	9	0	0	0	0	0	0	0	0	0	0	0	0	0	
	8	0	7	6	6	0	3	5	0	2	4	5	7	8	9	9	0	5	4	5	2	3	3	4	2	4	
	4	3	4	2	5	2	0	2	1	3	0	5	4	5	2	3	3	2	3	6	5	0	5	6	7	5	
	4	1	9	8	4	0	8	2	8	7	9	0	7	7	3	2	3	6	5	0	5	6	7	5	6		

## ALIMENTARY SYSTEM

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Ileum Adenocarcinoma, Metastatic, Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X
Intestine Small, Jejunum Adenocarcinoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X
Liver	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Mesentery	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Pancreas Acinus, Adenoma Acinus, Adenoma, Multiple	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X
Salivary Glands	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+

\* .. 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

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2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

DAY ON TEST																									
	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
HARLAN SPRAGUE DAWLEY RATS MALE	5	5	5	6	6	6	6	6	6	6	6	6	6	6	6	7	7	7	7	7	7	7	7	7	7
0 ppm Male	0	4	7	2	6	6	7	7	8	9	9	9	9	9	0	7	0	0	1	5	1	2	2	2	2
ANIMAL ID	8	0	7	6	6	0	3	5	0	2	4	5	5	7	8	9	9	9	5	4	2	4	2	9	9
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	4	3	4	2	5	2	0	2	1	3	0	5	4	5	2	3	3	3	4	2	4	0	0	0	1
	4	1	9	8	4	0	8	2	8	7	9	0	7	7	3	2	3	6	5	0	5	6	7	5	6

males  
(cont...)

## CARDIOVASCULAR SYSTEM

Blood Vessel

+ +

Heart

+ +

Adenocarcinoma, Metastatic, Mammary Gland  
Schwannoma Malignant

X

## ENDOCRINE SYSTEM

Adrenal Cortex  
Adenoma

+ + + + + + + + X X + + + + + + + + + + + + + + + + + + +

Adrenal Medulla  
Pheochromocytoma Benign  
Pheochromocytoma Malignant

+ +

X

X

X

X

X

Islets, Pancreatic  
Adenoma

+ +

X

X

Parathyroid Gland  
Carcinoma, Metastatic, Thyroid Gland

+ +

X

Pituitary Gland  
Pars Distalis, Adenoma  
Pars Intermedia, Adenoma

+ +

X

X

X

X

X

X

Thyroid Gland  
Carcinoma, Metastatic, Thyroid Gland  
Bilateral, C-cell, Adenoma  
C-cell, Adenoma

+ +

X

X

X

X

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

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

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I .. Insufficient tissue



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 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
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 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>0 ppm Male | DAY ON TEST<br>ANIMAL ID |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |
|--|--------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|
|  |                          | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    |
|  |                          | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7                  |
|  |                          | 0 | 4 | 7 | 2 | 6 | 6 | 7 | 7 | 8 | 9 | 9 | 9 | 0 | 7 | 0 | 0 | 0 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2                  |
|  |                          | 8 | 0 | 7 | 6 | 6 | 0 | 3 | 5 | 0 | 2 | 4 | 5 | 7 | 8 | 9 | 9 | 5 | 5 | 4 | 4 | 2 | 2 | 9 | 9 |                    |
|  |                          | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    |
|  |                          | 4 | 3 | 4 | 2 | 5 | 2 | 0 | 2 | 1 | 3 | 0 | 5 | 4 | 5 | 2 | 3 | 3 | 4 | 2 | 4 | 0 | 0 | 0 | 1 |                    |
|  |                          | 4 | 1 | 9 | 8 | 4 | 0 | 8 | 2 | 8 | 7 | 9 | 0 | 7 | 7 | 3 | 2 | 3 | 6 | 5 | 0 | 5 | 6 | 7 | 5 |                    |

Lymph Node, Mediastinal

+

Adenocarcinoma, Metastatic, Intestine Small,  
Jejunum

X

Lymph Node, Mesenteric

+

Adenocarcinoma, Metastatic, Intestine Small,  
Jejunum

X

Spleen

+

Thymus

+

## INTEGUMENTARY SYSTEM

Mammary Gland

+

Adenocarcinoma

X

Fibroadenoma

X

Skin

+

Keratoacanthoma

X

Squamous Cell Papilloma

X

Subcutaneous Tissue, Fibroma

+

Subcutaneous Tissue, Lipoma

X

## MUSCULOSKELETAL SYSTEM

Bone

+

Skeletal Muscle

+

## NERVOUS SYSTEM

Brain

+

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

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

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**Test Type:** Chronic PN

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**Species/Strain:** RATS/HSD

**Date Report Requested:** 12/17/2019

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**First Dose M/F:** 11/08/10 / 11/09/10

## Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>0 ppm Male | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  |             | 0<br>5<br>0<br>8      | 0<br>5<br>4<br>0      | 0<br>5<br>7<br>7      | 0<br>6<br>2<br>6      | 0<br>6<br>6<br>0      | 0<br>6<br>7<br>3      | 0<br>6<br>9<br>5      | 0<br>6<br>9<br>4      | 0<br>6<br>9<br>5      | 0<br>7<br>0<br>7      | 0<br>7<br>8<br>7      | 0<br>7<br>9<br>9      | 0<br>7<br>9<br>5      | 0<br>7<br>1<br>5      | 0<br>7<br>2<br>4      | 0<br>7<br>2<br>4      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      |
| ANIMAL ID  |             | 0<br>0<br>0<br>4<br>4 | 0<br>0<br>0<br>3<br>1 | 0<br>0<br>0<br>4<br>9 | 0<br>0<br>0<br>2<br>8 | 0<br>0<br>0<br>5<br>8 | 0<br>0<br>0<br>2<br>0 | 0<br>0<br>0<br>1<br>8 | 0<br>0<br>0<br>3<br>7 | 0<br>0<br>0<br>0<br>9 | 0<br>0<br>0<br>5<br>0 | 0<br>0<br>0<br>4<br>7 | 0<br>0<br>0<br>5<br>7 | 0<br>0<br>0<br>3<br>3 | 0<br>0<br>0<br>4<br>6 | 0<br>0<br>0<br>2<br>5 | 0<br>0<br>0<br>4<br>0 | 0<br>0<br>0<br>0<br>6 | 0<br>0<br>0<br>0<br>7 | 0<br>0<br>0<br>0<br>5 | 0<br>0<br>0<br>0<br>6 |
|  |             | 0<br>0<br>0<br>4<br>4 | 0<br>0<br>0<br>3<br>1 | 0<br>0<br>0<br>4<br>9 | 0<br>0<br>0<br>2<br>8 | 0<br>0<br>0<br>5<br>8 | 0<br>0<br>0<br>2<br>0 | 0<br>0<br>0<br>1<br>8 | 0<br>0<br>0<br>3<br>7 | 0<br>0<br>0<br>0<br>9 | 0<br>0<br>0<br>5<br>0 | 0<br>0<br>0<br>4<br>7 | 0<br>0<br>0<br>5<br>7 | 0<br>0<br>0<br>3<br>3 | 0<br>0<br>0<br>4<br>6 | 0<br>0<br>0<br>2<br>5 | 0<br>0<br>0<br>4<br>0 | 0<br>0<br>0<br>0<br>6 | 0<br>0<br>0<br>0<br>7 | 0<br>0<br>0<br>0<br>5 | 0<br>0<br>0<br>0<br>6 |

## Multiple Organ Mesothelioma Malignant

**males**  
**(cont...)**

\* .. 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: 10260 - 01  
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 Route: DOSED FEED  
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 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>0 ppm Male | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  |                       | 0<br>7<br>2<br>9      |                       |                       |
| ANIMAL ID  | 0<br>0<br>0<br>1<br>9 | 0<br>0<br>0<br>2<br>1 | 0<br>0<br>0<br>2<br>9 | 0<br>0<br>0<br>3<br>8 | 0<br>0<br>0<br>3<br>9 | 0<br>0<br>0<br>4<br>3 | 0<br>0<br>0<br>5<br>0 | 0<br>0<br>0<br>6<br>1 | 0<br>0<br>0<br>7<br>1 | 0<br>0<br>0<br>7<br>4 | 0<br>0<br>0<br>8<br>4 | 0<br>0<br>0<br>9<br>6 |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |

## ALIMENTARY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |              |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------|
| Esophagus   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Intestine Large, Cecum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Intestine Large, Colon  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Intestine Small, Duodenum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Intestine Small, Ileum<br>Adenocarcinoma, Metastatic, Intestine Small,<br>Jejunum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1      |
| Intestine Small, Jejunum<br>Adenocarcinoma  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1      |
| Liver   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Mesentery   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1            |
| Pancreas<br>Aacinus, Adenoma<br>Aacinus, Adenoma, Multiple                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>2<br>3 |
| Salivary Glands   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Stomach, Forestomach  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |
| Stomach, Glandular  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50           |

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

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X .. Lesion present

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**Test Type:** Chronic PN

**Route: DOSED FEED**

**Species/Strain:** RATS/HSD

## 2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

**Date Report Requested:** 12/17/2019

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**First Dose M/F:** 11/08/10 / 11/09/10

## Lab: BAT

| DAY ON TEST |   | HARLAN SPRAGUE DAWLEY RATS<br>MALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |
|-------------|---|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|             |   | 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 | 2 | 2 | 2 | 2 | 2 | 2 | * TOTALS |
| 9           | 9 | 9                                  | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |   |          |
| 0 ppm Male  |   | 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 | 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                                  | 2 | 2 | 2 | 2 | 3 | 4 | 5 | 6 | 1 | 1 | 1 | 1 | 3 | 3 | 5 | 5 | 0 | 0 | 4 | 4        |
|             |   | 9                                  | 1 | 7 | 9 | 8 | 3 | 9 | 0 | 1 | 1 | 4 | 7 | 4 | 6 | 9 | 3 | 5 | 1 | 2 | 3 | 5        |
|             |   |                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
|             |   |                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
|             |   |                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
|             |   |                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
|             |   |                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |

## CARDIOVASCULAR SYSTEM

# **ENDOCRINE 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

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Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>0 ppm Male | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|
|  |                       | 0<br>7<br>2<br>9      |                       |          |
| ANIMAL ID  | 0<br>0<br>0<br>1<br>9 | 0<br>0<br>0<br>0<br>1 |          |
| C-cell, Carcinoma                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |

## GENERAL BODY SYSTEM

|            |   |   |
|------------|---|---|
| Peritoneum | + | 1 |
|------------|---|---|

## GENITAL SYSTEM

|  |   |    |
|--|---|----|
| Coagulating Gland  |   | 0  |
| Epididymis   | + | 50 |
| Penis  |   | 2  |
| Preputial Gland<br>Duct, Carcinoma   | + | 49 |
|  | X | 1  |
| Prostate   | + | 50 |
| Seminal Vesicle<br>Adenocarcinoma, Metastatic, Intestine Small,<br>Jejunum | + | 50 |
|  | 1 |    |
| Testes<br>Interstitial Cell, Adenoma                                       | + | 50 |
|  | X | 1  |

## HEMATOPOIETIC SYSTEM

|                        |   |    |
|------------------------|---|----|
| Bone Marrow            | + | 50 |
| Lymph Node             | + | 4  |
| Lymph Node, Mandibular | + | 50 |

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>0 ppm Male        | DAY ON TEST<br>ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | * TOTALS |   |   |
|---|--------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|----|----------|---|---|
|   |                          | 0<br>7<br>2<br>9 |   |    |          |   |   |
| Lymph Node, Mediastinal                                 |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1        |   |   |
| Adenocarcinoma, Metastatic, Intestine Small,<br>Jejunum |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1        |   |   |
| Lymph Node, Mesenteric                                  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |          |   |   |
| Adenocarcinoma, Metastatic, Intestine Small,<br>Jejunum |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 1        |   |   |
| Spleen  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 50 |          |   |   |
| Thymus  |                          | +                | +                | +                | +                | +                | +                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | 46 |          |   |   |
| <b>INTEGUMENTARY SYSTEM</b>                             |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |          |   |   |
| Mammary Gland   |                          | +                | +                | +                | +                | +                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +  | 49       |   |   |
| Adenocarcinoma  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | 2        |   |   |
| Fibroadenoma  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | X        | 2 |   |
| Skin  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +  | 50       |   |   |
| Keratoacanthoma   |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | X        | 2 |   |
| Squamous Cell Papilloma                                 |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    | X        | 2 |   |
| Subcutaneous Tissue, Fibroma                            |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |          | 3 |   |
| Subcutaneous Tissue, Lipoma                             |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |          | X | 2 |
| <b>MUSCULOSKELETAL SYSTEM</b>                           |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |          |   |   |
| Bone  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +  | 50       |   |   |
| Skeletal Muscle   |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |          | 2 |   |
| <b>NERVOUS SYSTEM</b>                                   |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |    |          |   |   |
| Brain   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +  | 50       |   |   |

\* .. 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:** 10260 - 01

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

**Test Type:** Chronic PN

**Route: DOSED FEED**

**Species/Strain:** RATS/HSD

**Date Report Requested:** 12/17/2019

**Time Report Requested:** 15:52:30

**First Dose M/F:** 11/08/10 / 11/09/10

## Lab: BAT

\* Total animals with tissue examined microscopically: Total animals with tumor

± = Tissue examined microscopically

X Lesion present

X .. Lesion present

M Missing tissue

A .. Autolysis precludes evaluation

**BLANK** Not examined microscopically

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## Lab: BAT

Multiple Organ  
Mesothelioma Malignant

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+ .. Tissue examined microscopically

X .. Lesion present

#### I.. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

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### 2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

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## Lab: BAT

# ALIMENTARY SYSTEM

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

+ .. Tissue examined microscopically

X .. Lesion present

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CAS Number: 131-57-7

**Date Report Requested:** 12/17/2019

**Time Report Requested:** 15:52:30

**First Dose M/F:** 11/08/10 / 11/09/10

## Lab: BAT

| DAY ON TEST |   | HARLAN SPRAGUE DAWLEY RATS<br>MALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |
|-------------|---|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|
|             |   | 1000 ppm Male                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
|             |   | 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           | 2 | 4                                  | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7                  | 7 |
| 6           | 3 | 6                                  | 8 | 7 | 9 | 9 | 1 | 1 | 2 | 2 | 3 | 3 | 8 | 8 | 0 | 2 | 6 | 6 | 7 | 8 | 1 | 5                  | 6 |
| 2           | 9 | 4                                  | 1 | 2 | 2 | 2 | 3 | 8 | 8 | 0 | 0 | 0 | 3 | 3 | 3 | 3 | 3 | 3 | 8 | 1 | 5 | 6                  | 9 |
| 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  | 0 |
| 0           | 0 | 0                                  | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0                  | 0 |
| 8           | 7 | 8                                  | 8 | 8 | 0 | 6 | 6 | 6 | 9 | 7 | 8 | 6 | 0 | 6 | 0 | 7 | 9 | 0 | 6 | 7 | 9 | 6                  | 7 |
| 2           | 3 | 0                                  | 1 | 7 | 7 | 4 | 6 | 6 | 9 | 1 | 5 | 5 | 2 | 8 | 9 | 8 | 6 | 3 | 3 | 6 | 4 | 9                  | 0 |

NONE

## **GENITAL SYSTEM**

## **HEMATOPOIETIC SYSTEM**

## **INTEGUMENTARY 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

**DE** **W** **W** **W** Not examined microscopically

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Lab: BAT

| DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|             | 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           | 2 | 4 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| 6           | 3 | 6 | 8 | 7 | 9 | 9 | 1 | 1 | 4 | 5 | 6 | 7 | 8 | 8 | 9 | 9 | 0 | 8 | 1 | 1 | 5 | 2 | 2 | 2 |
| 2           | 9 | 4 | 1 | 2 | 2 | 3 | 8 | 8 | 0 | 2 | 6 | 3 | 3 | 3 | 3 | 3 | 8 | 1 | 5 | 6 | 9 | 2 | 9 | 2 |
| 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |
|             | 8 | 7 | 8 | 8 | 0 | 6 | 6 | 6 | 9 | 7 | 8 | 6 | 0 | 6 | 0 | 7 | 9 | 0 | 6 | 7 | 9 | 6 | 7 | 7 |
|             | 2 | 3 | 0 | 1 | 7 | 7 | 4 | 6 | 9 | 1 | 5 | 5 | 2 | 8 | 9 | 8 | 6 | 3 | 3 | 6 | 4 | 9 | 0 | 5 |

males  
(cont...)

Melanoma Nos

X

Squamous Cell Carcinoma

Squamous Cell Papilloma

Subcutaneous Tissue, Fibroma

X

## MUSCULOSKELETAL SYSTEM

Bone

+ +

## NERVOUS SYSTEM

Brain

+ +

Adenocarcinoma, Metastatic, Zymbal'S Gland

X

Glioma Nos

Meningioma Malignant

+ +

X

Peripheral Nerve

+

Spinal Cord

+

## RESPIRATORY SYSTEM

Lung

+ +

Adenocarcinoma, Metastatic, Zymbal'S Gland

X

Pheochromocytoma Malignant, Metastatic,

Adrenal Medulla

+ +

Nose

+ +

Trachea

+ +

## SPECIAL SENSES SYSTEM

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

M .. Missing tissue

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**First Dose M/F:** 11/08/10 / 11/09/10

## Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE | 1000 ppm Male | DAY ON TEST | ANIMAL ID |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |
|------------------------------------|---------------|-------------|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|
|                                    |               |             | 0         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  |   |
| 1                                  | 2             | 4           | 4         | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7                  | 7 |
| 6                                  | 3             | 6           | 8         | 7 | 9 | 2 | 2 | 3 | 8 | 1 | 8 | 0 | 2 | 6 | 3 | 3 | 3 | 8 | 1 | 5 | 6 | 2 | 9                  | 2 |
| 2                                  | 9             | 4           | 1         | 2 | 2 | 3 | 8 | 1 | 8 | 0 | 0 | 2 | 6 | 3 | 3 | 3 | 8 | 1 | 5 | 6 | 2 | 9 | 2                  | 9 |
| 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  | 0 |
| 0                                  | 0             | 0           | 0         | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0                  | 0 |
| 8                                  | 7             | 8           | 8         | 8 | 0 | 6 | 6 | 6 | 9 | 7 | 8 | 6 | 0 | 6 | 1 | 0 | 7 | 9 | 0 | 6 | 7 | 9 | 6                  | 7 |
| 2                                  | 3             | 0           | 1         | 7 | 7 | 4 | 6 | 6 | 9 | 1 | 5 | 5 | 2 | 8 | 9 | 8 | 6 | 3 | 6 | 4 | 9 | 0 | 7                  | 5 |

## Eye

## Harderian Gland

## Zymbal's Gland Adenocarcinoma

- 7 -

## **URINARY SYSTEM**

Kidney

## Urinary Bladder

## **SYSTEMIC LESIONS**

## Multiple Organ

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

+ .. Tissue examined microscopically

X .. Lesion present

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| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1000 ppm Male | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  | * TOTALS |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|----------|
|   |                       | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      |                       |  |          |
| ANIMAL ID   | 0<br>0<br>0<br>8<br>7 | 0<br>0<br>0<br>9<br>8 | 0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>9<br>7 | 0<br>0<br>0<br>8<br>7 | 0<br>0<br>0<br>8<br>7 | 0<br>0<br>0<br>8<br>6 | 0<br>0<br>0<br>9<br>6 | 0<br>0<br>0<br>9<br>6 | 0<br>0<br>0<br>8<br>5 |  |          |
|   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |          |

### ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Esophagus                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Cecum                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Colon                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Rectum                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Small, Duodenum                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Small, Ileum                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Small, Jejunum<br>Adenocarcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Liver<br>Hepatocellular Carcinoma          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Mesentery<br>Hemangiosarcoma               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Pancreas<br>Mixed Tumor Benign             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Acinus, Adenoma                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Acinus, Adenoma, Multiple                  | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4 |
| Acinus, Carcinoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Salivary Glands                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Stomach, Forestomach                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |

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+ .. Tissue examined microscopically

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|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|--|---|
|   |                       | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      |                       |          |  |   |
| ANIMAL ID   | 0<br>0<br>0<br>8<br>7 | 0<br>0<br>0<br>9<br>8 | 0<br>0<br>0<br>9<br>1 | 0<br>0<br>0<br>9<br>2 | 0<br>0<br>0<br>9<br>3 | 0<br>0<br>0<br>9<br>4 | 0<br>0<br>0<br>9<br>5 | 0<br>0<br>0<br>9<br>6 | 0<br>0<br>0<br>9<br>7 | 0<br>0<br>0<br>9<br>8 | 0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>9<br>0 | 0<br>0<br>0<br>9<br>1 | 0<br>0<br>0<br>9<br>1 | 0<br>0<br>0<br>9<br>0 | * TOTALS |  |   |
| Stomach, Glandular                                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |  |   |
| <b>CARDIOVASCULAR SYSTEM</b>                        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  |   |
| Blood Vessel  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |  |   |
| Heart   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |  |   |
| <b>ENDOCRINE SYSTEM</b>                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  |   |
| Adrenal Cortex                                      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |  |   |
| Adenoma   |                       | X                     |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  | 4 |
| Adrenal Medulla                                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |  |   |
| Pheochromocytoma Benign                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  | 4 |
| Pheochromocytoma Malignant                          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  | 1 |
| Islets, Pancreatic                                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |  |   |
| Adenoma   |                       | X                     |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  | 4 |
| Parathyroid Gland                                   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 47       |  |   |
| Pituitary Gland                                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |  |   |
| Adenocarcinoma, Metastatic, Zymbal's Gland          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  | 1 |
| Pars Distalis, Adenoma                              | X                     | X                     |                       |                       | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | 13                    |          |  |   |
| Pars Intermedia, Adenoma                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  | 2 |
| Thyroid Gland                                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |  |   |
| C-cell, Adenoma                                     |                       | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     |                       | 10       |  |   |

**GENERAL BODY 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1000 ppm Male | DAY ON TEST |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                  |   | * TOTALS |
|---|-------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|------------------|---|----------|
|   |             | 0<br>7<br>2<br>9           | 0<br>7<br>2<br>9           | 0<br>7<br>2<br>9           | 0<br>7<br>2<br>9           | 0<br>7<br>3<br>0           | 0<br>7<br>3<br>0 |   |          |
| ANIMAL ID   |             | 0<br>0<br>0<br>0<br>8<br>7 | 0<br>0<br>0<br>0<br>9<br>8 | 0<br>0<br>0<br>0<br>9<br>8 | 0<br>0<br>0<br>0<br>9<br>7 | 0<br>0<br>0<br>0<br>9<br>7 | 0<br>0<br>0<br>0<br>8<br>7 | 0<br>0<br>0<br>0<br>8<br>7 | 0<br>0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>0<br>9<br>9 | 0<br>0<br>0<br>0<br>0<br>0 | 0<br>0<br>0<br>0<br>0<br>0 | 0<br>0<br>0<br>0<br>0<br>1 | 0<br>0<br>0<br>0<br>1<br>1 | 0<br>0<br>0<br>0<br>1<br>1 | 0<br>0<br>0<br>0<br>0<br>0 | 0<br>0<br>0<br>0<br>0<br>0 | 0<br>0<br>0<br>0<br>0<br>0 | 0<br>0<br>0<br>0<br>0<br>0 | 0<br>0<br>0<br>0<br>0<br>0 | 0<br>0<br>0<br>0<br>0<br>0 | * TOTALS         |   |          |
|   |             | 7                          | 8                          | 1                          | 2                          | 3                          | 5                          | 2                          | 4                          | 7                          | 6                          | 9                          | 0                          | 7                          | 8                          | 5                          | 6                          | 8                          | 1                          | 2                          | 3                          | 4                          | 0                          | 1                | 4 | 0        |

NONE

### GENITAL SYSTEM

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Epididymis                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Preputial Gland            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Prostate                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Seminal Vesicle            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Testes                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Interstitial Cell, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | X |   |   |   |   |   |   |   |   |    | 3 |

### HEMATOPOIETIC SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node, Mandibular<br>Adenocarcinoma, Metastatic, Zymbal's Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node, Mesenteric   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 1  |
| Spleen   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Thymus   | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | 48 |

### INTEGUMENTARY SYSTEM

|               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Skin          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1000 ppm Male | DAY ON TEST                |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            | * TOTALS |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------|
|   |                            | 0<br>7<br>2<br>9           |                            |          |
| ANIMAL ID   | 0<br>0<br>0<br>0<br>8<br>7 | 0<br>0<br>0<br>0<br>9<br>8 |          |
| Eye   | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | 50       |
| Harderian Gland                                     | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | 50       |
| Zymbal's Gland<br>Adenocarcinoma                    |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            | 1<br>1   |
| <b>URINARY SYSTEM</b>                               |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |          |
| Kidney  | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | 50       |
| Urinary Bladder                                     | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | 50       |
| <b>SYSTEMIC LESIONS</b>                             |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |          |
| Multiple Organ                                      | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | 50       |

\* .. 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: 10260 - 01  
Test Type: Chronic PN  
Route: DOSED FEED  
Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
2-Hydroxy-4-methoxybenzophenone  
CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
Time Report Requested: 15:52:30  
First Dose M/F: 11/08/10 / 11/09/10  
Lab: BAT

| DAY ON TEST                |           | 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 |
|----------------------------|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| HARLAN SPRAGUE DAWLEY RATS | MALE      | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 |
| 3000 ppm Male              |           | 3 | 6 | 8 | 6 | 7 | 7 | 7 | 9 | 2 | 2 | 4 | 4 | 4 | 7 | 7 | 8 | 8 | 9 | 8 | 9 | 9 | 0 | 1 | 2 | 2 | 2 |
|                            | ANIMAL ID | 0 | 7 | 8 | 2 | 0 | 3 | 6 | 6 | 9 | 4 | 4 | 0 | 6 | 1 | 3 | 5 | 0 | 9 | 8 | 2 | 9 | 5 | 2 | 5 | 2 | 2 |
|                            |           | 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 | 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 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                            |           | 5 | 5 | 1 | 2 | 5 | 5 | 2 | 1 | 4 | 4 | 4 | 3 | 2 | 2 | 2 | 2 | 4 | 4 | 3 | 3 | 3 | 1 | 3 | 2 | 1 | 1 |
|                            |           | 9 | 4 | 9 | 3 | 7 | 1 | 0 | 5 | 2 | 1 | 4 | 1 | 5 | 6 | 8 | 4 | 9 | 2 | 3 | 6 | 6 | 5 | 9 | 4 |   |   |

males  
(cont...)

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Acinus, Adenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Acinus, Adenoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

## CARDIOVASCULAR 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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

|                         |   | DAY ON TEST | 0<br>4<br>3<br>0      | 0<br>4<br>6<br>7      | 0<br>5<br>8<br>8      | 0<br>5<br>6<br>2      | 0<br>5<br>7<br>0      | 0<br>5<br>9<br>3      | 0<br>6<br>6<br>4      | 0<br>6<br>4<br>4      | 0<br>6<br>6<br>0      | 0<br>6<br>7<br>1      | 0<br>6<br>4<br>6      | 0<br>6<br>7<br>3      | 0<br>6<br>7<br>5      | 0<br>6<br>8<br>3      | 0<br>6<br>8<br>0      | 0<br>6<br>9<br>8      | 0<br>6<br>9<br>8      | 0<br>6<br>9<br>8      | 0<br>7<br>0<br>2      | 0<br>7<br>1<br>5      | 0<br>7<br>2<br>2      |                       |                    |   |  |     |
|-------------------------|---|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--------------------|---|--|-----|
|                         |   | ANIMAL ID   | 0<br>0<br>1<br>5<br>9 | 0<br>0<br>1<br>1<br>4 | 0<br>0<br>1<br>2<br>9 | 0<br>0<br>1<br>5<br>3 | 0<br>0<br>1<br>5<br>7 | 0<br>0<br>1<br>4<br>1 | 0<br>0<br>1<br>4<br>2 | 0<br>0<br>1<br>3<br>5 | 0<br>0<br>1<br>5<br>2 | 0<br>0<br>1<br>4<br>1 | 0<br>0<br>1<br>6<br>1 | 0<br>0<br>1<br>6<br>6 | 0<br>0<br>1<br>7<br>3 | 0<br>0<br>1<br>7<br>5 | 0<br>0<br>1<br>8<br>2 | 0<br>0<br>1<br>8<br>3 | 0<br>0<br>1<br>8<br>3 | 0<br>0<br>1<br>9<br>6 | 0<br>0<br>1<br>9<br>6 | 0<br>0<br>1<br>9<br>9 | 0<br>0<br>1<br>9<br>9 | 0<br>0<br>1<br>9<br>4 | males<br>(cont...) |   |  |     |
|                         | Blood Vessel                            | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                    |   |  |     |
|                         | Heart                                   | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                    |   |  |     |
| <b>ENDOCRINE SYSTEM</b> |   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |     |
|                         | Adrenal Cortex                          | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | + |  |     |
|                         | Adenoma                                 |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  | X   |
|                         | Adrenal Medulla                         | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | + |  |     |
|                         | Pheochromocytoma Benign                 |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  | X   |
|                         | Bilateral, Pheochromocytoma Benign      |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  | X   |
|                         | Islets, Pancreatic                      | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | + |  |     |
|                         | Adenoma                                 |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  | X   |
|                         | Parathyroid Gland                       | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | M                     | +                     | +                     | +                     | +                  | + |  |     |
|                         | Adenoma                                 |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  | X   |
|                         | Pituitary Gland                         | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | + |  |     |
|                         | Meningioma Malignant, Metastatic, Brain |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  | X X |
|                         | Pars Distalis, Adenoma                  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  | X X |
|                         | Pars Intermedia, Adenoma                |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |     |
|                         | Thyroid Gland                           | +           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | + |  |     |
|                         | Bilateral, C-cell, Adenoma              |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  | X   |
|                         | C-cell, Adenoma                         |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |     |
|                         | C-cell, Carcinoma                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |     |

**GENERAL BODY SYSTEM**

Peritoneum

+

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

### P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3000 ppm Male |   | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |   |
|---|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|---|
|   |   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  | 0 | 0 |
|   |   | ANIMAL ID   | 0 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6                  | 6 | 7 |
| 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 | 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 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1                  | 1 | 1 |
| 5   | 5 | 5           | 1 | 2 | 5 | 5 | 2 | 1 | 4 | 4 | 4 | 3 | 2 | 2 | 2 | 2 | 4 | 4 | 3 | 3 | 3 | 1 | 3 | 2                  | 1 | 1 |
| 9   | 4 | 9           | 3 | 7 | 1 | 0 | 5 | 2 | 1 | 4 | 1 | 5 | 6 | 8 | 4 | 9 | 2 | 3 | 6 | 6 | 5 | 9 | 4 | males<br>(cont...) |   |   |

## GENITAL SYSTEM

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Epididymis                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Preputial Gland            | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Prostate                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Seminal Vesicle            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Testes                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Interstitial Cell, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

## HEMATOPOIETIC SYSTEM

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

## INTEGUMENTARY SYSTEM

|               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

\* .. 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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

| <b>HARLAN SPRAGUE DAWLEY RATS<br/>MALE<br/>3000 ppm Male</b> | <b>ANIMAL ID</b> | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>males<br/>(cont...)</b> |
|--|------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------------|
|  |                  | 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 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7                          |
|  |                  | 3           | 6 | 8 | 6 | 7 | 7 | 7 | 9 | 9 | 2 | 2 | 4 | 4 | 6 | 6 | 7 | 7 | 8 | 8 | 9 | 8 | 9 | 9 | 0 | 1 | 2                          |
|  |                  | 0           | 7 | 8 | 2 | 0 | 3 | 6 | 6 | 9 | 4 | 4 | 0 | 6 | 1 | 3 | 5 | 0 | 8 | 9 | 8 | 2 | 9 | 5 | 5 | 2 |                            |
|  |                  | 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 | 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 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1                          |
|  |                  | 5           | 5 | 1 | 2 | 5 | 5 | 2 | 1 | 4 | 4 | 4 | 3 | 2 | 2 | 2 | 2 | 4 | 4 | 3 | 3 | 3 | 1 | 3 | 2 | 1 | 1                          |
|  |                  | 9           | 4 | 9 | 3 | 7 | 1 | 0 | 5 | 2 | 1 | 4 | 1 | 5 | 6 | 8 | 4 | 9 | 2 | 3 | 6 | 6 | 5 | 9 | 4 |   |                            |

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Skin                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Squamous Cell Papilloma      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |  |
| Subcutaneous Tissue, Fibroma | X |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | X |   |   |   |   |  |

**MUSCULOSKELETAL SYSTEM**

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

## Skeletal Muscle

**NERVOUS SYSTEM**

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Granular Cell Tumor Benign |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Meningioma Malignant       | X |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Nerve Trigeminal                        |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Meningioma Malignant, Metastatic, Brain |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**RESPIRATORY SYSTEM**

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Alveolar/Bronchiolar Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Alveolar/Bronchiolar Adenoma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Alveolar/Bronchiolar Carcinoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Nose                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| DAY ON TEST   |  | HARLAN SPRAGUE DAWLEY RATS MALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------|--|---------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|               |  | 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 |   |   |
| 3000 ppm Male |  | ANIMAL ID                       | 0 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |   |
|               |  | 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 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |   |
|               |  | 5                               | 5 | 5 | 1 | 2 | 5 | 5 | 5 | 2 | 1 | 4 | 4 | 4 | 3 | 2 | 2 | 2 | 2 | 4 | 4 | 3 | 3 | 3 | 1 | 3 | 2 | 1 |
|               |  | 9                               | 4 | 9 | 3 | 7 | 1 | 0 | 5 | 2 | 1 | 4 | 1 | 5 | 6 | 8 | 4 | 9 | 2 | 3 | 6 | 6 | 5 | 9 | 4 |   |   |   |
|               |  | males<br>(cont...)              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

Trachea

+

### SPECIAL SENSES SYSTEM

Eye

+

Harderian Gland

+

Lacrimal Gland

+

### URINARY SYSTEM

Kidney

+

Urinary Bladder

+

### SYSTEMIC LESIONS

Multiple Organ

+

Lymphoma Malignant

+

Mesothelioma Malignant

+

X

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3000 ppm Male | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | * TOTALS |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|----------|
|   |                       | 0<br>7<br>2<br>4      | 0<br>7<br>2<br>9      |                       |    |          |
| ANIMAL ID   | 0<br>0<br>1<br>6<br>0 | 0<br>0<br>1<br>2<br>2 | 0<br>0<br>1<br>3<br>2 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>3<br>4 | 0<br>0<br>1<br>4<br>5 | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>1<br>5<br>2 | 0<br>0<br>1<br>5<br>3 | 0<br>0<br>1<br>5<br>4 | 0<br>0<br>1<br>5<br>5 |    |          |
| Esophagus   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Intestine Large, Cecum                              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Intestine Large, Colon                              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Intestine Large, Rectum                             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Intestine Small, Duodenum                           | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Intestine Small, Ileum                              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Intestine Small, Jejunum                            | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Liver   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Mesentery   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 1  |          |
| Pancreas  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Acinus, Adenoma                                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |    | 2        |
| Acinus, Adenoma, Multiple                           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |    | 3        |
| Salivary Glands                                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Stomach, Forestomach                                | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |
| Stomach, Glandular                                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |

## CARDIOVASCULAR 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3000 ppm Male  | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | * TOTALS |    |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|----------|----|
|  |                       | 0<br>7<br>2<br>4      | 0<br>7<br>2<br>9      |                       |    |          |    |
| ANIMAL ID  | 0<br>0<br>1<br>6<br>0 | 0<br>0<br>1<br>2<br>1 | 0<br>0<br>1<br>2<br>2 | 0<br>0<br>1<br>3<br>2 | 0<br>0<br>1<br>3<br>2 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>3<br>4 | 0<br>0<br>1<br>3<br>4 | 0<br>0<br>1<br>3<br>4 | 0<br>0<br>1<br>3<br>5 | 0<br>0<br>1<br>3<br>5 | 0<br>0<br>1<br>3<br>6 | 0<br>0<br>1<br>3<br>7 | 0<br>0<br>1<br>3<br>8 | 0<br>0<br>1<br>3<br>9 | 0<br>0<br>1<br>4<br>5 |    |          |    |
| Blood Vessel   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |    |
| Heart  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50 |          |    |
| <b>ENDOCRINE SYSTEM</b>  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |          |    |
| Adrenal Cortex<br>Adenoma  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +  | 50       |    |
|  |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |    |          | 3  |
| Adrenal Medulla<br>Pheochromocytoma Benign<br>Bilateral, Pheochromocytoma Benign                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +  | 50       |    |
|  |                       | X                     | X                     |                       |                       | X                     |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |    |          | 11 |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |    |          | 1  |
| Islets, Pancreatic<br>Adenoma  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +  | 50       |    |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |    |          | 4  |
| Parathyroid Gland<br>Adenoma   | +                     | +                     | M                     | +                     | +                     | M                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +  | 45       |    |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |          | 1  |
| Pituitary Gland<br>Meningioma Malignant, Metastatic, Brain<br>Pars Distalis, Adenoma<br>Pars Intermedia, Adenoma | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +  | 50       |    |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |    |          | 1  |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |    |          | 12 |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |    |          | 1  |
| Thyroid Gland<br>Bilateral, C-cell, Adenoma<br>C-cell, Adenoma<br>C-cell, Carcinoma                              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +  | 50       |    |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |    |          | 1  |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |    |          | 7  |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |          | 2  |

**GENERAL BODY SYSTEM**

Peritoneum

1

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3000 ppm Male | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  |        |  | * TOTALS |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|--------|--|----------|
|   |                       | 0<br>7<br>2<br>4      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9 |        |  |          |
| ANIMAL ID   | 0<br>0<br>1<br>6<br>0 | 0<br>0<br>1<br>2<br>2 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>3<br>3 | 0<br>0<br>1<br>4<br>3 | 0<br>0<br>1<br>4<br>4 | 0<br>0<br>1<br>4<br>5 | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>1<br>5<br>1 | 0<br>0<br>1<br>5<br>2 | 0<br>0<br>1<br>5<br>2 | 0<br>0<br>1<br>5<br>3 | 0<br>0<br>1<br>5<br>3 | 0<br>0<br>1<br>5<br>4 | 0<br>0<br>1<br>5<br>4 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>5<br>5 | 0<br>0<br>1<br>5<br>6 |                  |        |  |          |
|   | 0<br>1<br>2<br>4      | 2<br>4                | 7<br>8                | 7<br>8                | 9<br>5                | 6<br>8                | 1<br>2                | 3<br>7                | 3<br>7           | 3<br>7 |  |          |
|   | 1<br>0                | 1<br>0                | 2<br>1                | 2<br>0                | 3<br>9                | 3<br>8                | 4<br>7                | 5<br>8                | 5<br>7                | 5<br>8                | 5<br>7           | 5<br>8 |  |          |
|   | 1<br>0                | 1<br>0                | 2<br>1                | 2<br>0                | 3<br>9                | 3<br>8                | 4<br>7                | 5<br>8                | 5<br>7                | 5<br>8                | 5<br>7           | 5<br>8 |  |          |
|   | 1<br>0                | 1<br>0                | 2<br>1                | 2<br>0                | 3<br>9                | 3<br>8                | 4<br>7                | 5<br>8                | 5<br>7                | 5<br>8                | 5<br>7           | 5<br>8 |  |          |
|   | 1<br>0                | 1<br>0                | 2<br>1                | 2<br>0                | 3<br>9                | 3<br>8                | 4<br>7                | 5<br>8                | 5<br>7                | 5<br>8                | 5<br>7           | 5<br>8 |  |          |

### GENITAL SYSTEM

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Epididymis                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Preputial Gland            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Prostate                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Seminal Vesicle            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Testes                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Interstitial Cell, Adenoma | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

### HEMATOPOIETIC SYSTEM

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymph Node, Mandibular  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node, Mediastinal |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymph Node, Mesenteric  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Spleen                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Thymus                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |

### INTEGUMENTARY SYSTEM

|               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|---------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
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 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3000 ppm Male | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |   |   |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|---|---|
|   |                       | 0<br>7<br>2<br>4      | 0<br>7<br>2<br>9      |                       |          |   |   |
| ANIMAL ID   | 0<br>0<br>1<br>6<br>0 | 0<br>0<br>1<br>2<br>1 | 0<br>0<br>1<br>3<br>2 |          |   |   |
| Skin  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |   |
| Squamous Cell Papilloma                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X        | 2 |   |
| Subcutaneous Tissue, Fibroma                        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 4 |   |
| <b>MUSCULOSKELETAL SYSTEM</b>                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |   |
| Bone  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |   |
| Skeletal Muscle                                     | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   | 1 |
| <b>NERVOUS SYSTEM</b>                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |   |
| Brain   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |   |
| Granular Cell Tumor Benign                          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   | 1 |
| Meningioma Malignant                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   | 3 |
| Nerve Trigeminal                                    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   | 1 |
| Meningioma Malignant, Metastatic, Brain             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   | 1 |
| Peripheral Nerve                                    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   | 1 |
| Spinal Cord   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   | 1 |
| Meningioma Malignant                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   | 1 |
| <b>RESPIRATORY SYSTEM</b>                           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |   |
| Lung  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |   |
| Alveolar/Bronchiolar Adenoma                        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   | 1 |
| Alveolar/Bronchiolar Carcinoma                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   | 1 |
| Nose  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |   |

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

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BLANK .. Not examined microscopically

Experiment Number: 10260 - 01  
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 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| DAY ON TEST                        |  |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |        |        |
|------------------------------------|--|-----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|--------|--------|
|                                    |  | 0<br>7    | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 |          |        |        |
| HARLAN SPRAGUE DAWLEY RATS<br>MALE |  | ANIMAL ID |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |        |
| 3000 ppm Male                      |  | 0<br>0    | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0   |        |        |
|                                    |  | 1<br>1    | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1   |        |        |
|                                    |  | 6<br>2    | 2<br>2 | 2<br>3 | 3<br>3 | 3<br>3 | 3<br>3 | 4<br>4 | 4<br>5 | 5<br>1 | 1<br>1 | 1<br>1 | 2<br>2 | 4<br>4 | 4<br>5 | 5<br>5   | 5<br>5 |        |
|                                    |  | 0<br>1    | 1<br>2 | 2<br>4 | 4<br>7 | 7<br>8 | 8<br>9 | 5<br>5 | 6<br>6 | 8<br>8 | 1<br>1 | 2<br>2 | 3<br>3 | 7<br>7 | 3<br>3 | 7<br>7 | 8<br>8 | 0<br>0 | 2<br>2 | 7<br>7 | 8<br>8 | 0<br>0   | 3<br>3 | 5<br>5 |
| Trachea                            |  | +         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50     |        |
| <b>SPECIAL SENSES SYSTEM</b>       |  |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |        |
| Eye                                |  | +         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50     |        |
| Harderian Gland                    |  | +         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50     |        |
| Lacrimal Gland                     |  | +         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1      |        |
| <b>URINARY SYSTEM</b>              |  |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |        |
| Kidney                             |  | +         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50     |        |
| Urinary Bladder                    |  | +         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50     |        |
| <b>SYSTEMIC LESIONS</b>            |  |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |        |
| Multiple Organ                     |  | +         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50     |        |
| Lymphoma Malignant                 |  |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |        |        |        |          | 1      |        |
| Mesothelioma Malignant             |  |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |        |        |          | 2      |        |

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
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 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
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 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>10000 ppm Male | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|
|  |             | 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                  |   |
| 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 |
|  | 1           | 1 | 1 | 2 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1                  | 1 |

## ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Cecum                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Colon                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Rectum                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Small, Duodenum                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Small, Ileum                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Small, Jejunum<br>Adenocarcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Liver                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Hepatocellular Adenoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |
| Hepatocholangiocarcinoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |
| Mesentery                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |
| Oral Mucosa                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreas                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Mixed Tumor Benign                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Acinus, Adenoma                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |
| Acinus, Adenoma, Multiple                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Salivary Glands                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |

\* .. 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: 10260 - 01  
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 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
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 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>10000 ppm Male           | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |  |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|--|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  |  |
|  | 1           | 1 | 1 | 2 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1                  |  |
| Stomach, Forestomach   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  |  |
| Stomach, Glandular   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  |  |
| Tongue   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |  |
| <b>CARDIOVASCULAR SYSTEM</b>                                   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |  |
| Blood Vessel   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  |  |
| Heart  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  |  |
| <b>ENDOCRINE SYSTEM</b>  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |  |
| Adrenal Cortex<br>Adenoma                                      |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  |  |
| Adrenal Medulla<br>Pheochromocytoma Benign                     |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  |  |
| Islets, Pancreatic<br>Adenoma<br>Carcinoma                     |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X                  |  |
| Parathyroid Gland  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                  |  |
| Pituitary Gland<br>Pars Distalis, Adenoma                      |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X                  |  |
| Thyroid Gland<br>Bilateral, C-cell, Adenoma<br>C-cell, Adenoma |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X                  |  |

\* .. 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: 10260 - 01

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Route: DOSED FEED

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2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

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First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

| DAY ON TEST                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|
|                                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    |
| HARLAN SPRAGUE DAWLEY RATS<br>MALE | 0 | 3 | 3 | 3 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | males<br>(cont...) |
| 10000 ppm Male                     | 0 | 9 | 6 | 0 | 6 | 7 | 9 | 5 | 6 | 5 | 6 | 8 | 8 | 0 | 2 | 4 | 2 | 9 | 2 | 9 |                    |
| ANIMAL ID                          | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | X                  |
| 1                                  | 1 | 1 | 2 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 2 | 1 | 1 | 1 | 1                  |
| 7                                  | 9 | 6 | 1 | 1 | 8 | 8 | 7 | 6 | 7 | 9 | 9 | 2 | 7 | 0 | 9 | 7 | 6 | 7 | 8 | 8 | 9                  |
| 2                                  | 8 | 5 | 6 | 8 | 1 | 2 | 0 | 4 | 1 | 6 | 4 | 0 | 8 | 7 | 9 | 9 | 6 | 3 | 4 | 0 | 6                  |

C-cell, Carcinoma

X

**GENERAL BODY SYSTEM**

Peritoneum

**GENITAL SYSTEM**

Epididymis

+ +

Penis

+

Preputial Gland

+ +

Prostate

M +

Seminal Vesicle

+ +

Testes

+ +

Interstitial Cell, Adenoma

**HEMATOPOIETIC SYSTEM**

Bone Marrow

+ +

Lymph Node

+

Lymph Node, Mandibular

+ +

Lymph Node, Mesenteric

+ +

Spleen

+ +

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

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

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I .. Insufficient tissue

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| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>10000 ppm Male | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |        |        |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--------|--------|
|  |             | 0<br>0<br>5<br>6      | 0<br>3<br>0<br>9      | 0<br>3<br>1<br>6      | 0<br>3<br>8<br>0      | 0<br>5<br>7<br>6      | 0<br>6<br>1<br>7      | 0<br>6<br>2<br>9      | 0<br>6<br>2<br>5      | 0<br>6<br>4<br>6      | 0<br>6<br>8<br>6      | 0<br>6<br>9<br>8      | 0<br>7<br>1<br>0      | 0<br>7<br>1<br>2      | 0<br>7<br>2<br>4      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>9      |        |        |
| ANIMAL ID  |             | 0<br>0<br>1<br>7<br>2 | 0<br>0<br>1<br>9<br>8 | 0<br>0<br>2<br>6<br>5 | 0<br>0<br>2<br>8<br>1 | 0<br>0<br>1<br>1<br>1 |        |        |
|  |             | 1<br>7<br>2           | 1<br>9<br>8           | 1<br>6<br>5           | 1<br>1<br>0           | 1<br>1<br>1           |        |        |
|  |             | 2<br>8                | 5<br>5                | 6<br>6                | 8<br>8                | 1<br>1                | 2<br>0                | 4<br>4                | 1<br>1                | 6<br>6                | 4<br>4                | 0<br>0                | 8<br>8                | 7<br>7                | 9<br>9                | 2<br>2                | 7<br>7                | 0<br>0                | 9<br>9                | 7<br>7                | 6<br>6                | 7<br>7                | 8<br>8                | 8<br>8                | 9<br>9 | 9<br>9 |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |        |        |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |        |        |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |        |        |

males  
(cont...)

|        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Thymus | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

### INTEGUMENTARY SYSTEM

|                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Skin                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Keratoacanthoma                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |
| Subcutaneous Tissue, Fibroma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |
| Subcutaneous Tissue, Hemangioma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |
| Subcutaneous Tissue, Lipoma     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |

### MUSCULOSKELETAL SYSTEM

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Skeletal Muscle |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

### NERVOUS SYSTEM

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Granular Cell Tumor Benign |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |

### RESPIRATORY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hepatocholangiocarcinoma, Metastatic, Liver |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Trachea                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

\* .. 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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>10000 ppm Male | DAY ON TEST<br>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 | 3 | 3 | 3 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |
|  |                          | 5 | 0 | 1 | 8 | 7 | 1 | 2 | 2 | 4 | 4 | 6 | 6 | 9 | 1 | 1 | 2 | 2 | 8 | 9 | 2 | 9 | 2 | 9 | 2 |   |
|  |                          | 6 | 9 | 6 | 0 | 6 | 7 | 9 | 5 | 6 | 5 | 6 | 8 | 8 | 0 | 2 | 4 | 8 | 9 | 2 | 9 | 2 | 9 | 2 | 9 |   |
|  |                          | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|  |                          | 1 | 1 | 1 | 2 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |   |
|  |                          | 7 | 9 | 6 | 1 | 1 | 8 | 8 | 7 | 6 | 7 | 9 | 9 | 2 | 7 | 0 | 9 | 7 | 6 | 7 | 7 | 8 | 8 | 9 | 9 |   |
|  |                          | 2 | 8 | 5 | 6 | 8 | 1 | 2 | 0 | 4 | 1 | 6 | 4 | 0 | 8 | 7 | 9 | 9 | 6 | 3 | 4 | 0 | 6 | 1 | 2 | 3 |

males  
(cont...)

## SPECIAL SENSES SYSTEM

Eye

+ +

Harderian Gland

+ +

## URINARY SYSTEM

Kidney

+ +

Urinary Bladder

+ +

## SYSTEMIC LESIONS

Multiple Organ

+ +

Lymphoma Malignant

X

Mesothelioma Malignant

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>10000 ppm Male | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|--|
|  |             | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      |  |  |
| ANIMAL ID  |             | 0<br>0<br>2<br>0<br>0 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>2<br>2<br>2 | 0<br>0<br>1<br>1<br>1 |  |  |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |

\* TOTALS

## ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Cecum                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Colon                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Rectum                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Duodenum                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Ileum                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Jejunum<br>Adenocarcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Liver                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Hepatocellular Adenoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Hepatocholangiocarcinoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Mesentery                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Oral Mucosa                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Pancreas                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Mixed Tumor Benign                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Acinus, Adenoma                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 6  |
| Acinus, Adenoma, Multiple                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Salivary Glands                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

\* .. 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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

|  | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |          |
|--|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|----------|
|  |             | 0<br>7 |          |          |
| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>10000 ppm Male | ANIMAL ID   | 2<br>9 | 2<br>9 | 2<br>9 | 2<br>9 | 2<br>9 | 3<br>0 | 3<br>1   | * TOTALS |
|  |             | 0<br>0   |          |
|  |             | 2<br>2 | 2<br>2 | 2<br>2 | 2<br>2 | 2<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>1 | 1<br>2 | 2<br>2 | 2<br>2 | 2<br>2 | 2<br>2 | 1<br>1   | 1<br>2   |
|  |             | 0<br>0 | 0<br>1 | 1<br>1 | 1<br>1 | 6<br>6 | 6<br>6 | 7<br>7 | 8<br>9 | 9<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>0 | 0<br>1 | 1<br>6 | 6<br>6 | 6<br>6 | 8<br>8 | 8<br>8 | 8<br>8 | 9<br>9   | 0<br>0   |
|  |             | 0<br>8 | 1<br>1 | 2<br>2 | 4<br>4 | 1<br>1 | 2<br>9 | 7<br>9 | 9<br>0 | 3<br>3 | 4<br>4 | 6<br>6 | 9<br>9 | 0<br>0 | 5<br>5 | 3<br>3 | 7<br>7 | 8<br>8 | 3<br>3 | 4<br>4 | 8<br>8 | 7<br>7   | 2<br>2   |
| Stomach, Forestomach                                 |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |
| Stomach, Glandular                                   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |
| Tongue   |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1        |
| <b>CARDIOVASCULAR SYSTEM</b>                         |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |          |
| Blood Vessel   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |
| Heart  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |
| <b>ENDOCRINE SYSTEM</b>                              |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |          |
| Adrenal Cortex                                       |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |
| Adenoma  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 2        |
| Adrenal Medulla                                      |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |
| Pheochromocytoma Benign                              |             | X      | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 7        |
| Islets, Pancreatic                                   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |
| Adenoma  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1        |
| Carcinoma  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 1        |
| Parathyroid Gland                                    |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | M      | +      | +      | +      | +      | +      | M        | 48       |
| Pituitary Gland                                      |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |
| Pars Distalis, Adenoma                               |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 10       |
| Thyroid Gland  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | 50       |
| Bilateral, C-cell, Adenoma                           |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 2        |
| C-cell, Adenoma                                      |             | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | 6        |

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>10000 ppm Male | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |   |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|---|
|  |                       | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      |                       |          |   |
| ANIMAL ID  | 0<br>0<br>2<br>0<br>0 | 0<br>0<br>2<br>1<br>2 | 0<br>0<br>2<br>1<br>1 |          |   |
| Thymus   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49       |   |
| <b>INTEGUMENTARY SYSTEM</b>                          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| Mammary Gland  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Skin   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Keratoacanthoma                                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |   |
| Subcutaneous Tissue, Fibroma                         |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3        |   |
| Subcutaneous Tissue, Hemangioma                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |   |
| Subcutaneous Tissue, Lipoma                          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |   |
| <b>MUSCULOSKELETAL SYSTEM</b>                        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| Bone   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Skeletal Muscle                                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | +                     |                       |                       |                       |                       |          | 2 |
| <b>NERVOUS SYSTEM</b>                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| Brain  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Granular Cell Tumor Benign                           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |   |
| <b>RESPIRATORY SYSTEM</b>                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| Lung   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Hepatocholangiocarcinoma, Metastatic, Liver          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |   |
| Nose   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Trachea  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

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Experiment Number: 10260 - 01

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2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

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First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>10000 ppm Male | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|
|  |             | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      |                       |          |
| ANIMAL ID  |             | 0<br>0<br>2<br>0<br>0 | 0<br>0<br>2<br>1<br>2 | 0<br>0<br>2<br>1<br>1 |          |
|  |             | 0<br>0<br>8           | 1<br>1<br>8           | 2<br>1<br>1           | 4<br>1<br>1           | 1<br>2<br>9           | 2<br>9<br>7           | 9<br>7<br>9           | 0<br>0<br>3           | 4<br>4<br>9           | 6<br>6<br>9           | 9<br>9<br>0           | 8<br>8<br>0           | 8<br>8<br>0           | 8<br>8<br>1           | 50       |

## SPECIAL SENSES SYSTEM

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

## URINARY SYSTEM

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

## SYSTEMIC LESIONS

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Mesothelioma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  |

\*\*\* 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| DAY ON TEST  |           | HARLAN SPRAGUE DAWLEY RATS FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------|-----------|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|              |           | 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 ppm Female | ANIMAL ID | 3                                 | 3 | 3 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |
|              |           | 4                                 | 7 | 8 | 2 | 6 | 7 | 0 | 4 | 7 | 8 | 9 | 0 | 1 | 1 | 0 | 0 | 1 | 4 | 4 | 6 | 9 | 3 | 3 | 3 | 3 |
|              |           | 4                                 | 9 | 7 | 4 | 6 | 8 | 5 | 1 | 1 | 2 | 6 | 3 | 0 | 0 | 1 | 0 | 1 | 4 | 4 | 4 | 4 | 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 | 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 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|              |           | 7                                 | 6 | 2 | 5 | 2 | 4 | 8 | 7 | 3 | 7 | 5 | 2 | 2 | 5 | 6 | 4 | 4 | 3 | 5 | 5 | 4 | 4 | 4 | 5 | 5 |
|              |           | 7                                 | 8 | 5 | 6 | 2 | 9 | 0 | 1 | 2 | 8 | 2 | 3 | 7 | 9 | 3 | 5 | 8 | 4 | 0 | 7 | 1 | 3 | 4 | 3 | 4 |

females  
(cont...)

## ALIMENTARY SYSTEM

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

## CARDIOVASCULAR SYSTEM

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

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A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

|                            | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|----------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                            |             | 3 | 3 | 3 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 |
| HARLAN SPRAGUE DAWLEY RATS |             | 4 | 7 | 8 | 2 | 6 | 7 | 0 | 4 | 7 | 8 | 9 | 0 | 1 | 1 | 0 | 0 | 4 | 4 | 4 | 4 | 3 | 3 | 3 | 3 |
| FEMALE                     |             | 4 | 9 | 7 | 4 | 6 | 8 | 5 | 1 | 1 | 2 | 6 | 3 | 0 | 0 | 1 | 1 | 4 | 4 | 4 | 4 | 3 | 0 | 0 | 0 |
| <b>0 ppm Female</b>        |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 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 | 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 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|                            |             | 7 | 6 | 2 | 5 | 2 | 4 | 8 | 7 | 3 | 7 | 5 | 2 | 2 | 5 | 6 | 4 | 4 | 3 | 5 | 5 | 4 | 4 | 5 | 5 |
|                            |             | 7 | 8 | 5 | 6 | 2 | 9 | 0 | 1 | 2 | 8 | 2 | 3 | 7 | 9 | 3 | 5 | 8 | 4 | 0 | 7 | 1 | 3 | 4 | 3 |
|                            |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

females  
(cont...)

|                            |   |
|----------------------------|---|
| Heart                      | +                           |
| <b>ENDOCRINE SYSTEM</b>    |   |
| Adrenal Cortex             | +                           |
| Adenoma                    | X   |
| Adrenal Medulla            | +                           |
| Pheochromocytoma Benign    | X   |
| Pheochromocytoma Malignant | X   |
| Islets, Pancreatic         | +                           |
| Carcinoma                  | X   |
| Parathyroid Gland          | M + + + + + + + + + + M + M + + + + + + + + + + + + M                     |
| Adenoma                    | X   |
| Pituitary Gland            | +                           |
| Pars Distalis, Adenoma     | X               |
| Thyroid Gland              | + |
| C-cell, Adenoma            | X X   |
| C-cell, Carcinoma          | X X   |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Clitoral Gland

+ + + + + + + + + + M + + + + + + + + + + + + + M + + + + + + + +

\* .. 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: 10260 - 01  
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Route: DOSED FEED  
Species/Strain: RATS/HSD

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2-Hydroxy-4-methoxybenzophenone  
CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
Time Report Requested: 15:52:30  
First Dose M/F: 11/08/10 / 11/09/10  
Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0 ppm Female | DAY ON TEST<br>ANIMAL ID | female<br>(cont...) |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |     |
|--|--------------------------|---------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|-----|
|  |                          | 0<br>3<br>4<br>4    | 0<br>3<br>8<br>9 | 0<br>4<br>2<br>7 | 0<br>4<br>6<br>6 | 0<br>5<br>7<br>5 | 0<br>5<br>4<br>1 | 0<br>5<br>7<br>1 | 0<br>5<br>8<br>2 | 0<br>5<br>9<br>6 | 0<br>6<br>0<br>3 | 0<br>6<br>1<br>0 | 0<br>6<br>4<br>1 | 0<br>6<br>4<br>1 | 0<br>6<br>4<br>1 | 0<br>6<br>6<br>4 | 0<br>6<br>6<br>4 | 0<br>6<br>6<br>4 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 |   |     |
| Ovary  |                          | +                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + |     |
| Uterus   |                          | +                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | X |     |
| Adenocarcinoma                                       |                          |                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | X   |
| Polyp Stromal  |                          |                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | X X |
| Polyp Stromal, Multiple                              |                          |                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |     |
| Vagina   |                          | +                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + |     |
| <b>HEMATOPOIETIC SYSTEM</b>                          |                          |                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |     |
| Bone Marrow  |                          | +                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + |     |
| Lymph Node, Mandibular                               |                          | +                   | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + |     |
| Lymph Node, Mesenteric                               |                          | +                   | +                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + |     |
| Spleen   |                          | +                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + |     |
| Thymus   |                          | +                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | M                | +                | +                | +                | +                | +                | +                | +                | + |     |
| <b>INTEGUMENTARY SYSTEM</b>                          |                          |                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |     |
| Mammary Gland  |                          | +                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + |     |
| Adenocarcinoma                                       |                          |                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |     |
| Fibroadenoma   |                          |                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |     |
| Fibroadenoma, Multiple                               |                          |                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |     |
| Skin   |                          | +                   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + |     |
| <b>MUSCULOSKELETAL SYSTEM</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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

|                                    | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |
|------------------------------------|-------------|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|
|                                    |             | 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 ppm Female                       | ANIMAL ID   | 3                                 | 3 | 3 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7                    | 7 |
|                                    |             | 4                                 | 4 | 7 | 8 | 2 | 6 | 7 | 0 | 4 | 7 | 1 | 1 | 2 | 6 | 3 | 0 | 1 | 0 | 1 | 4 | 4 | 4 | 3 | 3 | 3                    | 3 |
| Bone                               |             | 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                    |   |
| <b>NERVOUS SYSTEM</b>              |             |                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Brain                              |             | +                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Granular Cell Tumor Benign         |             | +                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| <b>RESPIRATORY SYSTEM</b>          |             |                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Lung                               |             | +                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | +                    |   |
| Nose                               |             | +                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Trachea                            |             | +                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| <b>SPECIAL SENSES SYSTEM</b>       |             |                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Eye                                |             | +                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Harderian Gland                    |             | +                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| <b>URINARY SYSTEM</b>              |             |                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Kidney                             |             | +                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Adenocarcinoma, Metastatic, Uterus |             |                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |                      |   |
| Urinary Bladder                    |             | +                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | +                    |   |
| <b>SYSTEMIC LESIONS</b>            |             |                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Multiple Organ                     |             | +                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Adenolipoma                        |             |                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |

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

+ .. Tissue examined microscopically

X .. Lesion present

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2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0 ppm Female | DAY ON TEST           |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | * TOTALS |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------|
|  |                       | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 |                  |          |
| ANIMAL ID  | 0<br>0<br>2<br>7<br>9 | 0<br>0<br>2<br>2<br>8 | 0<br>0<br>2<br>2<br>9 | 0<br>0<br>2<br>3<br>1 | 0<br>0<br>2<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>6 |          |
|  | 0<br>0<br>2<br>7<br>9 | 0<br>0<br>2<br>2<br>8 | 0<br>0<br>2<br>2<br>9 | 0<br>0<br>2<br>3<br>1 | 0<br>0<br>2<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>6 |          |
|  | 0<br>0<br>2<br>7<br>9 | 0<br>0<br>2<br>2<br>8 | 0<br>0<br>2<br>2<br>9 | 0<br>0<br>2<br>3<br>1 | 0<br>0<br>2<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>6 |          |
|  | 0<br>0<br>2<br>7<br>9 | 0<br>0<br>2<br>2<br>8 | 0<br>0<br>2<br>2<br>9 | 0<br>0<br>2<br>3<br>1 | 0<br>0<br>2<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>6 |          |
|  | 0<br>0<br>2<br>7<br>9 | 0<br>0<br>2<br>2<br>8 | 0<br>0<br>2<br>2<br>9 | 0<br>0<br>2<br>3<br>1 | 0<br>0<br>2<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>4 | 0<br>0<br>3<br>6 |          |

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

## CARDIOVASCULAR SYSTEM

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* .. 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:** 10260 - 01

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

**Test Type:** Chronic PN

**Route: DOSED FEED**

**Species/Strain:** RATS/HSD

**Date Report Requested:** 12/17/2019

**Time Report Requested:** 15:52:30

**First Dose M/F:** 11/08/10 / 11/09/10

## Lab: BAT

## **GENERAL BODY SYSTEM**

NONE

## **GENITAL SYSTEM**

### Clitoral Gland

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0 ppm Female | DAY ON TEST           |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |    | * TOTALS |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--------|----|----------|
|  |                       | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>2 |        |    |          |
| ANIMAL ID  | 0<br>0<br>2<br>7<br>9 | 0<br>0<br>2<br>2<br>8 | 0<br>0<br>2<br>2<br>9 | 0<br>0<br>2<br>3<br>1 | 0<br>0<br>2<br>3<br>3 | 0<br>0<br>3<br>3 | 0<br>0<br>3<br>5 | 0<br>0<br>2<br>7 | 0<br>0<br>8      | 0<br>0<br>9      | 0<br>1           | 0<br>2           | 0<br>4           | 0<br>6           | 0<br>6           | 0<br>6           | 0<br>7           | 0<br>7 |    |          |
| Ovary  | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 50 |          |
| Uterus   | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 50 |          |
| Adenocarcinoma                                       |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |    | 5        |
| Polyp Stromal  |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |    | 7        |
| Polyp Stromal, Multiple                              |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |    | 1        |
| Vagina   | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 50 |          |
| <b>HEMATOPOIETIC SYSTEM</b>                          |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |    |          |
| Bone Marrow  | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | +  | 50       |
| Lymph Node, Mandibular                               | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | +  | 49       |
| Lymph Node, Mesenteric                               | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | +  | 49       |
| Spleen   | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | +  | 50       |
| Thymus   | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | +  | 49       |
| <b>INTEGUMENTARY SYSTEM</b>                          |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |    |          |
| Mammary Gland  | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | +  | 50       |
| Adenocarcinoma                                       |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |    | 7        |
| Fibroadenoma   |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  | X                | X                | X                |                  |                  |                  |                  |                  |                  |                  |                  |        |    | 23       |
| Fibroadenoma, Multiple                               |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  | X                | X                | X                |                  |                  |                  |                  |                  |                  |                  |                  |        |    | 9        |
| Skin   | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | +  | 50       |
| <b>MUSCULOSKELETAL SYSTEM</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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

|                                    | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |   |
|------------------------------------|-------------|-----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|
|                                    |             | 0<br>7<br>3<br>0                  | 0<br>7<br>3<br>1      |                       |                       |   |
|                                    | ANIMAL ID   | 0<br>0<br>2<br>7<br>9             | 0<br>0<br>2<br>2<br>8 | 0<br>0<br>2<br>2<br>9 | 0<br>0<br>2<br>3<br>1 | 0<br>0<br>2<br>3<br>3 | 0<br>0<br>3<br>3<br>5 | 0<br>0<br>2<br>3<br>7 | 0<br>0<br>2<br>3<br>8 | 0<br>0<br>3<br>3<br>9 | 0<br>0<br>2<br>4<br>0 | 0<br>0<br>2<br>4<br>1 | 0<br>0<br>2<br>4<br>2 | 0<br>0<br>2<br>4<br>4 | 0<br>0<br>2<br>4<br>7 | 0<br>0<br>2<br>4<br>8 | 0<br>0<br>2<br>5<br>0 | 0<br>0<br>2<br>5<br>5 | 0<br>0<br>2<br>6<br>5 | 0<br>0<br>2<br>6<br>7 | 0<br>0<br>2<br>7<br>0 | 0<br>0<br>2<br>7<br>2 |   |
| Bone                               |             | +                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |   |
| <b>NERVOUS SYSTEM</b>              |             |                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Brain                              |             | +                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |   |
| Granular Cell Tumor Benign         |             |                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1 |
| <b>RESPIRATORY SYSTEM</b>          |             |                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Lung                               |             | +                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |   |
| Nose                               |             | +                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |   |
| Trachea                            |             | +                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |   |
| <b>SPECIAL SENSES SYSTEM</b>       |             |                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Eye                                |             | +                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |   |
| Harderian Gland                    |             | +                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |   |
| <b>URINARY SYSTEM</b>              |             |                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Kidney                             |             | +                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |   |
| Adenocarcinoma, Metastatic, Uterus |             |                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1 |
| Urinary Bladder                    |             | +                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49                    |   |
| <b>SYSTEMIC LESIONS</b>            |             |                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Multiple Organ                     |             | +                                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |   |
| Adenolipoma                        |             |                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1 |

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1000 ppm Female | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| ANIMAL ID   | 3           | 3 | 4 | 4 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|   | 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 |

females  
(cont...)

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Leiomyoma                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Schwannoma Malignant      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Liver                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pancreas             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

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

+ .. Tissue examined microscopically

X .. Lesion present

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 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1000 ppm Female | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
| ANIMAL ID   | 3           | 3 | 4 | 4 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|   | 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 |   |
|   | 8           | 0 | 8 | 3 | 4 | 9 | 7 | 8 | 1 | 5 | 2 | 4 | 5 | 2 | 7 | 4 | 8 | 0 | 4 | 1 | 4 | 3 | 0 | 0 | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|   | 3           | 3 | 2 | 3 | 3 | 2 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 2 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 2 |   |
|   | 2           | 2 | 9 | 2 | 0 | 9 | 2 | 0 | 1 | 9 | 8 | 8 | 8 | 0 | 0 | 8 | 0 | 1 | 8 | 9 | 9 | 9 | 1 | 1 | 8 |   |
|   | 1           | 2 | 9 | 7 | 3 | 5 | 0 | 6 | 8 | 8 | 4 | 7 | 7 | 8 | 8 | 1 | 3 | 9 | 9 | 0 | 1 | 2 | 4 | 5 | 6 |   |

females  
(cont...)

Heart

+

## ENDOCRINE SYSTEM

Adrenal Cortex  
Adenoma

+

X

Adrenal Medulla  
Pheochromocytoma Benign  
Pheochromocytoma Complex

+

X

Islets, Pancreatic

+

Parathyroid Gland

+

M

Pituitary Gland  
Pars Distalis, Adenoma

+

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

Thyroid Gland  
C-cell, Adenoma  
C-cell, Carcinoma

+

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

## GENERAL BODY SYSTEM

NONE

## GENITAL SYSTEM

Clitoral Gland

+

Ovary

+

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
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 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1000 ppm Female | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 3           | 3 | 4 | 4 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|   | 0           | 3 | 5 | 8 | 0 | 2 | 1 | 1 | 4 | 4 | 7 | 7 | 8 | 9 | 1 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|   | 8           | 0 | 8 | 3 | 4 | 9 | 7 | 8 | 1 | 5 | 2 | 4 | 0 | 4 | 1 | 4 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 3           | 3 | 2 | 3 | 3 | 2 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 2 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 2 |
|   | 2           | 2 | 9 | 2 | 0 | 9 | 2 | 0 | 1 | 9 | 8 | 8 | 8 | 0 | 8 | 0 | 1 | 8 | 9 | 9 | 9 | 1 | 1 | 1 | 8 |
|   | 1           | 2 | 9 | 7 | 3 | 5 | 0 | 6 | 8 | 8 | 4 | 7 | 7 | 8 | 8 | 1 | 3 | 9 | 0 | 1 | 2 | 4 | 5 | 6 | 1 |

females  
(cont...)

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Uterus                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Adenocarcinoma          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |  |
| Polyp Stromal           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Polyp Stromal, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Sarcoma Stromal         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

|        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Vagina | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

## HEMATOPOIETIC SYSTEM

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

## INTEGUMENTARY SYSTEM

|                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Mammary Gland            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Adenocarcinoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |  |
| Adenocarcinoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Fibroadenoma             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Fibroadenoma, Multiple   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Skin                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Basal Cell Adenoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

\* .. 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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

| DAY ON TEST                       |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------------------|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                   | 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 |
| 3                                 | 3         | 4 | 4 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| 0                                 | 0         | 3 | 5 | 8 | 0 | 2 | 1 | 1 | 4 | 4 | 7 | 7 | 8 | 9 | 1 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
| 8                                 | 0         | 8 | 3 | 4 | 9 | 7 | 8 | 1 | 5 | 5 | 2 | 4 | 0 | 4 | 4 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| 1000 ppm Female                   | 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 |
| HARLAN SPRAGUE DAWLEY RATS FEMALE | 3         | 3 | 2 | 3 | 3 | 2 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 2 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 2 | 2 | 2 |
|                                   | 2         | 2 | 9 | 2 | 0 | 9 | 2 | 0 | 1 | 9 | 8 | 8 | 8 | 0 | 0 | 8 | 0 | 1 | 8 | 9 | 9 | 9 | 1 | 1 | 1 | 8 | 8 | 1 |
|                                   | 1         | 2 | 9 | 7 | 3 | 5 | 0 | 6 | 8 | 8 | 4 | 7 | 7 | 8 | 8 | 1 | 3 | 9 | 9 | 0 | 1 | 2 | 4 | 5 | 6 | 1 | 2 | 1 |

females  
(cont...)

**MUSCULOSKELETAL SYSTEM**

Bone

+ +

**NERVOUS SYSTEM**

Brain

+ +

**RESPIRATORY SYSTEM**

Lung

+ +

Nose

+ +

Trachea

+ +

**SPECIAL SENSES SYSTEM**

Eye

+ +

Harderian Gland

+ +

**URINARY SYSTEM**

Kidney

+ +

Renal Tubule, Adenoma

Urinary Bladder

+ +

**SYSTEMIC LESIONS**

Multiple Organ

+ +

\* .. 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

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First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

|                 | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |
|-----------------|-------------|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
|                 |             | 0                                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      |
| 1000 ppm Female | 3           | 3                                 | 4 | 4 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7                    |
|                 | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      |
|                 | 3           | 3                                 | 2 | 3 | 3 | 2 | 3 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 2 | 3 | 3 | 2 | 2 | 2 | 2 | 3 | 3 | 2 |                      |
|                 | 2           | 2                                 | 9 | 2 | 0 | 9 | 2 | 0 | 1 | 9 | 8 | 8 | 8 | 0 | 0 | 8 | 0 | 1 | 8 | 9 | 9 | 9 | 1 | 1 | 1 |                      |
|                 | 1           | 2                                 | 9 | 7 | 3 | 5 | 0 | 6 | 8 | 8 | 4 | 7 | 7 | 8 | 8 | 1 | 3 | 9 | 0 | 1 | 2 | 4 | 5 | 6 | 1 |                      |

Leukemia Mononuclear

X

\* .. 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: 10260 - 01  
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 Route: DOSED FEED  
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| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1000 ppm Female | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  | * TOTALS |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|----------|
|   |                       | 0<br>7<br>3<br>1      |                       |  |          |
| ANIMAL ID   | 0<br>0<br>2<br>8<br>2 | 0<br>0<br>2<br>8<br>3 | 0<br>0<br>2<br>8<br>5 | 0<br>0<br>2<br>9<br>6 |  |          |

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Intestine Small, Jejunum<br>Leiomyoma<br>Schwannoma Malignant | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | 2  |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | 1  |

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Liver                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Pancreas             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Salivary Glands      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Forestomach | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Glandular   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

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

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

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|   | DAY ON TEST |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |                       |                       |                       |
|---|-------------|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|   |             | 0<br>7<br>3<br>1   | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      |                       |                       |                       |                       |                       |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1000 ppm Female | ANIMAL ID   | 0<br>0<br>2<br>8<br>2  | 0<br>0<br>2<br>8<br>3 | 0<br>0<br>2<br>8<br>5 | 0<br>0<br>2<br>8<br>6 | 0<br>0<br>2<br>9<br>3 | 0<br>0<br>2<br>9<br>4 | 0<br>0<br>2<br>9<br>6 | 0<br>0<br>2<br>9<br>7 | 0<br>0<br>2<br>9<br>0 | 0<br>0<br>2<br>9<br>2 | 0<br>0<br>2<br>9<br>3 | 0<br>0<br>2<br>9<br>4 | 0<br>0<br>2<br>9<br>5 | 0<br>0<br>2<br>9<br>9 | 0<br>0<br>2<br>9<br>0 | 0<br>0<br>2<br>9<br>2 | 0<br>0<br>2<br>9<br>3 | 0<br>0<br>2<br>9<br>1 | 0<br>0<br>2<br>9<br>1 | 0<br>0<br>2<br>9<br>2 | 0<br>0<br>2<br>9<br>5 | 0<br>0<br>2<br>9<br>6 | 0<br>0<br>2<br>9<br>8 | 0<br>0<br>2<br>9<br>9 |
|   |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |                       |
|   |             | <b>ENDOCRINE SYSTEM</b>  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|   |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |                       |
|   |             | Adrenal Cortex<br>Adenoma  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | X                     | 2                     |                       |
|   |             | Adrenal Medulla<br>Pheochromocytoma Benign<br>Pheochromocytoma Complex | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | X                     | 50                    |                       |
|   |             | Islets, Pancreatic   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50                    |                       |
|   |             | Parathyroid Gland  | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | 47                    |                       |
|   |             | Pituitary Gland<br>Pars Distalis, Adenoma                              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | X                     | 50                    |                       |
|   |             | Thyroid Gland<br>C-cell, Adenoma<br>C-cell, Carcinoma                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | X                     | 25                    |                       |
|   |             | X  | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | 11                    |                       |                       |
|   |             | X  | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | X                     | 1                     |                       |                       |
| <b>GENERAL BODY SYSTEM</b>                              |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| NONE  |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| <b>GENITAL SYSTEM</b>                                   |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| Clitoral Gland  |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| Ovary   |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1000 ppm Female | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | * TOTALS |   |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|----------|---|
|   |                       | 0<br>7<br>3<br>1      |                       |          |          |   |
| ANIMAL ID   | 0<br>0<br>2<br>8<br>2 | 0<br>0<br>2<br>8<br>3 | 0<br>0<br>2<br>8<br>5 | 0<br>0<br>2<br>9<br>3 | 0<br>0<br>2<br>9<br>6 | 0<br>0<br>2<br>9<br>7 | 0<br>0<br>2<br>9<br>0 | 0<br>0<br>2<br>9<br>2 | 0<br>0<br>2<br>9<br>3 | 0<br>0<br>2<br>9<br>4 | 0<br>0<br>2<br>9<br>5 | 0<br>0<br>2<br>9<br>6 | 0<br>0<br>2<br>9<br>7 | 0<br>0<br>2<br>9<br>0 | 0<br>0<br>2<br>9<br>1 | * TOTALS |          |   |
| Uterus  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |          |   |
| Adenocarcinoma  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |          | 3        |   |
| Polyp Stromal   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 12       |   |
| Polyp Stromal, Multiple                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 3        |   |
| Sarcoma Stromal   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1        |   |
| Vagina  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |          |   |
| <b>HEMATOPOIETIC SYSTEM</b>                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |   |
| Bone Marrow   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |   |
| Lymph Node  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          | 1 |
| Lymph Node, Mandibular                                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |   |
| Lymph Node, Mesenteric                                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |   |
| Spleen  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |   |
| Thymus  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |   |
| <b>INTEGUMENTARY SYSTEM</b>                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |   |
| Mammary Gland   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |   |
| Adenocarcinoma  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |          | 3        |   |
| Adenocarcinoma, Multiple                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2        |   |
| Fibroadenoma  | X                     | X                     | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 14       |   |
| Fibroadenoma, Multiple                                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 16       |   |
| Skin  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |   |
| Basal Cell Adenoma                                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1        |   |

\* .. 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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

|  | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |  |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|--|
|  |             | 0<br>7<br>3<br>1      |                       |                       |          |  |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br><b>1000 ppm Female</b> | ANIMAL ID   | 0<br>0<br>2<br>8<br>2 | 0<br>0<br>2<br>8<br>3 | 0<br>0<br>2<br>8<br>5 | 0<br>0<br>2<br>9<br>6 | 0<br>0<br>2<br>9<br>3 | 0<br>0<br>2<br>9<br>4 | 0<br>0<br>2<br>9<br>6 | 0<br>0<br>2<br>9<br>7 | 0<br>0<br>2<br>0<br>0 | 0<br>0<br>3<br>0<br>3 | 0<br>0<br>3<br>2<br>4 | 0<br>0<br>3<br>2<br>4 | 0<br>0<br>3<br>0<br>5 | 0<br>0<br>3<br>0<br>9 | 0<br>0<br>3<br>1<br>0 | 0<br>0<br>3<br>1<br>1 | 0<br>0<br>3<br>1<br>1 | 0<br>0<br>3<br>1<br>2 | 0<br>0<br>3<br>1<br>2 | 0<br>0<br>3<br>1<br>5 | 0<br>0<br>3<br>2<br>6 | 0<br>0<br>3<br>2<br>8 | 0<br>0<br>3<br>2<br>9 | 0<br>0<br>3<br>2<br>0 | * TOTALS |  |
|  |             | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2        |  |
|  |             | Leukemia Mononuclear  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |  |

\* .. 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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

|                 |  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |
|-----------------|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
|                 |  |             | 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 |   |                      |
| 3000 ppm Female |  | ANIMAL ID   | 1 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |   |                      |
|                 |  |             | 0 | 9 | 1 | 2 | 4 | 0 | 4 | 6 | 8 | 0 | 0 | 9 | 9 | 9 | 9 | 2 | 1 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |                      |
|                 |  |             | 9 | 8 | 1 | 5 | 0 | 3 | 1 | 7 | 1 | 7 | 9 | 9 | 9 | 9 | 2 | 1 | 2 | 5 | 3 | 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 | 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 |   |                      |
|                 |  |             | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |   |                      |
|                 |  |             | 5 | 6 | 7 | 7 | 7 | 5 | 3 | 5 | 5 | 7 | 3 | 4 | 5 | 4 | 7 | 6 | 3 | 3 | 4 | 4 | 5 | 5 | 6 | 6 | 6 | 6 | 6 |   |                      |
|                 |  |             | 4 | 3 | 4 | 2 | 7 | 8 | 4 | 3 | 1 | 8 | 2 | 9 | 7 | 0 | 1 | 6 | 1 | 3 | 7 | 8 | 0 | 9 | 0 | 1 | 2 | 2 |   |   |                      |

## ALIMENTARY SYSTEM

Esophagus

+ +

Intestine Large, Cecum

+ +

Intestine Large, Colon

+ +

Intestine Large, Rectum

+ +

Intestine Small, Duodenum

+ +

Intestine Small, Ileum

+ +

Intestine Small, Jejunum

+ +

Liver

+ +

Hepatocellular Adenoma

X

Pancreas

+ +

Schwannoma Malignant

X

Acinus, Adenoma

+ +

Salivary Glands

+ +

Stomach, Forestomach

+ +

Stomach, Glandular

+ +

## CARDIOVASCULAR SYSTEM

Blood Vessel

+ +

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

**P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)**  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3000 ppm Female | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|
|   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      |   |
|   | ANIMAL ID   | 0 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7                    |   |
|   |             | 9 | 8 | 1 | 2 | 5 | 4 | 0 | 3 | 1 | 7 | 1 | 9 | 9 | 9 | 9 | 2 | 1 | 2 | 5 | 0 | 0 | 3 | 0 | 0 | 0                    |   |
|   |             | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3                    |   |
|   |             | 5 | 6 | 7 | 7 | 7 | 5 | 3 | 5 | 5 | 7 | 3 | 4 | 5 | 4 | 7 | 6 | 3 | 3 | 4 | 5 | 5 | 6 | 6 | 6 | 6                    |   |
|   |             | 4 | 3 | 4 | 2 | 7 | 8 | 4 | 3 | 1 | 8 | 2 | 9 | 7 | 0 | 1 | 6 | 1 | 3 | 7 | 8 | 0 | 9 | 0 | 1 | 2                    |   |
| Heart   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| <b>ENDOCRINE SYSTEM</b>                                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Adrenal Cortex  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Adenoma   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Adrenal Medulla   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Pheochromocytoma Benign                                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Bilateral, Pheochromocytoma Malignant                   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Islets, Pancreatic                                      |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Adenoma   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |
| Parathyroid Gland                                       |             | + | + | M | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | M                    |   |
| Pituitary Gland   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| Pars Distalis, Adenoma                                  |             |   |   |   |   |   |   |   |   | X | X |   |   | X | X |   | X | X |   | X |   |   |   |   |   |                      |   |
| Pars Distalis, Adenoma, Multiple                        |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      | X |
| Thyroid Gland   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |   |
| C-cell, Adenoma   |             |   |   |   |   |   |   |   |   | X |   | X |   | X | X |   | X |   | X |   | X |   | X |   | X | X                    |   |

### GENERAL BODY SYSTEM

NONE

### GENITAL SYSTEM

Clitoral Gland

Ovary

+

+

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
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P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3000 ppm Female | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|   |             | 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           | 9 | 8 | 1 | 2 | 5 | 4 | 0 | 3 | 1 | 7 | 1 | 7 | 9 | 9 | 9 | 9 | 2 | 1 | 2 | 5 | 3 | 0 | 0 | 3 | 0 |
|   | 1           | 0 | 9 | 8 | 1 | 2 | 5 | 4 | 0 | 3 | 1 | 7 | 1 | 7 | 9 | 9 | 9 | 2 | 1 | 2 | 5 | 3 | 0 | 0 | 3 | 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 |
|   | 3           | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
|   | 5           | 6 | 7 | 7 | 7 | 5 | 3 | 5 | 5 | 7 | 3 | 4 | 5 | 4 | 7 | 6 | 3 | 3 | 3 | 4 | 5 | 5 | 6 | 6 | 6 | 6 |
|   | 4           | 3 | 4 | 2 | 7 | 8 | 4 | 3 | 1 | 8 | 2 | 9 | 7 | 0 | 1 | 6 | 1 | 3 | 7 | 8 | 0 | 9 | 0 | 1 | 2 |   |

females  
(cont...)

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Uterus                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |  |
| Polyp Stromal           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   |   |  |
| Polyp Stromal, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Sarcoma Stromal         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Schwannoma Malignant    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Vagina                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

### HEMATOPOIETIC SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
| Bone Marrow  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Pheochromocytoma Malignant, Metastatic,<br>Adrenal Medulla |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |  |  |
| Lymph Node   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Lymph Node, Mandibular                                     | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Lymph Node, Mesenteric                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Spleen   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Thymus   | + | + | + | M | M | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + |  |  |

### INTEGUMENTARY SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
| Mammary Gland          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Adenocarcinoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |  |  |
| Fibroadenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |  |  |
| Fibroadenoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |  |  |
| Skin                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |

\* .. 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: 10260 - 01

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 12/17/2019

Test Type: Chronic PN

2-Hydroxy-4-methoxybenzophenone

Time Report Requested: 15:52:30

Route: DOSED FEED

CAS Number: 131-57-7

First Dose M/F: 11/08/10 / 11/09/10

Species/Strain: RATS/HSD

Lab: BAT

|                 |  | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |
|-----------------|--|-------------|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
|                 |  |             | 0                                 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      |
| 3000 ppm Female |  | ANIMAL ID   | 1                                 | 4 | 5 | 5 | 5 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7                    |
|                 |  |             | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    |
|                 |  |             | 3                                 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3                    |
|                 |  |             | 5                                 | 6 | 7 | 7 | 7 | 5 | 3 | 5 | 5 | 7 | 3 | 4 | 5 | 4 | 7 | 6 | 3 | 3 | 4 | 4 | 5 | 5 | 6 | 6 | 6                    |
|                 |  |             | 4                                 | 3 | 4 | 2 | 7 | 8 | 4 | 3 | 1 | 8 | 2 | 9 | 7 | 0 | 1 | 6 | 1 | 3 | 7 | 8 | 0 | 9 | 0 | 1 | 2                    |

Fibropapilloma

Subcutaneous Tissue, Fibrosarcoma

X

**MUSCULOSKELETAL SYSTEM**

Bone

+ +

**NERVOUS SYSTEM**

Brain

+ +

Meningioma Malignant

X

**RESPIRATORY SYSTEM**

Lung

+ +

Nose

+ +

Trachea

+ +

**SPECIAL SENSES SYSTEM**

Eye

+ +

Harderian Gland

+ +

**URINARY SYSTEM**

Kidney

+ +

Urinary Bladder

+ +

**SYSTEMIC LESIONS**

\* .. 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:** 10260 - 01

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

**Test Type:** Chronic PN

**Route: DOSED FEED**

**Species/Strain:** RATS/HSD

Date Report Requested: 12/17/2019

**Time Report Requested:** 15:52:30

**First Dose M/F:** 11/08/10 / 11/09/10

## Lab: BAT

## Multiple Organ

females  
(cont...)

\* .. 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

X .. Lesion present  
I .. Insufficient tissue

Experiment Number: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3000 ppm Female | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | * TOTALS |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|----------|
|   |                       | 0<br>7<br>3<br>1      |                       |          |          |
| ANIMAL ID   | 0<br>0<br>3<br>3<br>3 | * TOTALS |          |
|   | 5<br>6                | 6<br>7                | 7<br>8                | 8<br>9                | 1<br>1                | 2<br>2                | 3<br>3                | 4<br>4                | 4<br>4                | 4<br>4                | 4<br>4                | 5<br>5                | 6<br>6                | 5<br>5                | 6<br>6                | 5<br>5                | 6<br>6                | 5<br>5                | 6<br>6                | 5<br>5                | 7<br>7                | 5<br>5                | 6<br>6                | 6<br>6                | 7<br>7   | 7<br>7   |

### ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Hepatocellular Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  | 2 |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Schwannoma Malignant      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  | 1 |
| Acinus, Adenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |

### CARDIOVASCULAR SYSTEM

|              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Blood Vessel | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|--------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3000 ppm Female | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | * TOTALS |        |    |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|----------|--------|----|
|   |                       | 0<br>7<br>3<br>1      |                       |          |          |        |    |
| ANIMAL ID   | 0<br>0<br>3<br>3<br>3 | * TOTALS |          |        |    |
|   | 5<br>6                | 6<br>7                | 7<br>8                | 8<br>9                | 9<br>1                | 2<br>2                | 3<br>3                | 4<br>4                | 4<br>4                | 4<br>4                | 4<br>4                | 5<br>5                | 6<br>6                | 5<br>5                | 6<br>6                | 5<br>5                | 6<br>6                | 5<br>5                | 7<br>7                | 5<br>5                | 6<br>6                | 6<br>6                | 6<br>6                | 7<br>7                | 7<br>7   | 8<br>9   | 0<br>0 |    |
| Heart   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |        |    |
| <b>ENDOCRINE SYSTEM</b>                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |        |    |
| Adrenal Cortex  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |        |    |
| Adenoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |          |          |        | 2  |
| Adrenal Medulla   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |        |    |
| Pheochromocytoma Benign                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |        | 1  |
| Bilateral, Pheochromocytoma Malignant                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |        | 1  |
| Islets, Pancreatic                                      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |        |    |
| Adenoma   | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |          |        | 1  |
| Parathyroid Gland                                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | M                     | +                     | +        | +        | 43     |    |
| Pituitary Gland   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50       |        |    |
| Pars Distalis, Adenoma                                  | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     | X                     | X                     | X                     | X                     | X                     | X        | X        | 20     |    |
| Pars Distalis, Adenoma, Multiple                        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |          |          |        | 1  |
| Thyroid Gland   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | X                     | X                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | X                     | X                     | +                     | X                     | X                     | +        | +        | 50     |    |
| C-cell, Adenoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     | X                     |                       |                       |                       |                       |          |          |        | 17 |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

Clitoral Gland

+

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+

+

+

50

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

+ .. Tissue examined microscopically

X .. Lesion present

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A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3000 ppm Female    | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |    |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|----|
|  |                       | 0<br>7<br>3<br>1      |                       |          |    |
| ANIMAL ID  | 0<br>0<br>3<br>3<br>3 |          |    |
| Uterus   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |    |
| Polyp Stromal  |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 15 |
| Polyp Stromal, Multiple                                    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 3  |
| Sarcoma Stromal  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
| Schwannoma Malignant                                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
| Vagina   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |    |
| <b>HEMATOPOIETIC SYSTEM</b>                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    |
| Bone Marrow  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |    |
| Pheochromocytoma Malignant, Metastatic,<br>Adrenal Medulla |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1  |
| Lymph Node   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
| Lymph Node, Mandibular                                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 49       |    |
| Lymph Node, Mesenteric                                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |    |
| Spleen   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |    |
| Thymus   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 47       |    |
| <b>INTEGUMENTARY SYSTEM</b>                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    |
| Mammary Gland  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |    |
| Adenocarcinoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 7  |
| Fibroadenoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 23 |
| Fibroadenoma, Multiple                                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 4  |
| Skin   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |    |

\* .. 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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3000 ppm Female | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
|---|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|
|   |             | 0<br>7<br>3<br>1      |                       |  |
| ANIMAL ID   |             | 0<br>0<br>3<br>3<br>3 |  |
|   |             | * TOTALS              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |

Fibropapilloma

1

Subcutaneous Tissue, Fibrosarcoma

1

**MUSCULOSKELETAL SYSTEM**

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**NERVOUS SYSTEM**

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Brain                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Meningioma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |

**RESPIRATORY SYSTEM**

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Nose | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Trachea | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**SPECIAL SENSES SYSTEM**

|     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-----|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**URINARY SYSTEM**

|        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|--------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|

**SYSTEMIC LESIONS**

\* .. 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: 10260 - 01

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

Date Report Requested: 12/17/2019

Test Type: Chronic PN

2-Hydroxy-4-methoxybenzophenone

Time Report Requested: 15:52:30

Route: DOSED FEED

CAS Number: 131-57-7

First Dose M/F: 11/08/10 / 11/09/10

Species/Strain: RATS/HSD

Lab: BAT

|                |  | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3000 ppm Female |                            |                            |                            |                            |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          | * TOTALS |
|----------------|--|-------------|---|----------------------------|----------------------------|----------------------------|----------------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------|----------|
|                |  |             | 0<br>7<br>3<br>1  | 0<br>7<br>3<br>1           | 0<br>7<br>3<br>1           | 0<br>7<br>3<br>1           | 0<br>7<br>3<br>1           | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>1 |                  |          |          |
|                |  | ANIMAL ID   | 0<br>0<br>3<br>3<br>3<br>5                              | 0<br>0<br>3<br>3<br>3<br>6 | 0<br>0<br>3<br>3<br>3<br>7 | 0<br>0<br>3<br>3<br>3<br>8 | 0<br>0<br>3<br>3<br>3<br>9 | 0<br>0<br>3<br>4<br>2 | 0<br>0<br>3<br>4<br>2 | 0<br>0<br>4<br>4 | 0<br>0<br>4<br>4 | 0<br>0<br>4<br>4 | 0<br>0<br>5<br>5 | 0<br>0<br>5<br>5 | 0<br>0<br>5<br>6 | * TOTALS |          |
| Multiple Organ |  |             | +   | +                          | +                          | +                          | +                          | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +        | 50       |

\* .. 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:** 10260 - 01

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

**Test Type:** Chronic PN

**Route: DOSED FEED**

**Species/Strain:** RATS/HSD

### 2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

**Date Report Requested:** 12/17/2019

**Time Report Requested:** 15:52:30

**First Dose M/F:** 11/08/10 / 11/09/10

## Lab: BAT

| DAY ON TEST |   | HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>10000 ppm Female |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |  |
|-------------|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|--|
| 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 | 3  | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |                      |  |
|             | 0 | 7  | 1 | 7 | 9 | 4 | 7 | 7 | 8 | 1 | 9 | 3 | 4 | 1 | 9 | 7 | 4 | 7 | 9 | 1 | 4 |                      |  |
|             | 5 | 9  | 1 | 4 | 8 | 3 | 7 | 7 | 8 | 1 | 9 | 3 | 4 | 1 | 9 | 7 | 4 | 7 | 9 | 1 | 4 |                      |  |
|             | 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 | 0 | 0 | 0 | 0 | 0 | 0 |                      |  |
|             | 4 | 4  | 4 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 4 | 4 | 4 | 3 | 4 | 3 | 3 | 4                    |  |
|             | 1 | 3  | 0 | 9 | 8 | 0 | 0 | 1 | 1 | 1 | 2 | 3 | 0 | 9 | 0 | 1 | 1 | 8 | 2 | 8 | 8 | 8                    |  |
|             | 8 | 9  | 2 | 6 | 1 | 1 | 4 | 6 | 1 | 0 | 3 | 2 | 0 | 7 | 3 | 3 | 7 | 5 | 7 | 2 | 3 | 6                    |  |

# ALIMENTARY 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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

|  |  | DAY ON TEST | 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           | 3 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 |   |
|  |  | 0           | 7 | 1 | 7 | 9 | 4 | 7 | 7 | 8 | 1 | 9 | 0 | 4 | 1 | 9 | 5 | 9 | 7 | 4 | 9 | 1 | 4 | 9 | 4 | 9 | 0 |
|  |  | 5           | 9 | 1 | 4 | 8 | 3 | 7 | 8 | 1 | 9 | 3 | 0 | 4 | 1 | 9 | 5 | 9 | 7 | 4 | 9 | 1 | 4 | 9 | 4 | 9 | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |  | 4           | 4 | 4 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 4 | 4 | 4 | 3 | 4 | 3 | 3 | 3 | 4 | 4 | 3 |
|  |  | 1           | 3 | 0 | 9 | 8 | 0 | 0 | 1 | 1 | 1 | 2 | 3 | 0 | 9 | 0 | 1 | 1 | 8 | 2 | 8 | 8 | 8 | 0 | 2 | 8 | 0 |
|  |  | 8           | 9 | 2 | 6 | 1 | 1 | 4 | 6 | 1 | 0 | 3 | 2 | 0 | 7 | 3 | 3 | 7 | 5 | 7 | 2 | 3 | 6 | 5 | 0 | 4 | 3 |

females  
(cont...)

## GENITAL SYSTEM

Clitoral Gland

+ M M +

Ovary

Adenocarcinoma, Metastatic, Pancreas

Granulosa Cell Tumor Benign

Hemangiosarcoma

Sertoli Cell Tumor Benign

+ +

X

X

Uterus

Adenocarcinoma

Adenocarcinoma, Metastatic, Pancreas

Leiomyosarcoma

Polyp Stromal

+ +

X

X

X

X

Vagina

+ +

## HEMATOPOIETIC SYSTEM

Bone Marrow

+ +

Lymph Node

+

Lymph Node, Mandibular

+ +

Lymph Node, Mesenteric

+ +

Spleen

+ +

Thymus

+ + + + + + + + + + + + + + + + + + M + + + + + + + + + + + +

\* .. 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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

|  |  | DAY ON TEST                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|--|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |  | HARLAN SPRAGUE DAWLEY RATS<br>FEMALE |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  |  | 10000 ppm Female                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  |  | 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                                    | 3 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 |   |
|  |  | 0                                    | 7 | 1 | 7 | 9 | 4 | 7 | 7 | 8 | 1 | 9 | 3 | 0 | 4 | 1 | 9 | 5 | 6 | 7 | 4 | 9 | 1 | 4 | 4 | 9 | 0 | 9 |   |
|  |  | 5                                    | 9 | 1 | 4 | 8 | 3 | 7 | 8 | 1 | 9 | 3 | 0 | 4 | 1 | 9 | 5 | 9 | 6 | 7 | 4 | 9 | 1 | 4 | 4 | 9 | 0 | 9 |   |
|  |  | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |  | 4                                    | 4 | 4 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 3 | 4 | 4 | 4 | 3 | 4 | 3 | 3 | 3 | 4 | 4 | 3 | 3 |
|  |  | 1                                    | 3 | 0 | 9 | 8 | 0 | 0 | 1 | 1 | 1 | 2 | 3 | 0 | 9 | 0 | 1 | 1 | 8 | 2 | 8 | 8 | 8 | 0 | 2 | 8 | 0 | 2 | 8 |
|  |  | 8                                    | 9 | 2 | 6 | 1 | 1 | 4 | 6 | 1 | 0 | 3 | 2 | 0 | 7 | 3 | 3 | 7 | 5 | 7 | 2 | 3 | 6 | 5 | 0 | 4 | 2 | 8 | 0 |

females  
(cont...)

## INTEGUMENTARY SYSTEM

Mammary Gland  
Adenocarcinoma  
Fibroadenoma  
Fibroadenoma, Multiple

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
|   | X | X |   |   | X | X |   |   | X | X |   |   | X | X |   |   | X | X |   |   | X |   |   |   |   |   |   |   |  |
|   |   |   | X |   |   |   | X |   |   |   | X |   |   |   | X |   |   | X |   |   |   |   |   |   |   |   |   |   |  |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

Skin  
Squamous Cell Carcinoma

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
|   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |

## MUSCULOSKELETAL SYSTEM

Bone

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |

## NERVOUS SYSTEM

Brain

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |

## RESPIRATORY SYSTEM

Lung

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |

Adenocarcinoma, Metastatic, Pancreas  
Cystic Keratinizing Epithelioma  
Hemangiosarcoma

X

Nose

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |

Trachea

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |

## SPECIAL SENSES SYSTEM

Eye

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |

\* .. 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: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>10000 ppm Female | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID  | 0           | 0 | 3 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 |
|  | 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 |

females  
(cont...)

Harderian Gland

+

Zymbal's Gland  
Adenocarcinoma

## URINARY SYSTEM

Kidney  
Lipoma

+

X

Urinary Bladder  
Adenocarcinoma, Metastatic, Pancreas

+

X

## SYSTEMIC LESIONS

Multiple Organ  
Leukemia Mononuclear  
Lymphoma Malignant

+

X

\* .. 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

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| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>10000 ppm Female | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |         | * TOTALS |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|---------|----------|
|  |                       | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      |          |         |          |
| ANIMAL ID  | 0<br>0<br>3<br>9<br>3 | 0<br>0<br>3<br>9<br>4 | 0<br>0<br>3<br>9<br>5 | 0<br>0<br>4<br>1<br>5 | 0<br>0<br>4<br>1<br>9 | 0<br>0<br>3<br>8<br>1 | 0<br>0<br>3<br>8<br>2 | 0<br>0<br>3<br>8<br>9 | 0<br>0<br>3<br>9<br>9 | 0<br>0<br>4<br>3<br>9 | * TOTALS |         |          |
| Esophagus  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |          |
| Intestine Large, Cecum                                   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |          |
| Intestine Large, Colon                                   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |          |
| Intestine Large, Rectum                                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |          |
| Intestine Small, Duodenum                                | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |          |
| Intestine Small, Ileum                                   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |          |
| Intestine Small, Jejunum<br>Hemangiosarcoma              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50<br>1 |          |
| Liver<br>Adenocarcinoma, Metastatic, Pancreas            | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50<br>1 |          |
| Hemangiosarcoma  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |         | 1        |
| Hepatocellular Adenoma                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |         | 2        |
| Mesentery<br>Hemangiosarcoma                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |         | 1<br>1   |
| Pancreas<br>Adenocarcinoma                               | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50<br>1 |          |
| Salivary Glands  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |          |
| Stomach, Forestomach                                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 50      |          |

\* .. 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

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Experiment Number: 10260 - 01  
 Test Type: Chronic PN  
 Route: DOSED FEED  
 Species/Strain: RATS/HSD

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)  
 2-Hydroxy-4-methoxybenzophenone  
 CAS Number: 131-57-7

Date Report Requested: 12/17/2019  
 Time Report Requested: 15:52:30  
 First Dose M/F: 11/08/10 / 11/09/10  
 Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>10000 ppm Female | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |   |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|---|
|  |                       | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      |                       |          |   |
| ANIMAL ID  | 0<br>0<br>3<br>9<br>3 | 0<br>0<br>3<br>9<br>4 | 0<br>0<br>3<br>9<br>5 | 0<br>0<br>4<br>1<br>5 | 0<br>0<br>4<br>1<br>5 | 0<br>0<br>3<br>8<br>9 | 0<br>0<br>3<br>9<br>9 | 0<br>0<br>3<br>9<br>9 | 0<br>0<br>3<br>9<br>9 | 0<br>0<br>3<br>8<br>9 |          |   |
| Stomach, Glandular                                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| <b>CARDIOVASCULAR SYSTEM</b>                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| Blood Vessel   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Heart  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| <b>ENDOCRINE SYSTEM</b>                                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| Adrenal Cortex   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Adenocarcinoma, Metastatic, Pancreas                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1 |
| Adrenal Medulla  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Islets, Pancreatic                                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Parathyroid Gland  | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 42       |   |
| Pituitary Gland  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Pars Distalis, Adenoma                                   | X                     |                       | X                     |                       | X                     | X                     |                       | X                     | X                     | X                     | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     |                       | X                     | 16       |   |
| Thyroid Gland  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 50       |   |
| Bilateral, C-cell, Adenoma                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |   |
| C-cell, Adenoma  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 9        |   |
| C-cell, Carcinoma  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |   |
| X  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| <b>GENERAL BODY SYSTEM</b>                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |   |
| Peritoneum   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |   |
| Adenocarcinoma, Metastatic, Pancreas                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |   |

\* .. 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: 10260 - 01

Test Type: Chronic PN

Route: DOSED FEED

Species/Strain: RATS/HSD

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

Date Report Requested: 12/17/2019

Time Report Requested: 15:52:30

First Dose M/F: 11/08/10 / 11/09/10

Lab: BAT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>10000 ppm Female | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|
|  |             | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      |  |
| ANIMAL ID  |             | 0<br>0<br>3<br>9<br>3 | 0<br>0<br>3<br>9<br>4 | 0<br>0<br>3<br>9<br>5 | 0<br>0<br>4<br>1<br>5 | 0<br>0<br>4<br>1<br>5 | 0<br>0<br>3<br>8<br>9 |  |
|  |             | * TOTALS              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |

## GENITAL SYSTEM

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Clitoral Gland                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |    |
| Ovary                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Adenocarcinoma, Metastatic, Pancreas |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Granulosa Cell Tumor Benign          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Hemangiosarcoma                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Sertoli Cell Tumor Benign            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Uterus                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |
| Adenocarcinoma                       |   | X | X |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4  |
| Adenocarcinoma, Metastatic, Pancreas |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Leiomyosarcoma                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Polyp Stromal                        |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 10 |
| Vagina                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |

## HEMATOPOIETIC SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Lymph Node             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Thymus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |

\* .. 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:** 10260 - 01

## P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

**Test Type:** Chronic PN

**Route: DOSED FEED**

**Species/Strain:** RATS/HSD

### 2-Hydroxy-4-methoxybenzophenone

CAS Number: 131-57-7

**Date Report Requested:** 12/17/2019

**Time Report Requested:** 15:52:30

**First Dose M/F:** 11/08/10 / 11/09/10

## Lab: BAT

## **INTEGUMENTARY SYSTEM**

## MUSCULOSKELETAL SYSTEM

## **NERVOUS SYSTEM**

## **RESPIRATORY SYSTEM**

## SPECIAL SENSES SYSTEM

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

+ Tissue examined microscopically

✗ Lesion present

.. Lesion present

M Missing tissue

M .. Missing tissue

**BLANK** Not examined microscopically.

**Experiment Number:** 10260 - 01

P17: NEOPLASMS BY INDIVIDUAL ANIMAL (SYSTEMIC LESIONS ABRIDGED)

**Test Type:** Chronic PN

**Route: DOSED FEED**

**Species/Strain:** RATS/HSD

**Date Report Requested:** 12/17/2019

**Time Report Requested:** 15:52:30

**First Dose M/F:** 11/08/10 / 11/09/10

## Lab: BAT

**\* TOTALS**

## Harderian Gland

## Zymbal's Gland Adenocarcinoma

+ 1  
X 1

## **URINARY SYSTEM**

## Kidney Lipoma

Urinary Bladder  
Adenocarcinoma, Metastatic, Pancreas

## **SYSTEMIC LESIONS**

Multiple Organ  
Leukemia Mononuclear  
Lymphoma Malignant

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

\* .. Total animals with tissue examined microscopically: Total animals with tumo

+ .. Tissue examined microscopically

X ... Lesion present

X .. Lesion present

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK - Not examined microscopically