

**Experiment Number:** 20320 - 03  
**Test Type:** CHRONIC  
**Route:** GAVAGE  
**Species/Strain:** RATS/Wistar Han

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**  
Tetrabromobisphenol A  
**CAS Number:** 79-94-7

**Date Report Requested:** 01/23/2013  
**Time Report Requested:** 15:06:22  
**First Dose M/F:** 07/25/07 / 07/26/07  
**Lab:** BAT

F1\_Rev.1\_RE

<b>NTP Study Number:</b>	C20320		
<b>Lock Date:</b>	03/24/2011		
<b>Cage Range:</b>	ALL		
<b>Date Range:</b>	ALL		
<b>Reasons For Removal:</b>	25021 TSAC	25020 NATD	25019 MSAC
	25018 DACC		
<b>Removal Date Range:</b>	ALL		
<b>Treatment Groups:</b>	Include ALL		
<b>Study Gender:</b>	Both		
<b>TDMSE Version:</b>	3.0.1.0_004		
<b>PWG Approval Date:</b>	NONE		

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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
<b>WISTAR HAN RATS MALE</b>		6	7	7	6	6	5	5	7	0	7	7	7	1	7	6	5	7	2	7	7	7	7	7	7	7
		4	2	2	2	3	1	8	2	0	2	2	2	9	2	8	3	2	4	2	2	2	2	2	2	2
<b>0 mg/kg</b>	ANIMAL ID	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		0	0	0	0	0	0	0	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	2	2	2	2	2	2	2	2	3	3
		3	4	6	7	8	9	0	1	2	3	4	5	6	8	9	1	2	3	4	6	7	8	9	0	1

**males (cont...)**

**ALIMENTARY SYSTEM**

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Ileum Hemangiosarcoma, Metastatic, Blood Vessel	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Liver Leukemia Mononuclear	+	+	+	+	+	+	+	+	+	+	+	+	X	+	+	+	+	+	+	+	+	+	+	+	+
Mesentery		+				+																	+		
Pancreas Leukemia Mononuclear Acinus, Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	X	+	+	+	+	+	+	+	+	+	+	+	+
Salivary Glands Leukemia Mononuclear Myoepithelioma	+	+	+	+	+	+	+	+	+	+	+	+	X	+	+	+	+	+	+	+	+	+	+	+	+

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WISTAR HAN RATS MALE	DAY ON TEST																								males (cont...)	
	0648	0774	0772	0662	0663	0551	0558	0772	0002	0772	0772	0771	0001	0776	0555	0772	0224	0227	0772	0772	0772	0772	0772	0772		
0 mg/kg	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000		
	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000		
	0000	0000	0000	0000	0000	0001	0001	0001	0001	0001	0001	0001	0001	0001	0002	0002	0002	0002	0002	0002	0002	0002	0003	0003		
	3467	8	7	8	8	9	0	1	2	3	4	5	6	8	9	1	2	3	4	6	7	8	9	0	1	

Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+

CARDIOVASCULAR SYSTEM

Blood Vessel Adventitia, Hemangiosarcoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+

ENDOCRINE SYSTEM

Adrenal Cortex Leukemia Mononuclear	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Islets, Pancreatic Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Parathyroid Gland	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Pituitary Gland Pars Distalis, Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Pars Distalis, Adenoma, Multiple	X			X	X	X								X	X					X	X			
Pars Intermedia, Adenoma											X													X
Thyroid Gland C-cell, Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
C-cell, Adenoma, Multiple					X						X													X

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WISTAR HAN RATS MALE	6	7	7	6	6	5	5	7	0	7	7	7	1	7	6	5	7	2	2	7	7	7	7
	4	2	2	2	3	1	8	2	0	2	2	2	9	2	8	3	2	4	2	2	2	2	2
0 mg/kg	8	7	7	2	8	7	7	8	2	9	9	9	6	7	7	3	8	1	9	7	7	7	7
	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	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	2	2	2	2	2	2	2	3
	3	4	6	7	8	9	0	1	2	3	4	5	6	8	9	1	2	3	4	6	7	8	9
																							<b>males (cont...)</b>

Follicular Cell, Adenoma X

### GENERAL BODY SYSTEM

NONE

### GENITAL SYSTEM

Epididymis	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Leukemia Mononuclear													X										
Preputial Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Prostate	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Leukemia Mononuclear													X										
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Testes	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Leukemia Mononuclear													X										

### HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Leukemia Mononuclear													X										
Lymph Node														+									
Bronchial, Leukemia Mononuclear														X									
Iliac, Leukemia Mononuclear														X									
Inguinal, Leukemia Mononuclear														X									
Pancreatic, Hemangiosarcoma, Metastatic, Blood Vessel																							

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WISTAR HAN RATS MALE 0 mg/kg	DAY ON TEST																								ANIMAL ID	males (cont...)	
	0 6 4 8	0 7 2 7	0 7 2 7	0 6 2 2	0 6 3 8	0 5 1 7	0 5 8 7	0 7 2 8	0 0 2 8	0 7 2 9	0 7 2 9	0 7 2 9	0 1 9 6	0 7 2 7	0 6 8 3	0 5 2 3	0 7 2 8	0 2 4 1	0 7 2 9	0 7 2 7	0 7 2 7	0 7 2 7	0 7 2 7	0 7 2 7			
Thoracic, Leukemia Mononuclear																									X		
Lymph Node, Mandibular Leukemia Mononuclear	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+	+	+	X	
Lymph Node, Mesenteric Hemangioma Hemangiosarcoma Hemangiosarcoma, Metastatic, Blood Vessel Leukemia Mononuclear	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X	
Spleen Hemangiosarcoma Leukemia Mononuclear	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X	
Thymus Leukemia Mononuclear Thymoma Benign	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X	
<b>INTEGUMENTARY SYSTEM</b>																											
Mammary Gland Fibroadenoma	+	+	M	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	M	+	+	+	+	+	
Skin Basal Cell Adenoma Basal Cell Carcinoma Keratoacanthoma Squamous Cell Papilloma Subcutaneous Tissue, Schwannoma Malignant	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	X

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		DAY ON TEST																				males (cont...)		
<b>WISTAR HAN RATS MALE</b>		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0
	<b>0 mg/kg</b>	6	7	7	6	6	5	5	7	0	7	7	7	1	7	6	5	7	2	2	7		7	7
	ANIMAL ID	4	2	2	2	3	1	8	2	0	2	2	2	9	2	8	3	2	4	4	2	2	2	2
		8	7	7	2	8	7	7	8	2	9	9	9	6	7	7	3	8	1	9	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	0	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	2	2	2	2	2	2	2	2
		3	4	6	7	8	9	0	1	2	3	4	5	6	8	9	1	2	3	4	6	7	8	9

MUSCULOSKELETAL SYSTEM

Bone	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Sarcoma, Metastatic, Skeletal Muscle								X															
Skeletal Muscle								+															
Sarcoma								X															

NERVOUS SYSTEM

Brain	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Granular Cell Tumor Benign																							

RESPIRATORY SYSTEM

Lung	+	+	+	+	+	+	+	+	+	+	+	+	X	+	+	+	+	+	+	+	+	+	+
Leukemia Mononuclear													X										
Nose	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
Leukemia Mononuclear													X										
Trachea	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+

SPECIAL SENSES SYSTEM

Eye	+	+	+	+	+	+	+	+	+	+	+	+	X	+	+	+	+	+	+	+	+	+	+
Leukemia Mononuclear													X										
Harderian Gland	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+

URINARY SYSTEM

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0 mg/kg		0648	0777	0777	0666	0666	0555	0555	0777	0000	0777	0777	0777	0111	0777	0666	0555	0777	0222	0222	0777	0222	0222	0777		0777	0777	0777	0777	0777	0777	0777	0777	0777	0777	
ANIMAL ID		0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	0000	
Kidney		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Urethra																																				
Urinary Bladder Transitional Epithelium, Papilloma		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+
<b>SYSTEMIC LESIONS</b>																																				
Multiple Organ Leukemia Mononuclear		+	+	+	+	+	+	+	+	+	+	+	+	X	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	

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		DAY ON TEST																				* TOTALS					
<b>WISTAR HAN RATS MALE</b>	<b>0 mg/kg</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0			
		6	7	7	5	7	4	7	2	7	7	7	7	5	7	7	7	7	7	7	7	4	4	7		7	
		9	2	2	0	2	6	2	2	2	2	4	2	2	2	2	2	2	2	2	8	8	9	2	2		
		5	7	7	2	7	5	8	4	7	7	9	2	8	7	7	9	8	8	8	8	5	6	8	8		
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
		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	4	4	4	4	4	4	4	4	4	4	4	4	5	5	5	5	5		
		2	3	4	5	6	7	9	0	1	2	3	4	5	7	8	9	0	1	2	3	4	5	6	8	9	

**ALIMENTARY SYSTEM**

Esophagus	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Intestine Large, Cecum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Intestine Large, Colon	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Intestine Large, Rectum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Intestine Small, Duodenum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Intestine Small, Ileum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Hemangiosarcoma, Metastatic, Blood Vessel																						X				1
Intestine Small, Jejunum	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Liver	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Leukemia Mononuclear																										1
Mesentery																										3
Pancreas	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Leukemia Mononuclear																										1
Acinus, Adenoma																										1
Salivary Glands	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Leukemia Mononuclear																										1
Myoepithelioma																										1

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Lab: BAT

WISTAR HAN RATS MALE 0 mg/kg	DAY ON TEST																								* TOTALS	
	0695	0727	0772	0502	0727	0445	0728	0224	0727	0727	0727	0524	0722	0722	0722	0722	0722	0722	0722	0722	0428	0428	0428	0728		
ANIMAL ID	00032	00033	00034	00035	00036	00037	00039	00040	00041	00042	00043	00044	00045	00047	00048	00049	00050	00051	00052	00053	00054	00055	00056	00058	00059	
Stomach, Forestomach	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
Stomach, Glandular	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
<b>CARDIOVASCULAR SYSTEM</b>																										
Blood Vessel Adventitia, Hemangiosarcoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1	
Heart	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50	
<b>ENDOCRINE SYSTEM</b>																										
Adrenal Cortex Leukemia Mononuclear	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1	
Adrenal Medulla	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	49	
Islets, Pancreatic Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 1	
Parathyroid Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	M	+	M	+	M	+	+	+	M	45	
Pituitary Gland Pars Distalis, Adenoma Pars Distalis, Adenoma, Multiple Pars Intermedia, Adenoma	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 20 1 2	
Thyroid Gland C-cell, Adenoma C-cell, Adenoma, Multiple	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50 4 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

		DAY ON TEST																				* TOTALS
WISTAR HAN RATS MALE		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0 mg/kg	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	0	0	0	0	0	0	0	0	0	0	0
		2	3	4	5	6	7	9	0	1	2	3	4	5	7	8	9	0	1	2	3	4
Follicular Cell, Adenoma		X										X										3

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

Epididymis	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Leukemia Mononuclear																							1
Preputial Gland	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Prostate	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Leukemia Mononuclear																							1
Seminal Vesicle	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Testes	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Leukemia Mononuclear																							1

HEMATOPOIETIC SYSTEM

Bone Marrow	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	50
Leukemia Mononuclear																							1
Lymph Node		+																			+		3
Bronchial, Leukemia Mononuclear																							1
Iliac, Leukemia Mononuclear																							1
Inguinal, Leukemia Mononuclear																							1
Pancreatic, Hemangiosarcoma, Metastatic, Blood Vessel																					X		1

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+ .. Tissue examined microscopically  
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I .. Insufficient tissue

M .. Missing tissue  
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Tetrabromobisphenol A

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Lab: BAT

WISTAR HAN RATS MALE	DAY ON TEST																								* TOTALS	
	0695	0772	0772	0502	0727	0466	0728	0244	0727	0727	0727	0524	0722	0722	0722	0722	0722	0722	0722	0488	0488	0722	0722			
0 mg/kg	00032	00033	00034	00035	00036	00037	00039	00040	00041	00042	00043	00044	00045	00047	00048	00049	00050	00051	00052	00053	00054	00055	00056	00058	00059	

Thoracic, Leukemia Mononuclear

1

Lymph Node, Mandibular  
Leukemia Mononuclear

+ +

49  
1

Lymph Node, Mesenteric  
Hemangioma  
Hemangiosarcoma  
Hemangiosarcoma, Metastatic, Blood Vessel  
Leukemia Mononuclear

+  
X  
X  
X

50  
1  
1  
1  
1

Spleen  
Hemangiosarcoma  
Leukemia Mononuclear

+ +

50  
1  
1

Thymus  
Leukemia Mononuclear  
Thymoma Benign

+  
X

49  
1  
1

INTEGUMENTARY SYSTEM

Mammary Gland  
Fibroadenoma

+  
X

47  
1

Skin  
Basal Cell Adenoma  
Basal Cell Carcinoma  
Keratoacanthoma  
Squamous Cell Papilloma  
Subcutaneous Tissue, Schwannoma Malignant

+  
X  
X  
X  
X  
X  
X

50  
2  
1  
4  
1  
2

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue 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 |   |  |   |
| <b>WISTAR HAN RATS MALE</b> |                | 6           | 7 | 7 | 5 | 7 | 4 | 7 | 2 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 4 | 4               | 7 | 7 |  |   |
|                             |                | 9           | 2 | 2 | 0 | 2 | 6 | 2 | 4 | 2 | 2 | 2 | 4 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 8 | 8               | 9 | 2 |  | 2 |
|                             |                | 5           | 7 | 7 | 2 | 7 | 5 | 8 | 4 | 7 | 7 | 7 | 9 | 2 | 8 | 7 | 7 | 9 | 8 | 8 | 8 | 5               | 6 | 8 |  | 8 |
|                             | <b>0 mg/kg</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           | 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 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5               | 5 | 5 |  |   |
|                             |                | 2           | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4               | 5 | 6 |  | 8 |
|                             |                |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>* TOTALS</b> |   |   |  |   |

MUSCULOSKELETAL SYSTEM

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Sarcoma, Metastatic, Skeletal Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Skeletal Muscle                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Sarcoma                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

NERVOUS SYSTEM

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Granular Cell Tumor Benign |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 1  |

RESPIRATORY SYSTEM

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Leukemia Mononuclear |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Nose                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Leukemia Mononuclear |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Trachea              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

SPECIAL SENSES SYSTEM

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Leukemia Mononuclear |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Harderian Gland      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |

URINARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
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Tetrabromobisphenol A

CAS Number: 79-94-7

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Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

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        | * TOTALS |   |
|------------------------------------|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|----------|---|
| WISTAR HAN RATS MALE               |  | 6 | 7 | 7 | 5 | 7 | 4 | 7 | 2 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 4 | 4 | 7 | 7 |          |          |   |
| 0 mg/kg                            |  | 9 | 2 | 2 | 0 | 2 | 6 | 2 | 4 | 2 | 2 | 2 | 2 | 4 | 2 | 2 | 2 | 2 | 2 | 2 | 8 | 8 | 9 | 2 | 2        |          |   |
| ANIMAL ID                          |  | 5 | 7 | 7 | 2 | 7 | 5 | 8 | 4 | 7 | 7 | 7 | 2 | 8 | 7 | 7 | 9 | 8 | 8 | 8 | 5 | 6 | 8 | 8 | * TOTALS |          |   |
| 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 |          |          |   |
| 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 |          |          |   |
| ANIMAL ID                          |  | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | * TOTALS |          |   |
| ANIMAL ID                          |  | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 |          | 8        | 9 |
| Kidney                             |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |          | 50       |   |
| Urethra                            |  |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   | 1        |          |   |
| Urinary Bladder                    |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |          |   |
| Transitional Epithelium, Papilloma |  |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |          |   |
| <b>SYSTEMIC LESIONS</b>            |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |          |   |
| Multiple Organ                     |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50       |          |   |
| Leukemia Mononuclear               |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |          |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
 + .. Tissue examined microscopically  
 X .. Lesion present  
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|                             |                  |           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |                            |
|-----------------------------|------------------|-----------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------------------------|
| <b>WISTAR HAN RATS MALE</b> | DAY ON TEST      | 0728      | 0622  | 0397  | 0652  | 0772  | 0777  | 0660  | 0770  | 0579  | 0779  | 0669  | 0778  | 0777  | 0664  | 0777  | 0663  | 0777  | 0570  | 0770  | 0662  | 0778  | 0574  | 0776  | 0665  | <b>males<br/>(cont...)</b> |
|                             | <b>250 mg/kg</b> | ANIMAL ID | 00061 | 00062 | 00063 | 00064 | 00065 | 00066 | 00067 | 00068 | 00069 | 00070 | 00071 | 00072 | 00073 | 00074 | 00075 | 00076 | 00077 | 00078 | 00079 | 00080 | 00081 | 00082 | 00083 |                            |

ALIMENTARY SYSTEM

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

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|                             |                  |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                            |
|-----------------------------|------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------------------------|
| <b>WISTAR HAN RATS MALE</b> | DAY ON TEST      | 078 | 062 | 039 | 065 | 072 | 072 | 070 | 067 | 054 | 072 | 068 | 072 | 072 | 067 | 072 | 067 | 063 | 072 | 050 | 072 | 064 | 065 | <b>males<br/>(cont...)</b> |
|                             | <b>250 mg/kg</b> | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 | 006 |                            |
|                             | ANIMAL ID        | 123 | 456 | 789 | 012 | 345 | 678 | 901 | 234 | 567 | 890 | 123 | 456 | 789 | 012 | 345 | 678 | 901 | 234 | 567 | 890 | 123 | 456 |                            |

CARDIOVASCULAR SYSTEM

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

ENDOCRINE SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex<br>Adenoma   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adrenal Medulla<br>Pheochromocytoma Malignant   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Islets, Pancreatic  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Parathyroid Gland   | + | + | + | + | + | M | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + |
| Pituitary Gland<br>Pars Distalis, Adenoma<br>Pars Intermedia, Adenoma   | + | X | X | X | X | X | X | X | X | X | X | + | + | + | + | + | + | + | + | + | + | + | + |
| Thyroid Gland<br>C-cell, Adenoma<br>C-cell, Carcinoma<br>Follicular Cell, Adenoma<br>Follicular Cell, Carcinoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                             |                  |           |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                            |
|-----------------------------|------------------|-----------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------------------------|
| <b>WISTAR HAN RATS MALE</b> | DAY ON TEST      | 078       | 062  | 039  | 065  | 072  | 072  | 068  | 072  | 054  | 072  | 068  | 072  | 072  | 067  | 072  | 067  | 072  | 067  | 057  | 072  | 064  | 076  | <b>males<br/>(cont...)</b> |
|                             | <b>250 mg/kg</b> | ANIMAL ID | 0061 | 0062 | 0063 | 0064 | 0065 | 0066 | 0067 | 0068 | 0069 | 0070 | 0071 | 0072 | 0073 | 0074 | 0075 | 0076 | 0077 | 0078 | 0079 | 0080 | 0081 |                            |

NONE

GENITAL SYSTEM

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Epididymis       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Preputial Gland  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Prostate Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Seminal Vesicle  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Testes           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

HEMATOPOIETIC SYSTEM

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

INTEGUMENTARY SYSTEM

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

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



Experiment Number: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

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First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS MALE<br>250 mg/kg         | DAY ON TEST |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   | ANIMAL ID                  | males<br>(cont...)         |  |
|---|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|---|----------------------------|----------------------------|--|
|   | 07<br>28    | 06<br>22 | 03<br>29 | 06<br>57 | 07<br>22 | 07<br>22 | 07<br>77 | 06<br>80 | 07<br>27 | 05<br>49 | 07<br>29 | 06<br>89 | 07<br>28 | 07<br>77 | 06<br>74 | 07<br>22 | 07<br>22 | 06<br>73 | 07<br>77 | 05<br>27 | 07<br>00 | 07<br>23 | 06<br>74 | 07<br>25 |   |                            |                            |  |
| Mammary Gland                             | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | + | 00<br>00<br>00<br>66<br>11 |                            |  |
| Skin                                      | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | + | 00<br>00<br>00<br>66<br>11 |                            |  |
| Basal Cell Adenoma                        |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   | 00<br>00<br>00<br>66<br>11 |                            |  |
| Subcutaneous Tissue, Fibroma              |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          | X        |          |   |                            | 00<br>00<br>00<br>66<br>11 |  |
| Subcutaneous Tissue, Fibrous Histiocytoma |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |                            | 00<br>00<br>00<br>66<br>11 |  |
| Subcutaneous Tissue, Schwannoma Malignant |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |                            | 00<br>00<br>00<br>66<br>11 |  |
| <b>MUSCULOSKELETAL SYSTEM</b>             |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |                            |                            |  |
| Bone                                      | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | + | +                          | 00<br>00<br>00<br>66<br>11 |  |
| <b>NERVOUS SYSTEM</b>                     |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |                            |                            |  |
| Brain                                     | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | + | +                          | 00<br>00<br>00<br>66<br>11 |  |
| Meningioma Malignant                      |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |                            | 00<br>00<br>00<br>66<br>11 |  |
| Peripheral Nerve                          |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |                            | 00<br>00<br>00<br>66<br>11 |  |
| Spinal Cord                               |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |                            | 00<br>00<br>00<br>66<br>11 |  |
| <b>RESPIRATORY SYSTEM</b>                 |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |                            |                            |  |
| Lung                                      | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | + | +                          | 00<br>00<br>00<br>66<br>11 |  |
| Carcinoma, Metastatic, Thyroid Gland      |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |                            | 00<br>00<br>00<br>66<br>11 |  |
| Fibrous Histiocytoma, Metastatic, Skin    |             |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |          |   |                            | 00<br>00<br>00<br>66<br>11 |  |
| Nose                                      | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | + | +                          | 00<br>00<br>00<br>66<br>11 |  |
| Trachea                                   | +           | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | +        | + | +                          | 00<br>00<br>00<br>66<br>11 |  |

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+ .. Tissue examined microscopically  
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I .. Insufficient tissue

M .. Missing tissue  
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Experiment Number: 20320 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 Tetrabromobisphenol A  
 CAS Number: 79-94-7

Date Report Requested: 01/23/2013  
 Time Report Requested: 15:06:22  
 First Dose M/F: 07/25/07 / 07/26/07  
 Lab: BAT

|   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                            |                       |
|---|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------|-----------------------|
| <b>WISTAR HAN RATS MALE</b><br><br><b>250 mg/kg</b> | DAY ON TEST | 0<br>7<br>2<br>8      | 0<br>6<br>2<br>2      | 0<br>3<br>9<br>7      | 0<br>6<br>5<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>7<br>2<br>7      | 0<br>6<br>8<br>0      | 0<br>7<br>2<br>7      | 0<br>5<br>4<br>9      | 0<br>7<br>2<br>9      | 0<br>6<br>8<br>9      | 0<br>7<br>2<br>7      | 0<br>6<br>7<br>4      | 0<br>7<br>2<br>7      | 0<br>6<br>7<br>3      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>7      | 0<br>5<br>0<br>0      | 0<br>7<br>2<br>0      | 0<br>6<br>2<br>8      | 0<br>7<br>4<br>5      | <b>males<br/>(cont...)</b> |                       |
|   | ANIMAL ID   | 0<br>0<br>0<br>6<br>1 | 0<br>0<br>0<br>6<br>2 | 0<br>0<br>0<br>6<br>3 | 0<br>0<br>0<br>6<br>4 | 0<br>0<br>0<br>6<br>5 | 0<br>0<br>0<br>6<br>6 | 0<br>0<br>0<br>6<br>7 | 0<br>0<br>0<br>6<br>8 | 0<br>0<br>0<br>6<br>9 | 0<br>0<br>0<br>7<br>0 | 0<br>0<br>0<br>7<br>1 | 0<br>0<br>0<br>7<br>2 | 0<br>0<br>0<br>7<br>3 | 0<br>0<br>0<br>7<br>4 | 0<br>0<br>0<br>7<br>5 | 0<br>0<br>0<br>7<br>6 | 0<br>0<br>0<br>8<br>7 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 | 0<br>0<br>0<br>8<br>8 |                            | 0<br>0<br>0<br>8<br>8 |
|   |             | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     | 0                     |                            | 0                     |

**SPECIAL SENSES SYSTEM**

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

**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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Experiment Number: 20320 - 03

Test Type: CHRONIC

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P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

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Lab: BAT

|                             |                  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |   |
|-----------------------------|------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|
|                             |                  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          | 0 |
| <b>WISTAR HAN RATS MALE</b> |                  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
|                             | <b>250 mg/kg</b> | 3           | 0 | 1 | 9 | 0 | 2 | 2 | 2 | 2 | 0 | 9 | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2        | 2 |
|                             | ANIMAL ID        | 5           | 1 | 4 | 6 | 5 | 3 | 7 | 8 | 5 | 9 | 7 | 7 | 9 | 9 | 8 | 8 | 8 | 8 | 7 | 7 | 6        | 6 |
|                             |                  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 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           | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0        | 0 |
|                             |                  | 6           | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6        | 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 |   |   |   |   |   |   |   | 1  |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Acinus, Adenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | 1  |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Leiomyosarcoma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Stomach, Glandular        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
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X .. Lesion present  
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| WISTAR HAN RATS MALE | DAY ON TEST |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             |             | * TOTALS |
|----------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|----------|
|                      | 0<br>3<br>5 | 0<br>7<br>1 | 0<br>5<br>4 | 0<br>5<br>6 | 0<br>6<br>0 | 0<br>7<br>2 | 0<br>7<br>2 | 0<br>7<br>2 | 0<br>6<br>2 | 0<br>7<br>2 | 0<br>4<br>0 | 0<br>7<br>9 | 0<br>7<br>2 | 0<br>7<br>2 | 0<br>7<br>2 | 0<br>6<br>1 | 0<br>7<br>2 | 0<br>7<br>2 | 0<br>7<br>2 | 0<br>6<br>9 | 0<br>7<br>2 | 0<br>6<br>9 | 0<br>7<br>8 |          |
| 250 mg/kg            | 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           |          |
|                      | 8           | 8           | 8           | 8           | 9           | 9           | 9           | 9           | 9           | 9           | 9           | 9           | 9           | 9           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           | 0           |          |
|                      | 6           | 7           | 8           | 9           | 0           | 1           | 2           | 3           | 4           | 5           | 6           | 7           | 8           | 9           | 0           | 1           | 2           | 3           | 4           | 5           | 6           | 7           | 8           | 50       |

NONE

### GENITAL SYSTEM

|                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Epididymis       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Preputial Gland  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Prostate Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1 |
| Seminal Vesicle  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Testes           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |

### HEMATOPOIETIC SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Bone Marrow                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Lymph Node, Mandibular                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Lymph Node, Mesenteric Hemangiosarcoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | + | 50<br>2 |
| Spleen                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Thymus Thymoma Benign                  | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | + | 49<br>1 |

### INTEGUMENTARY SYSTEM

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

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

Experiment Number: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS MALE<br>250 mg/kg         | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | * TOTALS         |                  |  |
|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--|
|   | 0<br>3<br>5      | 0<br>7<br>1      | 0<br>5<br>4      | 0<br>5<br>6      | 0<br>6<br>5      | 0<br>7<br>2      | 0<br>7<br>2      | 0<br>7<br>2      | 0<br>7<br>8      | 0<br>6<br>5      | 0<br>7<br>9      | 0<br>4<br>7      | 0<br>7<br>2      | 0<br>7<br>2      | 0<br>7<br>2      | 0<br>7<br>2      | 0<br>6<br>1      | 0<br>7<br>2      | 0<br>7<br>8      | 0<br>7<br>8      | 0<br>7<br>2      | 0<br>6<br>9      | 0<br>7<br>2      | 0<br>6<br>7      |                  | 0<br>7<br>6      |  |
| ANIMAL ID                                 | 0<br>0<br>8<br>6 | 0<br>0<br>0<br>8 | 0<br>0<br>8<br>8 | 0<br>0<br>0<br>8 | 0<br>0<br>0<br>9 | 0<br>0<br>9<br>9 | 0<br>0<br>9<br>9 | 0<br>0<br>9<br>9 | 0<br>0<br>9<br>9 | 0<br>0<br>9<br>9 | 0<br>0<br>9<br>9 | 0<br>0<br>9<br>9 | 0<br>0<br>9<br>9 | 0<br>0<br>9<br>9 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 |  |
| Mammary Gland                             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50               |  |
| Skin                                      | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50               |  |
| Basal Cell Adenoma                        |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |  |
| Subcutaneous Tissue, Fibroma              |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |  |
| Subcutaneous Tissue, Fibrous Histiocytoma |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  | 1                |  |
| Subcutaneous Tissue, Schwannoma Malignant |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |  |
| <b>MUSCULOSKELETAL SYSTEM</b>             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  |
| Bone                                      | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50               |  |
| <b>NERVOUS SYSTEM</b>                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  |
| Brain                                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50               |  |
| Meningioma Malignant                      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |  |
| Peripheral Nerve                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 2                |  |
| Spinal Cord                               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 2                |  |
| <b>RESPIRATORY SYSTEM</b>                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  |
| Lung                                      | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 50               |  |
| Carcinoma, Metastatic, Thyroid Gland      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                | 1                |  |
| Fibrous Histiocytoma, Metastatic, Skin    |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  | 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  
 A .. Autolysis precludes evaluation  
 BLANK .. Not examined microscopically

Experiment Number: 20320 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/Wistar Han

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**  
 Tetrabromobisphenol A  
 CAS Number: 79-94-7

Date Report Requested: 01/23/2013  
 Time Report Requested: 15:06:22  
 First Dose M/F: 07/25/07 / 07/26/07  
 Lab: BAT

|   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>WISTAR HAN RATS MALE</b><br><br><b>250 mg/kg</b> | 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |             | 0 | 7 | 5 | 5 | 6 | 7 | 7 | 7 | 6 | 7 | 4 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 7 | 6 | 7 | 6 | 7 |
|   |             | 3 | 0 | 1 | 9 | 0 | 2 | 2 | 2 | 2 | 0 | 9 | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 9 | 2 | 7 | 8 | 8 | 9 | 8 | 9 |
| 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 8           | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   | 6           | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 |
| <b>* TOTALS</b>                                     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**SPECIAL SENSES SYSTEM**

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

**URINARY SYSTEM**

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

**SYSTEMIC LESIONS**

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| 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  
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 BLANK .. Not examined microscopically

Experiment Number: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                             |                  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |   |   |   |
|-----------------------------|------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|---|---|---|
| <b>WISTAR HAN RATS MALE</b> |                  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    | 0 | 0 |   |   |
|                             |                  | 7           | 7 | 5 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 3 | 7 | 7 | 7 |                    | 7 | 7 | 7 |   |
| <b>500 mg/kg</b>            |                  | 2           | 2 | 7 | 7 | 2 | 2 | 2 | 2 | 2 | 2 | 6 | 2 | 2 | 2 | 9 | 2 | 2 | 2 | 2 | 2 | 2                  | 2 | 2 |   |   |
|                             |                  | 8           | 8 | 4 | 3 | 6 | 7 | 8 | 7 | 8 | 9 | 7 | 8 | 7 | 8 | 3 | 8 | 8 | 8 | 7 | 7 | 7                  | 7 | 8 |   |   |
|                             | <b>ANIMAL ID</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 | 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 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3                  | 3 | 3 |   |   |
|                             |                  | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1                  | 2 | 3 | 4 | 5 |

**ALIMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Histiocytic Sarcoma                    |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Pancreas                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Salivary Glands                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Sublingual Gland, Adenoma              |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Stomach, Forestomach                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Stomach, Glandular                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
 + .. Tissue examined microscopically  
 X .. Lesion present  
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M .. Missing tissue  
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Tetrabromobisphenol A

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First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                      |           | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |
|----------------------|-----------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|
| WISTAR HAN RATS MALE | ANIMAL ID | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    | 0 |
|                      |           | 7           | 7 | 5 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 3 | 7 | 7 | 7 | 7 |                    | 7 |
| 500 mg/kg            |           | 2           | 2 | 7 | 7 | 2 | 2 | 2 | 2 | 2 | 2 | 6 | 2 | 2 | 2 | 9 | 2 | 2 | 2 | 2 | 2 | 2                  |   |
|                      |           | 8           | 8 | 4 | 3 | 6 | 7 | 8 | 7 | 8 | 9 | 7 | 8 | 7 | 8 | 3 | 8 | 8 | 8 | 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                  |   |
|                      |           | 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 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3                  |   |
|                      |           | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1                  |   |

Fibrous Histiocytoma, Metastatic, Skin

X

CARDIOVASCULAR SYSTEM

Blood Vessel

+ +

Heart

+ +

Fibrous Histiocytoma, Metastatic, Skin

X

Histiocytic Sarcoma

X

ENDOCRINE SYSTEM

Adrenal Cortex

+ +

Histiocytic Sarcoma

X

Adrenal Medulla

+ +

Pheochromocytoma Benign

Islets, Pancreatic

+ +

Adenoma

X

Parathyroid Gland

+ +

Adenoma

X

Pituitary Gland

+ +

Pars Distalis, Adenoma

X

X

X

X

X

X

Pars Distalis, Adenoma, Multiple

Pars Intermedia, Adenoma

X

X

Thyroid Gland

+ +

Bilateral, 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                             |                  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |   |
|-----------------------------|------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|---|
| <b>WISTAR HAN RATS MALE</b> | <b>500 mg/kg</b> | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    | 0 |   |
|                             |                  | 7           | 7 | 5 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 3 | 7 | 7 | 7 | 7 |                    | 7 | 7 |
|                             |                  | 2           | 2 | 7 | 7 | 2 | 2 | 2 | 2 | 2 | 2 | 6 | 2 | 2 | 2 | 9 | 2 | 2 | 2 | 2 | 2 | 2                  | 2 |   |
|                             |                  | 8           | 8 | 4 | 3 | 6 | 7 | 8 | 7 | 8 | 9 | 7 | 8 | 7 | 8 | 3 | 8 | 8 | 8 | 7 | 7 | 7                  | 8 |   |
|                             |                  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 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 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3                  | 3 |   |
|                             |                  | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1                  | 2 |   |

C-cell, Adenoma  
Follicular Cell, Adenoma

X X X X

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Epididymis                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Histiocytic Sarcoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Preputial Gland                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Prostate                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Seminal Vesicle                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Testes                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Bilateral, Interstitial Cell, Adenoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

HEMATOPOIETIC SYSTEM

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Histiocytic Sarcoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Lymph Node                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |
| Iliac, Histiocytic Sarcoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Mediastinal, Histiocytic Sarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Renal, Histiocytic Sarcoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS MALE<br><br>500 mg/kg   | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | ANIMAL ID | males<br>(cont...) |   |  |  |
|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|-----------|--------------------|---|--|--|
|   | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>5<br>7<br>4 | 0<br>6<br>7<br>3 | 0<br>6<br>2<br>6 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>7 | 0<br>3<br>2<br>3 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 |   |           |                    |   |  |  |
| Lymph Node, Mandibular<br>Histiocytic Sarcoma   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | X         |                    |   |  |  |
| Lymph Node, Mesenteric<br>Hemangiosarcoma<br>Histiocytic Sarcoma  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +         | X                  |   |  |  |
| Spleen<br>Histiocytic Sarcoma   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +         | X                  |   |  |  |
| Thymus<br>Fibrous Histiocytoma, Metastatic, Skin<br>Schwannoma Malignant  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +         | X                  |   |  |  |
| <b>INTEGUMENTARY SYSTEM</b>   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |           |                    |   |  |  |
| Mammary Gland   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +         | +                  |   |  |  |
| Skin<br>Fibroma<br>Fibrous Histiocytoma<br>Histiocytic Sarcoma<br>Keratoacanthoma<br>Squamous Cell Papilloma<br>Subcutaneous Tissue, Schwannoma Malignant | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +         | +                  | X |  |  |
| <b>MUSCULOSKELETAL SYSTEM</b>   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |           |                    |   |  |  |
| Bone  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | + | +         | +                  |   |  |  |

\* .. 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: 20320 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 Tetrabromobisphenol A  
 CAS Number: 79-94-7

Date Report Requested: 01/23/2013  
 Time Report Requested: 15:06:22  
 First Dose M/F: 07/25/07 / 07/26/07  
 Lab: BAT

|                                       |             |                 |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |    |
|---------------------------------------|-------------|-----------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----|
| WISTAR HAN RATS MALE<br><br>500 mg/kg | DAY ON TEST | 078             | 078  | 054  | 063  | 062  | 072  | 077  | 077  | 077  | 077  | 077  | 057  | 077  | 077  | 077  | 033  | 072  | 072  | 072  | 072  | 077  | 077  | 077  | 077  | 077  | 077  | 077  | 077  |    |
|                                       | ANIMAL ID   | 0011            | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 | 0011 |    |
|                                       |             | 11              | 12   | 13   | 14   | 15   | 16   | 17   | 18   | 19   | 00   | 01   | 02   | 03   | 04   | 05   | 06   | 07   | 08   | 09   | 00   | 01   | 02   | 03   | 03   | 03   | 03   | 03   | 03   | 03 |
|                                       |             |                 |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |    |
|                                       |             | males (cont...) |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |    |

### NERVOUS SYSTEM

|                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Meninges, Histiocytic Sarcoma |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Peripheral Nerve              |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Spinal Cord                   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

### RESPIRATORY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Histiocytic Sarcoma                    |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mediastinum, Lipoma                    |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Nose                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Trachea                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

### SPECIAL SENSES SYSTEM

|                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eye                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Harderian Gland     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Histiocytic Sarcoma |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

### URINARY SYSTEM

|                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Histiocytic Sarcoma |   |   |   |   |   |   |   |   |   |   |   | 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:** 20320 - 03  
**Test Type:** CHRONIC  
**Route:** GAVAGE  
**Species/Strain:** RATS/Wistar Han

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**  
 Tetrabromobisphenol A  
**CAS Number:** 79-94-7

**Date Report Requested:** 01/23/2013  
**Time Report Requested:** 15:06:22  
**First Dose M/F:** 07/25/07 / 07/26/07  
**Lab:** BAT

| Wistar Han Rats Male    | 500 mg/kg | DAY ON TEST | ANIMAL ID |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     | males<br>(cont...) |     |     |     |
|-------------------------|-----------|-------------|-----------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|--------------------|-----|-----|-----|
|                         |           | 078         | 078       | 054 | 063 | 066 | 072 | 077 | 077 | 077 | 077 | 077 | 057 | 077 | 077 | 077 | 033 | 077 | 077 | 077 | 077 | 077 |                    | 077 | 077 | 077 |
| Urinary Bladder         |           | +           | +         | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +                  | +   | +   | +   |
| <b>SYSTEMIC LESIONS</b> |           |             |           |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                    |     |     |     |
| Multiple Organ          |           | +           | +         | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +                  | +   | +   | +   |
| Histiocytic Sarcoma     |           |             |           |     |     |     |     |     |     |     |     |     |     |     | 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  
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Experiment Number: 20320 - 03

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Route: GAVAGE

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Tetrabromobisphenol A

CAS Number: 79-94-7

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First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                             |           | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |
|-----------------------------|-----------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|                             |           | 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>WISTAR HAN RATS MALE</b> |           | 7           | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 7 | 7 | 5 | 7 | 6 | 7 | 7 | 7 | 6 | 7 |          |
|                             |           | 2           | 2 | 4 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 4 | 2 | 2 | 1 | 2 | 2 | 1 | 2 | 1 | 2 | 2 | 2 | 2 | 5 |          |
| <b>500 mg/kg</b>            |           | 7           | 9 | 3 | 8 | 7 | 8 | 9 | 9 | 8 | 7 | 9 | 0 | 8 | 9 | 5 | 9 | 7 | 8 | 1 | 7 | 8 | 3 | 8 | 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 |          |
|                             | 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 |   |          |
|                             |           | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |   |          |
|                             |           | 3           | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 |   |          |
|                             |           | 6           | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |   |          |

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 |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Histiocytic Sarcoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Pancreas                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Salivary Glands                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Sublingual Gland, Adenoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Stomach, Forestomach                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Stomach, Glandular                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS MALE | DAY ON TEST |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |    | * TOTALS |
|----------------------|-------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----|----------|
|                      | 07          | 07  | 06  | 07  | 07  | 07  | 07  | 07  | 07  | 07  | 07  | 07  | 06  | 07  | 07  | 06  | 07  | 07  | 05  | 07  | 06  | 07  | 07  | 06 |          |
| 500 mg/kg            | 27          | 29  | 43  | 28  | 27  | 28  | 29  | 28  | 27  | 29  | 28  | 27  | 29  | 28  | 27  | 29  | 28  | 27  | 29  | 28  | 27  | 29  | 28  | 1  |          |
| ANIMAL ID            | 001         | 001 | 003 | 003 | 004 | 004 | 004 | 004 | 004 | 005 | 006 | 007 | 008 | 009 | 009 | 009 | 009 | 009 | 009 | 009 | 009 | 009 | 009 |    |          |
|                      | 6           | 7   | 8   | 9   | 0   | 1   | 2   | 3   | 4   | 5   | 6   | 7   | 8   | 9   | 0   | 1   | 2   | 3   | 4   | 5   | 5   | 5   | 6   |    |          |

Fibrous Histiocytoma, Metastatic, Skin

1

**CARDIOVASCULAR SYSTEM**

Blood Vessel

+ 50

Heart

+ 50

Fibrous Histiocytoma, Metastatic, Skin

1

Histiocytic Sarcoma

1

**ENDOCRINE SYSTEM**

Adrenal Cortex

+ + + + + + + + + + + + + + + + M + + + + + + 49

Histiocytic Sarcoma

1

Adrenal Medulla

+ + + + + + + + + + + + + + + + M + + + + + + 49

Pheochromocytoma Benign

1

Islets, Pancreatic

+ 50

Adenoma

2

Parathyroid Gland

M + + + + + + + + + + + + + + + M M + + + + + + 47

Adenoma

1

Pituitary Gland

+ 50

Pars Distalis, Adenoma

13

Pars Distalis, Adenoma, Multiple

1

Pars Intermedia, Adenoma

3

Thyroid Gland

+ 50

Bilateral, C-cell, Adenoma

1

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

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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 |                 |
| <b>WISTAR HAN RATS MALE</b> |                          | 7           | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 7 | 7 | 5 | 7 | 6 | 7 | 7 | 6 |                 |
|                             |                          | 2           | 2 | 4 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 4 | 2 | 2 | 1 | 2 | 2 | 1 | 2 | 1 | 2 | 2 | 2 |                 |
| <b>500 mg/kg</b>            |                          | 7           | 9 | 3 | 8 | 7 | 8 | 9 | 9 | 8 | 7 | 0 | 8 | 9 | 5 | 9 | 7 | 8 | 1 | 7 | 8 | 3 | 8 |                 |
|                             |                          | 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 |                 |
|                             |                          | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |                 |
|                             |                          | 3           | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 |                 |
|                             |                          | 6           | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |                 |
|                             |                          |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>* TOTALS</b> |
|                             | C-cell, Adenoma          | X           |   |   |   |   |   |   |   | X |   |   |   |   |   | X |   |   |   |   |   |   |   | <b>7</b>        |
|                             | Follicular Cell, Adenoma |             |   |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>3</b>        |

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Epididymis                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Histiocytic Sarcoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Preputial Gland                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Prostate                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Seminal Vesicle                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Testes                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Bilateral, Interstitial Cell, Adenoma  |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |

HEMATOPOIETIC SYSTEM

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Bone Marrow                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Histiocytic Sarcoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Lymph Node                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>2</b>  |
| Iliac, Histiocytic Sarcoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Mediastinal, Histiocytic Sarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Renal, Histiocytic Sarcoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</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



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P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS MALE<br>500 mg/kg                                  | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |              | * TOTALS |
|--|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------------|----------|
|  | 0727        | 0728  | 0729  | 0730  | 0731  | 0801  | 0802  | 0803  | 0804  | 0805  | 0806  | 0807  | 0808  | 0809  | 0810  | 0811  | 0812  | 0813  | 0814  | 0815  | 0816  | 0817  | 0818  |              |          |
| ANIMAL ID  | 00136       | 00137 | 00138 | 00139 | 00140 | 00141 | 00142 | 00143 | 00144 | 00145 | 00146 | 00147 | 00148 | 00149 | 00150 | 00151 | 00152 | 00153 | 00154 | 00155 | 00156 | 00157 | 00158 | 00159        |          |
| Lymph Node, Mandibular Histiocytic Sarcoma                         | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50<br>1      |          |
| Lymph Node, Mesenteric Hemangiosarcoma                             | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50<br>1<br>1 |          |
| Spleen Histiocytic Sarcoma   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50<br>1      |          |
| Thymus Fibrous Histiocytoma, Metastatic, Skin Schwannoma Malignant | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | M     | +     | +     | +     | +     | +     | 49<br>1<br>1 |          |
| <b>INTEGUMENTARY SYSTEM</b>  |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |              |          |
| Mammary Gland  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50           |          |
| Skin Fibroma   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | X     | +     | +     | +     | +     | +     | 50<br>2      |          |
| Skin Fibrous Histiocytoma  |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1            |          |
| Skin Histiocytic Sarcoma   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1            |          |
| Skin Keratoacanthoma   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       | 1            |          |
| Skin Squamous Cell Papilloma                                       |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1            |          |
| Skin Subcutaneous Tissue, Schwannoma Malignant                     |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1            |          |
| <b>MUSCULOSKELETAL SYSTEM</b>                                      |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |              |          |
| Bone   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 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: 20320 - 03

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P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

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Lab: BAT

|                             |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |
|-----------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|
| <b>WISTAR HAN RATS MALE</b> | 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   | 7 | 7 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 7 | 7 | 5 | 7 | 6 | 7 | 7 | 7 | 6 | 6 |                 |
| <b>500 mg/kg</b>            |             | 2 | 2 | 4 | 2 | 2 | 2 | 2 | 2 | 2 | 4 | 2 | 2 | 1 | 2 | 2 | 1 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 5 |                 |
|                             |             | 7 | 9 | 3 | 8 | 7 | 8 | 9 | 9 | 8 | 7 | 0 | 8 | 9 | 5 | 9 | 7 | 8 | 1 | 7 | 8 | 3 | 8 | 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 |                 |
|                             |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |                 |
|                             |             | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 |                 |
|                             |             | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | <b>* TOTALS</b> |

**NERVOUS SYSTEM**

|                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|-------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Brain                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Meninges, Histiocytic Sarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Peripheral Nerve              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Spinal Cord                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |

**RESPIRATORY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Lung                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Histiocytic Sarcoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Mediastinum, Lipoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |
| Nose                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Trachea                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |

**SPECIAL SENSES SYSTEM**

|                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|---------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Eye                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Harderian Gland     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Histiocytic Sarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |

**URINARY SYSTEM**

|                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |           |
|---------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------|
| Kidney              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | <b>50</b> |
| Histiocytic Sarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>1</b>  |

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

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Lab: BAT

| Wistar Han Rats Male    | DAY ON TEST |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     | * TOTALS |     |     |     |    |
|-------------------------|-------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------|-----|-----|-----|----|
|                         | 07          | 07  | 06  | 07  | 07  | 07  | 07  | 07  | 07  | 07  | 07  | 07  | 07  | 06  | 07  | 07  | 06  | 07  | 07  | 05  | 07  | 06  |          | 07  | 07  | 07  | 06 |
| 500 mg/kg               | 27          | 29  | 43  | 28  | 27  | 28  | 29  | 29  | 28  | 27  | 29  | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0        | 0   | 0   | 0   |    |
| ANIMAL ID               | 001         | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 001 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000 | 000      | 000 | 000 | 000 |    |
|                         | 31          | 33  | 33  | 33  | 44  | 44  | 44  | 44  | 44  | 44  | 44  | 44  | 44  | 44  | 44  | 44  | 55  | 55  | 55  | 55  | 55  | 55  | 55       | 55  | 55  | 55  |    |
|                         | 67          | 78  | 89  | 90  | 11  | 22  | 33  | 44  | 55  | 66  | 77  | 88  | 99  | 00  | 01  | 02  | 03  | 04  | 05  | 06  | 07  | 08  | 09       | 00  | 00  | 00  |    |
| Urinary Bladder         | +           | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +        | +   | +   | +   | 50 |
| <b>SYSTEMIC LESIONS</b> |             |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |          |     |     |     |    |
| Multiple Organ          | +           | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +        | +   | +   | +   | 50 |
| Histiocytic Sarcoma     |             |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |          |     |     |     | 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                      |            | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |
|----------------------|------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|
| WISTAR HAN RATS MALE | 1000 mg/kg | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    |
|                      |            | 7           | 6 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 3 | 7 | 6 | 7 | 7 | 7 | 7 | 7 |                    |
|                      |            | 2           | 7 | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 0 | 2 | 2 | 8 | 8 | 2 | 8 | 9 | 0 | 0 | 0 | 0 |                    |
|                      |            | 7           | 2 | 9 | 8 | 7 | 9 | 7 | 7 | 9 | 7 | 8 | 8 | 5 | 8 | 7 | 7 | 9 | 8 | 7 | 8 | 9 | 8 | 8 | 8 |                    |
|                      |            | 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 |                    |
|                      |            | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |                    |
|                      |            | 6           | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 |                    |
|                      |            | 1           | 2 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 4 | 5 | 7 | 8                  |

ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymphoma Malignant        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Squamous Cell Papilloma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 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: 20320 - 03  
 Test Type: CHRONIC  
 Route: GAVAGE  
 Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
 Tetrabromobisphenol A  
 CAS Number: 79-94-7

Date Report Requested: 01/23/2013  
 Time Report Requested: 15:06:22  
 First Dose M/F: 07/25/07 / 07/26/07  
 Lab: BAT

| WISTAR HAN RATS MALE |  | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | males<br>(cont...) |                  |
|----------------------|--|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--------------------|------------------|
| 1000 mg/kg           |  | 0<br>7<br>2<br>7 | 0<br>6<br>7<br>2 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>9 | 0<br>5<br>1<br>7 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>8 | 0<br>6<br>2<br>5 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>7 | 0<br>3<br>8<br>9 | 0<br>6<br>0<br>8 | 0<br>7<br>2<br>7 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 |                    | 0<br>7<br>2<br>8 |
| 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                |
|                      |  | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                | 1                  | 1                |
|                      |  | 6                | 6                | 6                | 6                | 6                | 6                | 6                | 6                | 7                | 7                | 7                | 7                | 7                | 7                | 7                | 8                | 8                | 8                | 8                | 8                | 8                  | 8                |
|                      |  | 1                | 2                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 2                  | 8                |

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

|                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Heart                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Carcinoma, Metastatic, Kidney |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoma Malignant            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**ENDOCRINE SYSTEM**

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Adrenal Medulla                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Islets, Pancreatic               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |
| Parathyroid Gland                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + |
| Pituitary Gland                  | M | + | + | + | + | + | + | + | + | + | + | + | + | + | I | + | + | + | + | + | + | + |
| Pars Distalis, Adenoma           |   | X |   |   |   | X |   |   | X |   |   |   |   |   |   |   |   | X | X |   |   |   |
| Pars Distalis, Adenoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pars Intermedia, Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Thyroid Gland                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| C-cell, Adenoma                  |   |   |   | X |   | X |   |   |   |   |   |   |   |   | X |   | X |   |   |   |   |   |
| Follicular Cell, Adenoma         |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |

**GENERAL BODY SYSTEM**

NONE

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

Experiment Number: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

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 |
|-----------------------------|------------------|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>WISTAR HAN RATS MALE</b> |                  | 7                      | 6 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 3 | 7 | 6 | 7 | 7 | 7 | 7 |
|                             |                  | 2                      | 7 | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 0 | 2 | 2 | 8 | 2 | 0 | 2 | 2 | 2 | 2 |
|                             |                  | 7                      | 2 | 9 | 8 | 7 | 9 | 7 | 7 | 8 | 9 | 7 | 9 | 8 | 5 | 8 | 7 | 7 | 9 | 8 | 7 | 8 | 9 | 8 |
| <b>1000 mg/kg</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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                             | <b>ANIMAL ID</b> | 1                      | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                             | 6                | 6                      | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 |   |
|                             | 1                | 2                      | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 4 | 5 |   |
|                             |                  | <b>males (cont...)</b> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**GENITAL SYSTEM**

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Epididymis                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Preputial Gland            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Prostate                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Seminal Vesicle            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Testes                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Histiocytic Sarcoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Interstitial Cell, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

**HEMATOPOIETIC SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymphoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mediastinal, Lymphoma Malignant        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreatic, Lymphoma Malignant         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node, Mandibular                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node, Mesenteric                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymphoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Spleen                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

\* .. 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: 20320 - 03

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CAS Number: 79-94-7

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Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                      |  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |
|----------------------|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|
| WISTAR HAN RATS MALE |  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    | 0 |
| 1000 mg/kg           |  | 7           | 6 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 3 | 7 | 6 | 7 |                    | 7 |
| ANIMAL ID            |  | 2           | 7 | 2 | 2 | 2 | 2 | 1 | 2 | 2 | 2 | 2 | 2 | 0 | 2 | 2 | 8 | 2 | 0 | 2 | 2 | 2                  |   |
|                      |  | 7           | 2 | 9 | 8 | 7 | 9 | 7 | 8 | 9 | 7 | 9 | 8 | 5 | 8 | 7 | 7 | 9 | 8 | 9 | 8 | 8                  |   |
|                      |  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 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                  |   |
|                      |  | 6           | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8                  |   |
|                      |  | 1           | 2 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2                  |   |

Histiocytic Sarcoma  
Lymphoma Malignant

Thymus  
Lymphoma Malignant  
Thymoma Benign

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

INTEGUMENTARY SYSTEM

Mammary Gland

Skin  
Keratoacanthoma  
Schwannoma Malignant  
Squamous Cell Papilloma  
Subcutaneous Tissue, Fibrous Histiocytoma

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

MUSCULOSKELETAL SYSTEM

Bone  
Skeletal Muscle  
Rhabdomyosarcoma

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

NERVOUS SYSTEM

Brain  
Granular Cell Tumor Benign

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

RESPIRATORY SYSTEM

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

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

Experiment Number: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                                    |  | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | males<br>(cont...) |
|------------------------------------|--|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------------------|
| WISTAR HAN RATS MALE               |  | 07          | 06     | 07     | 07     | 07     | 07     | 05     | 07     | 07     | 07     | 07     | 07     | 07     | 06     | 07     | 07     | 03     | 06     | 07     | 07     |                    |
| 1000 mg/kg                         |  | 27          | 72     | 29     | 28     | 27     | 29     | 77     | 28     | 29     | 27     | 29     | 28     | 28     | 55     | 88     | 27     | 73     | 29     | 88     | 27     | 29                 |
| ANIMAL ID                          |  | 001616      | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616 | 001616             |
| Lung                               |  | +           | +      | +      | X      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +                  |
| Alveolar/Bronchiolar Adenoma       |  |             |        |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |                    |
| Carcinoma, Metastatic, Kidney      |  |             |        |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |                    |
| Nose                               |  | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +                  |
| Trachea                            |  | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +                  |
| SPECIAL SENSES SYSTEM              |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |                    |
| Eye                                |  | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +                  |
| Harderian Gland                    |  | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +                  |
| URINARY SYSTEM                     |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |                    |
| Kidney                             |  | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +                  |
| Lymphoma Malignant                 |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |                    |
| Renal Tubule, Carcinoma            |  |             |        |        |        |        |        |        |        |        |        |        |        | X      |        |        |        |        |        |        |        |                    |
| Transitional Epithelium, Carcinoma |  |             |        |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |                    |
| Urinary Bladder                    |  | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +                  |
| SYSTEMIC LESIONS                   |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |                    |
| Multiple Organ                     |  | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +                  |
| Histiocytic Sarcoma                |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |                    |
| Lymphoma Malignant                 |  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |                    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
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Experiment Number: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS MALE<br>1000 mg/kg | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |
|------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|
|                                    | 0728        | 0727  | 0729  | 0727  | 0727  | 0727  | 0725  | 0727  | 0725  | 0727  | 0727  | 0727  | 0727  | 0727  | 0725  | 0724  | 0727  | 0727  | 0727  | 0725  | 0727  | 0727  | 0726  | 0727  |          |
| ANIMAL ID                          | 00189       | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 |          |
| Blood Vessel                       | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50    |          |
| Heart                              | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50    |          |
| Carcinoma, Metastatic, Kidney      |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1     |          |
| Lymphoma Malignant                 |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       | 1     |          |

**ENDOCRINE SYSTEM**

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Adrenal Cortex                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Adenoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |    | 1 |
| Adrenal Medulla                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Islets, Pancreatic               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| Adenoma                          | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |   |
| Parathyroid Gland                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |   |
| Pituitary Gland                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |   |
| Pars Distalis, Adenoma           | X |   |   |   | X |   |   |   |   |   |   |   | X |   |   | X | X | X |   | X |   |   | 13 |   |
| Pars Distalis, Adenoma, Multiple |   |   |   |   |   |   |   |   | X |   | X |   |   |   |   |   |   |   |   | X |   |   | 3  |   |
| Pars Intermedia, Adenoma         |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 2  |   |
| Thyroid Gland                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |   |
| C-cell, Adenoma                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | 5  |   |
| Follicular Cell, Adenoma         |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   | 2  |   |

**GENERAL BODY SYSTEM**

NONE

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

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

Experiment Number: 20320 - 03

Test Type: CHRONIC

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Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS MALE<br>1000 mg/kg | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |       |       |       |       |       |       |      |
|------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|-------|-------|-------|-------|-------|------|
|                                    | 0728        | 0727  | 0729  | 0722  | 0727  | 0721  | 0728  | 0723  | 0728  | 0727  | 0727  | 0727  | 0727  | 0728  | 0725  | 0724  | 0727  | 0722  | 0729  | 0729  |          | 0724  | 0728  | 0728  | 0727  | 0726  | 0727  | 0728 |
|                                    | 0           | 0     | 0     | 0     | 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                          | 00189       | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 | 00119    | 00119 | 00119 | 00119 | 00119 | 00119 | 00119 |      |

GENITAL SYSTEM

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Epididymis                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Preputial Gland            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Prostate                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Seminal Vesicle            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Testes                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Histiocytic Sarcoma        |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Interstitial Cell, Adenoma |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | 3  |

HEMATOPOIETIC SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymphoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymph Node                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Mediastinal, Lymphoma Malignant        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Pancreatic, Lymphoma Malignant         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymph Node, Mandibular                 | + | + | + | + | M | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | 48 |
| Fibrous Histiocytoma, Metastatic, Skin |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymph Node, Mesenteric                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymphoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Spleen                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

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+ .. Tissue examined microscopically  
X .. Lesion present  
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Tetrabromobisphenol A

CAS Number: 79-94-7

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| WISTAR HAN RATS MALE<br>1000 mg/kg        | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |    | * TOTALS |
|---|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----|----------|
|   | 0728        | 0727  | 0729  | 0722  | 0727  | 0721  | 0725  | 0728  | 0723  | 0727  | 0722  | 0727  | 0722  | 0727  | 0722  | 0727  | 0722  | 0727  | 0722  | 0727  | 0722  | 0727  | 0722  |    |          |
| ANIMAL ID                                 | 00189       | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 |    |          |
| Histiocytic Sarcoma                       |             |       |       |       |       |       |       |       |       | X     |       |       |       |       |       |       |       |       |       |       |       |       |       | 1  |          |
| Lymphoma Malignant                        |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       | 1  |          |
| Thymus                                    | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50 |          |
| Lymphoma Malignant                        |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       | 1  |          |
| Thymoma Benign                            | X           |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 3  |          |
| <b>INTEGUMENTARY SYSTEM</b>               |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |    |          |
| Mammary Gland                             | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50 |          |
| Skin                                      | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50 |          |
| Keratoacanthoma                           |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 2  |          |
| Schwannoma Malignant                      |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       | 2  |          |
| Squamous Cell Papilloma                   |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1  |          |
| Subcutaneous Tissue, Fibrous Histiocytoma |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1  |          |
| <b>MUSCULOSKELETAL SYSTEM</b>             |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |    |          |
| Bone                                      | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50 |          |
| Skeletal Muscle                           |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1  |          |
| Rhabdomyosarcoma                          |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | X     |       | 1  |          |
| <b>NERVOUS SYSTEM</b>                     |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |    |          |
| Brain                                     | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50 |          |
| Granular Cell Tumor Benign                |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | 1  |          |
| <b>RESPIRATORY SYSTEM</b>                 |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |    |          |

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Lab: BAT

| WISTAR HAN RATS MALE<br>1000 mg/kg | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |       |      |
|------------------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|-------|------|
|                                    | 0728        | 0727  | 0729  | 0727  | 0727  | 0727  | 0725  | 0727  | 0725  | 0727  | 0727  | 0727  | 0727  | 0727  | 0727  | 0725  | 0724  | 0727  | 0727  | 0727  | 0727  | 0725  | 0727  | 0727  |          | 0726  | 0727 |
| ANIMAL ID                          | 00189       | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011 | 00011    | 00011 |      |
| Lung                               | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50    |      |
| Alveolar/Bronchiolar Adenoma       |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1     |      |
| Carcinoma, Metastatic, Kidney      |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1     |      |
| Nose                               | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50    |      |
| Trachea                            | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50    |      |
| <b>SPECIAL SENSES SYSTEM</b>       |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |      |
| Eye                                | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50    |      |
| Harderian Gland                    | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50    |      |
| <b>URINARY SYSTEM</b>              |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |      |
| Kidney                             | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50    |      |
| Lymphoma Malignant                 |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1     |      |
| Renal Tubule, Carcinoma            |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1     |      |
| Transitional Epithelium, Carcinoma |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1     |      |
| Urinary Bladder                    | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50    |      |
| <b>SYSTEMIC LESIONS</b>            |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          |       |      |
| Multiple Organ                     | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +        | 50    |      |
| Histiocytic Sarcoma                |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 1     |      |
| Lymphoma Malignant                 |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |          | 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

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

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\* .. Total animals with tissue examined microscopically; Total animals with tumor  
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| Wistar Han Rats Female | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | females (cont...) |
|------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-------------------|
|                        | 0364        | 0656 | 0729 | 0726 | 0738 | 0778 | 0848 | 0868 | 0944 | 0974 | 0979 | 0999 | 0999 | 0999 | 0999 | 0999 | 0999 | 0999 | 0999 | 0999 | 0999 | 0999 | 0999 | 0999 |                   |
| 0 mg/kg                | 0022        | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 |                   |
|                        | 1           | 2    | 3    | 4    | 5    | 6    | 7    | 8    | 9    | 0    | 3    | 4    | 5    | 6    | 8    | 9    | 0    | 1    | 2    | 3    | 4    | 5    | 6    | 7    | 8                 |

ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum<br>Leiomyosarcoma                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver<br>Hepatocellular Adenoma                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | + | + | + | + |
| Mesentery  |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreas<br>Granulosa Cell Tumor Malignant, Metastatic,<br>Ovary | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Salivary Glands  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

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Tetrabromobisphenol A

CAS Number: 79-94-7

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Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | females<br>(cont...) |
|------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--|----------------------|
|                        | 0<br>3<br>6<br>4 | 0<br>6<br>5<br>6 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>6 | 0<br>7<br>3<br>8 | 0<br>7<br>2<br>4 | 0<br>3<br>6<br>8 | 0<br>4<br>6<br>4 | 0<br>3<br>6<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>3<br>0 | 0<br>7<br>3<br>0 | 0<br>5<br>4<br>5 | 0<br>5<br>4<br>5 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>2<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 mg/kg                | 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                |  |                      |
|                        | 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                | 2                | 2                | 2                | 2                | 2                | 2                | 2                | 3                | 3                | 3                | 3                | 3                | 3                | 3                | 4                | 4                | 4                | 4                | 4                | 4                | 4                |  |                      |
|                        | 1                | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 3                | 4                | 5                | 6                | 8                | 9                | 0                | 1                | 2                | 3                | 4                | 5                | 6                |  |                      |

Leiomyosarcoma

CARDIOVASCULAR SYSTEM

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Blood Vessel                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Heart                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Endocardium, Schwannoma Benign |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

ENDOCRINE SYSTEM

|                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenoma                             |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Carcinoma                           |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Adrenal Medulla                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pheochromocytoma Benign             |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |
| Islets, Pancreatic                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Parathyroid Gland                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + |
| Pituitary Gland                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pars Distalis, Adenoma              |   | X |   | X |   |   | X | X | X |   |   |   |   | X |   |   | X | X |   |   |   | X |   |
| Pars Distalis, Adenoma, Multiple    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pars Intermedia, Adenoma            |   |   |   |   | X |   |   |   |   |   |   |   |   |   | X |   |   |   | X |   |   |   |   |
| Thyroid Gland                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Bilateral, C-cell, Adenoma          |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Bilateral, Follicular Cell, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |
| C-cell, Adenoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   | X |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
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Experiment Number: 20320 - 03  
Test Type: CHRONIC  
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P04: NEOPLASMS BY INDIVIDUAL ANIMAL  
Tetrabromobisphenol A  
CAS Number: 79-94-7

Date Report Requested: 01/23/2013  
Time Report Requested: 15:06:22  
First Dose M/F: 07/25/07 / 07/26/07  
Lab: BAT

| WISTAR HAN RATS FEMALE | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | females<br>(cont...) |
|------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------------------|
|                        | 0364        | 0656 | 0729 | 0726 | 0730 | 0738 | 0668 | 0664 | 0034 | 0374 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 | 0779 |                      |
| 0 mg/kg                | 0022        | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022 | 0022                 |

Follicular Cell, Adenoma

### GENERAL BODY SYSTEM

NONE

### GENITAL SYSTEM

Clitoral Gland

+ +

Ovary  
Granulosa Cell Tumor Malignant  
Sex Cord Stromal Tumor, Benign, Mixed Cell

+  
X X

Uterus  
Adenocarcinoma  
Adenocarcinoma, Multiple  
Polyp Stromal

+  
X

Vagina  
Leiomyoma

+  
X

### HEMATOPOIETIC SYSTEM

Bone Marrow

+ +

Lymph Node, Mandibular

+ +

Lymph Node, Mesenteric  
Hemangiosarcoma

+ +

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Lab: BAT

| WISTAR HAN RATS FEMALE<br>0 mg/kg | 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 |   |                      |   |   |   |   |   |   |
|                                   | 3           | 6 | 7 | 7 | 7 | 7 | 3 | 6 | 4 | 3 | 7 | 7 | 7 | 7 | 7 | 7 | 3 | 3 | 3 | 4 | 4 | 3 | 3 | 2 |                      | 7 | 7 | 7 | 3 | 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 | 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 | 2 | 2 | 2 | 2 | 2 |
|                                   |             | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4                    | 4 | 4 | 4 | 4 | 4 | 4 |
|                                   |             | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 3 | 4 | 5 | 6 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7                    | 8 |   |   |   |   |   |

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Spleen         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Thymus         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Sarcoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Thymoma Benign |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

INTEGUMENTARY SYSTEM

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Mammary Gland                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |  |
| Adenocarcinoma                       |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Adenoma                              |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Adenoma, Multiple                    |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Fibroadenoma                         |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Fibroadenoma, Multiple               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Skin                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Subcutaneous Tissue, Hemangiosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

MUSCULOSKELETAL SYSTEM

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

NERVOUS SYSTEM

|       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

RESPIRATORY SYSTEM

|                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|---------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
| Lung                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Adenocarcinoma, Metastatic, Uterus    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Carcinoma, Metastatic, Adrenal Cortex |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |

\* .. 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                        |  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |
|------------------------|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
| WISTAR HAN 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 mg/kg                |  | 3           | 6 | 7 | 7 | 7 | 7 | 3 | 6 | 4 | 3 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 3 | 3 | 3 | 4 | 4 | 5 |   |                      |
| ANIMAL ID              |  | 6           | 5 | 2 | 2 | 3 | 2 | 6 | 6 | 6 | 6 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 4 | 4 | 3 | 3 | 2 | 2 |   |                      |
|                        |  | 4           | 6 | 9 | 6 | 0 | 8 | 4 | 8 | 4 | 4 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 5 | 5 | 0 | 0 | 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 |   |                      |
|                        |  | 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 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |   |                      |
|                        |  | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 3 | 4 | 5 | 6 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8                    |

Granulosa Cell Tumor Malignant, Metastatic, Ovary

Olfactory Neuroblastoma, Metastatic, Nose

Nose

Olfactory Neuroblastoma

Trachea

SPECIAL SENSES SYSTEM

Eye

Harderian Gland

URINARY SYSTEM

Kidney

Urinary Bladder

Granulosa Cell Tumor Malignant, Metastatic, Ovary

Transitional Epithelium, Papilloma

SYSTEMIC LESIONS

Multiple Organ

\* .. 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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**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Tetrabromobisphenol A

CAS Number: 79-94-7

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First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                               |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|-------------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| <b>WISTAR HAN RATS FEMALE</b> | DAY ON TEST | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 07 | 06 | 06 | 07 | 05 | 07 | 07 | 06 | 05 | 07 |
|                               | ANIMAL ID   | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 |
| <b>0 mg/kg</b>                |             | 95 | 88 | 90 | 80 | 88 | 90 | 88 | 90 | 88 | 90 | 88 | 90 | 88 | 90 | 88 | 90 | 88 | 90 | 88 | 90 | 88 | 90 | 88 | 90 |
| <b>* TOTALS</b>               |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |

**ALIMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Esophagus  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Large, Cecum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Large, Colon   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Large, Rectum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Small, Duodenum<br>Leiomyosarcoma                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | + | + | + | + | + | + | + | 50<br>1 |
| Intestine Small, Ileum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Small, Jejunum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Liver<br>Hepatocellular Adenoma                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1 |
| Mesentery  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2       |
| Pancreas<br>Granulosa Cell Tumor Malignant, Metastatic,<br>Ovary | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | + | 50<br>1 |
| Salivary Glands  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Stomach, Forestomach   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Stomach, Glandular   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |

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 + .. Tissue examined microscopically  
 X .. Lesion present  
 I .. Insufficient tissue

M .. Missing tissue  
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First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |
|------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|
|                        | 0729        | 0725 | 0728 | 0722 | 0723 | 0720 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 | 0727 |          |
| 0 mg/kg                | 0049        | 0003 | 0004 | 0005 | 0006 | 0007 | 0008 | 0009 | 0000 | 0001 | 0002 | 0004 | 0005 | 0007 | 0008 | 0009 | 0011 | 0012 | 0014 | 0015 | 0016 | 0017 | 0018 | 0019 | 1        |

Leiomyosarcoma

X

1

**CARDIOVASCULAR SYSTEM**

Blood Vessel

+ 50

Heart

+ 50

Endocardium, Schwannoma Benign

1

**ENDOCRINE SYSTEM**

Adrenal Cortex

+ 50

Adenoma

1

Carcinoma

1

Adrenal Medulla

+ M 49

Pheochromocytoma Benign

2

Islets, Pancreatic

+ 50

Parathyroid Gland

+ M 48

Pituitary Gland

+ 50

Pars Distalis, Adenoma

X X X X X X X X X X X 20

Pars Distalis, Adenoma, Multiple

X 1

Pars Intermedia, Adenoma

X 4

Thyroid Gland

+ 50

Bilateral, C-cell, Adenoma

1

Bilateral, Follicular Cell, Adenoma

1

C-cell, Adenoma

X X X 6

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

+ .. Tissue examined microscopically

X .. Lesion present

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| WISTAR HAN RATS FEMALE<br>0 mg/kg | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |      |      |      |      |      |      |   |
|-----------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|------|------|------|------|------|------|---|
|                                   | 0729        | 0725 | 0728 | 0722 | 0733 | 0728 | 0720 | 0728 | 0720 | 0728 | 0720 | 0728 | 0720 | 0728 | 0720 | 0728 | 0720 | 0728 | 0720 | 0728 |          |      |      |      |      |      |      |      |   |
| ANIMAL ID                         | 0049        | 0053 | 0054 | 0055 | 0056 | 0057 | 0058 | 0059 | 0060 | 0061 | 0062 | 0063 | 0064 | 0065 | 0066 | 0067 | 0068 | 0069 | 0070 | 0071 | 0072     | 0073 | 0074 | 0075 | 0076 | 0077 | 0078 | 0079 |   |
| Follicular Cell, Adenoma          |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |          |      |      |      |      |      |      | X    | 2 |

GENERAL BODY SYSTEM

NONE

GENITAL SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Clitoral Gland                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Ovary                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Granulosa Cell Tumor Malignant             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | 1  |
| Sex Cord Stromal Tumor, Benign, Mixed Cell |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Uterus                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma                             |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Adenocarcinoma, Multiple                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Polyp Stromal                              |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Vagina                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Leiomyoma                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

HEMATOPOIETIC SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Hemangiosarcoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | 1  |

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+ .. Tissue examined microscopically  
X .. Lesion present  
I .. Insufficient tissue

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Lab: BAT

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|---------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|--|--|
|                                       | 0729        | 0725 | 0728 | 0722 | 0733 | 0723 | 0738 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 |          |  |  |
| ANIMAL ID                             | 0049        | 0003 | 0004 | 0005 | 0006 | 0007 | 0008 | 0009 | 0010 | 0011 | 0012 | 0014 | 0015 | 0017 | 0018 | 0019 | 0021 | 0022 | 0023 | 0024 | 0025 | 0026 | 0027 | 0028 | 0029     |  |  |
| Spleen                                | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |  |
| Thymus                                | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |  |
| Sarcoma                               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      | 1        |  |  |
| Thymoma Benign                        |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |  |
| <b>INTEGUMENTARY SYSTEM</b>           |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |  |
| Mammary Gland                         | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |  |
| Adenocarcinoma                        |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |  |
| Adenoma                               |             |      |      |      |      |      |      |      |      |      |      |      | X    | X    |      |      |      |      |      |      |      |      |      |      | 3        |  |  |
| Adenoma, Multiple                     |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |  |
| Fibroadenoma                          |             | X    |      |      |      | X    |      |      |      | X    | X    |      |      |      |      |      |      | X    |      |      |      |      |      | 7    |          |  |  |
| Fibroadenoma, Multiple                |             |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |  |
| Skin                                  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |  |
| Subcutaneous Tissue, Hemangiosarcoma  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |  |
| <b>MUSCULOSKELETAL SYSTEM</b>         |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |  |
| Bone                                  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |  |
| <b>NERVOUS SYSTEM</b>                 |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |  |
| Brain                                 | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |  |
| <b>RESPIRATORY SYSTEM</b>             |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |  |
| Lung                                  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |  |
| Adenocarcinoma, Metastatic, Uterus    |             |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |  |
| Carcinoma, Metastatic, Adrenal Cortex |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |  |

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Route: GAVAGE

Species/Strain: RATS/Wistar Han

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE                            | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |         | * TOTALS |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|---------|----------|
|   | 0729        | 0725 | 0728 | 0722 | 0733 | 0723 | 0728 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 | 0700 |         |          |
| <b>0 mg/kg</b>                                    | 0049        | 0053 | 0054 | 0055 | 0056 | 0057 | 0058 | 0059 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 |         |          |
| Granulosa Cell Tumor Malignant, Metastatic, Ovary |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    | 1    |         |          |
| Olfactory Neuroblastoma, Metastatic, Nose         |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    | 1       |          |
| Nose Olfactory Neuroblastoma                      | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | X    | 50<br>1 |          |
| Trachea   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50      |          |
| <b>SPECIAL SENSES SYSTEM</b>                      |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |         |          |
| Eye   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50      |          |
| Harderian Gland                                   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50      |          |
| <b>URINARY SYSTEM</b>                             |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |         |          |
| Kidney  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50      |          |
| Urinary Bladder                                   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50      |          |
| Granulosa Cell Tumor Malignant, Metastatic, Ovary |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    | 1    |         |          |
| Transitional Epithelium, Papilloma                |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1       |          |
| <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: 20320 - 03

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|                               |                  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |   |   |   |
|-------------------------------|------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|---|---|---|
| <b>WISTAR HAN RATS FEMALE</b> |                  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      | 0 | 0 |   |   |
|                               |                  | 7           | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 3 | 3 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 5 |                      | 6 | 6 | 7 |   |
|                               | <b>250 mg/kg</b> | 2           | 2 | 2 | 2 | 2 | 5 | 2 | 2 | 8 | 5 | 2 | 3 | 3 | 2 | 2 | 3 | 2 | 2 | 2 | 2 | 4                    | 9 | 5 | 2 |   |
|                               |                  | 8           | 9 | 8 | 9 | 9 | 2 | 8 | 3 | 5 | 4 | 0 | 0 | 9 | 9 | 0 | 9 | 8 | 8 | 9 | 9 | 8                    | 3 | 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 |   |
|                               |                  | 2           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3                    | 3 | 3 | 3 |   |
|                               |                  | 8           | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0                    | 0 | 0 | 0 |   |
|                               |                  | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1                    | 2 | 3 | 4 | 5 |

**ALIMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum                                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon<br>Adenocarcinoma, Metastatic, Uterus | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small<br>Leiomyosarcoma, Metastatic, Uterus        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Intestine Small, Duodenum                                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum                                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hepatocellular Adenoma                                       |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |
| Malignant Mixed Mullerian Tumor, Metastatic, Uterus          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Mesentery  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Adenocarcinoma, Metastatic, Uterus                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   | + | + |
| Leiomyosarcoma, Metastatic, Uterus                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Malignant Mixed Mullerian Tumor, Metastatic, Uterus          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
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| WISTAR HAN RATS FEMALE<br><br>250 mg/kg | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | females<br>(cont...) |                  |
|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|------------------|
|   | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>6<br>5<br>2 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>8 | 0<br>3<br>8<br>3 | 0<br>3<br>5<br>5 | 0<br>6<br>2<br>4 | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>9 | 0<br>7<br>3<br>9 | 0<br>7<br>2<br>0 | 0<br>7<br>3<br>9 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>9 | 0<br>5<br>4<br>8 | 0<br>6<br>9<br>3 |           |                      | 0<br>6<br>5<br>6 |
|   | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0                | 0         | 0                    | 0                |
|   | 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                | 3         | 3                    | 3                |
|   | 8                | 8                | 8                | 8                | 8                | 8                | 8                | 8                | 8                | 9                | 9                | 9                | 9                | 9                | 9                | 9                | 9                | 9                | 9                | 0                | 0                | 0         | 0                    |                  |

|                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Pituitary Gland                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pars Distalis, Adenoma           | X |   | X | X |   | X | X | X |   |   | X |   |   |   |   | X | X |   | X |   | X | X |   |
| Pars Distalis, Adenoma, Multiple |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |
| Pars Intermedia, Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Thyroid Gland                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| C-cell, Adenoma                  | X |   |   |   |   |   | X | X |   |   | X | X |   |   |   | X |   |   |   | X |   |   |   |
| Follicular Cell, Adenoma         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |

**GENERAL BODY SYSTEM**

NONE

**GENITAL SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Clitoral Gland                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Ovary   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma, Metastatic, Uterus                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Malignant Mixed Mullerian Tumor, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Uterus  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |
| Leiomyosarcoma                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Malignant Mixed Mullerian Tumor                     |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Polyp Stromal                                       |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   | X |   |
| Sarcoma Stromal                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Cervix, Squamous Cell Carcinoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Vagina  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
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|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------------------------------------|------|------|
| <b>WISTAR HAN RATS FEMALE</b><br><b>250 mg/kg</b> | DAY ON TEST | 078  | 079  | 078  | 072  | 072  | 075  | 072  | 078  | 073  | 073  | 076  | 077  | 077  | 077  | 077  | 077  | 077  | 077  | 077  | 075  | 076  | 076  | 077  | <b>females</b><br><b>(cont...)</b> |      |      |
|   | ANIMAL ID   | 0081 | 0082 | 0083 | 0084 | 0085 | 0086 | 0087 | 0088 | 0089 | 0090 | 0091 | 0092 | 0093 | 0094 | 0095 | 0096 | 0097 | 0098 | 0099 | 0000 | 0001 | 0002 | 0003 |                                    | 0004 | 0005 |
|   |             | 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    |

Granular Cell Tumor Malignant

X

**HEMATOPOIETIC SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |
| Lymph Node, Mandibular                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node, Mesenteric                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Spleen  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma, Metastatic, Uterus                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Malignant Mixed Mullerian Tumor, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Thymus  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma, Metastatic, Uterus                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

**INTEGUMENTARY SYSTEM**

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

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|------------------------|-----------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|---|---|---|
| WISTAR HAN RATS 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 |   |   |
|                        |           | 7           | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 3 | 3 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |                      | 5 | 6 | 6 | 7 |
| 250 mg/kg              |           | 2           | 2 | 2 | 2 | 2 | 5 | 2 | 2 | 8 | 5 | 2 | 3 | 3 | 2 | 2 | 3 | 2 | 2 | 2 | 2 | 4                    | 9 | 9 |   |   |
|                        |           | 8           | 9 | 8 | 9 | 9 | 2 | 9 | 8 | 3 | 5 | 4 | 0 | 0 | 9 | 9 | 0 | 8 | 8 | 9 | 9 | 8                    | 3 | 6 | 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 |   |
|                        |           | 2           | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3                    | 3 | 3 | 3 |   |
|                        |           | 8           | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0                    | 0 | 0 | 0 |   |
|                        |           | 1           | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1                    | 2 | 3 | 4 | 5 |

Squamous Cell Papilloma

X

Subcutaneous Tissue, Adenocarcinoma, Metastatic, Uterus

Subcutaneous Tissue, Malignant Mixed Mullerian Tumor, Metastatic, Uterus

X

Subcutaneous Tissue, Sarcoma

X

MUSCULOSKELETAL SYSTEM

Bone

+ +

Skeletal Muscle

Adenocarcinoma, Metastatic, Uterus

Leiomyosarcoma, Metastatic, Uterus

NERVOUS SYSTEM

Brain

+ +

Granular Cell Tumor Benign

Peripheral Nerve

Spinal Cord

RESPIRATORY SYSTEM

Lung

+ +

Adenocarcinoma, Metastatic, Uterus

X

Malignant Mixed Mullerian Tumor, Metastatic, Uterus

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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE<br>250 mg/kg  | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | ANIMAL ID | females<br>(cont...) |                  |
|--|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|----------------------|------------------|
|  | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>8 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>6<br>5<br>2 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>8 | 0<br>3<br>8<br>3 | 0<br>3<br>5<br>5 | 0<br>6<br>2<br>4 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 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>8 | 0<br>7<br>2<br>8 | 0<br>5<br>4<br>8 | 0<br>6<br>9<br>3 |           |                      | 0<br>6<br>5<br>6 |
| Nose   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
| Trachea  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
| <b>SPECIAL SENSES SYSTEM</b>   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |                  |
| Eye  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
| Harderian Gland  | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
| <b>URINARY SYSTEM</b>  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |                  |
| Kidney<br>Adenocarcinoma, Metastatic, Uterus   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | X                    | +                |
| Urinary Bladder<br>Adenocarcinoma, Metastatic, Uterus<br>Malignant Mixed Mullerian Tumor, Metastatic, Uterus | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |
| <b>SYSTEMIC LESIONS</b>  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |           |                      |                  |
| Multiple Organ   | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +         | +                    | +                |

\* .. 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE                              | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|
|   | 0730        | 0752 | 0768 | 0773 | 0777 | 0777 | 0777 | 0766 | 0777 | 0777 | 0776 | 0777 | 0777 | 0747 | 0777 | 0777 | 0757 | 0777 | 0777 | 0766 |          | 0777 |
| 250 mg/kg   | ANIMAL ID   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |
|   | 0000        | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000     |      |
| Pancreas  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | 50   |
| Adenocarcinoma, Metastatic, Uterus                  |             |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      | X    |          | 3    |
| Leiomyosarcoma, Metastatic, Uterus                  |             |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          | 1    |
| Malignant Mixed Mullerian Tumor, Metastatic, Uterus |             |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X        | 3    |
| Salivary Glands                                     | +           | M    | +    | +    | +    | +    | +    | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | 48   |
| Stomach, Forestomach                                | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | 50   |
| Stomach, Glandular                                  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | 50   |
| Malignant Mixed Mullerian Tumor, Metastatic, Uterus |             |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          | 1    |
| <b>CARDIOVASCULAR SYSTEM</b>                        |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |
| Blood Vessel  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | 50   |
| Heart   | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | 50   |
| <b>ENDOCRINE SYSTEM</b>                             |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |
| Adrenal Cortex                                      | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | 50   |
| Adenocarcinoma, Metastatic, Uterus                  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          | 1    |
| Adrenal Medulla                                     | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | 50   |
| Islets, Pancreatic                                  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | 50   |
| Parathyroid Gland                                   | +           | M    | M    | M    | M    | +    | +    | M    | +    | +    | M    | +    | M    | +    | +    | M    | +    | +    | +    | +    | +        | 39   |

\* .. 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: 20320 - 03

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P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

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First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE<br><br>250 mg/kg             | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |      |      |      |      |      |  |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|------|------|------|------|------|--|
|   | 0730        | 0752 | 0768 | 0773 | 0777 | 0777 | 0777 | 0766 | 0777 | 0777 | 0777 | 0766 | 0777 | 0777 | 0744 | 0777 | 0777 | 0755 | 0777 | 0777 |          | 0766 | 0777 | 0766 | 0777 | 0777 |  |
| ANIMAL ID   | 0006        | 0007 | 0008 | 0009 | 0010 | 0011 | 0012 | 0013 | 0014 | 0015 | 0016 | 0017 | 0018 | 0019 | 0020 | 0021 | 0022 | 0023 | 0024 | 0025 | 0026     | 0027 | 0028 | 0029 | 0030 |      |  |
| Pituitary Gland                                     | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | +    | +    | +    | 50   |      |  |
| Pars Distalis, Adenoma                              | X           |      | X    | X    |      |      |      |      |      |      | X    | X    |      |      | X    |      | X    |      | X    | X    | X        | X    | X    | X    | 25   |      |  |
| Pars Distalis, Adenoma, Multiple                    |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |          |      |      |      | 2    |      |  |
| Pars Intermedia, Adenoma                            |             |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |          |      |      |      | 1    |      |  |
| Thyroid Gland                                       | +           | M    | +    | +    | +    | +    | +    | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | +    | +    | +    | 48   |      |  |
| C-cell, Adenoma                                     |             |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |          |      | X    |      | 9    |      |  |
| Follicular Cell, Adenoma                            |             |      |      | X    |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |          |      |      |      | 3    |      |  |
| <b>GENERAL BODY SYSTEM</b>                          |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      |      |      |      |  |
| NONE  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      |      |      |      |  |
| <b>GENITAL SYSTEM</b>                               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      |      |      |      |  |
| Clitoral Gland                                      | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | +    | +    | +    | 50   |      |  |
| Ovary   | +           | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | +    | +    | +    | 49   |      |  |
| Adenocarcinoma, Metastatic, Uterus                  |             |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |          |      |      |      | 1    |      |  |
| Malignant Mixed Mullerian Tumor, Metastatic, Uterus |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      |      | 1    |      |  |
| Uterus  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +        | +    | +    | +    | 50   |      |  |
| Adenocarcinoma                                      |             |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      | X    |      |      |          |      |      | 3    |      |      |  |
| Leiomyosarcoma                                      |             |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      | 1    |      |      |  |
| Malignant Mixed Mullerian Tumor                     |             |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X        |      |      | 4    |      |      |  |
| Polyp Stromal                                       | X           |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |          |      |      | 4    |      |      |  |
| Sarcoma Stromal                                     |             |      |      |      |      |      | X    |      | X    |      |      |      |      |      |      |      |      |      |      |      |          |      |      | 2    |      |      |  |
| Cervix, Squamous Cell Carcinoma                     |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      | 1    |      |      |  |
| Vagina  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |      |      |      | 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  
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Experiment Number: 20320 - 03

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Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |  | * TOTALS |
|------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|--|----------|
|                        | 07          | 05 | 06 | 07 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 06 | 07 | 07 | 04 | 07 | 07 | 05 | 07 | 07 | 06 | 07 | 07 |    |  |          |
| 250 mg/kg              | 30          | 27 | 58 | 30 | 29 | 30 | 33 | 41 | 29 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 30 |  |          |
| ANIMAL ID              | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 |  |          |
|                        | 33          | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 |  |          |
|                        | 00          | 00 | 00 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 02 | 03 | 03 |  |          |
|                        | 67          | 78 | 89 | 00 | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 00 | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 00 |  |          |

|  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |   |
|--|--|--|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|---|
| Squamous Cell Papilloma  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |   |
| Subcutaneous Tissue, Adenocarcinoma, Metastatic, Uterus                  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   | 1 |
| Subcutaneous Tissue, Malignant Mixed Mullerian Tumor, Metastatic, Uterus |  |  |  | X |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   | 2 |
| Subcutaneous Tissue, Sarcoma   |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   | 1 |

MUSCULOSKELETAL SYSTEM

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Skeletal Muscle                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Leiomyosarcoma, Metastatic, Uterus |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

NERVOUS SYSTEM

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Brain                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Granular Cell Tumor Benign |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Peripheral Nerve           |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Spinal Cord                |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

RESPIRATORY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma, Metastatic, Uterus                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Malignant Mixed Mullerian Tumor, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

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

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| WISTAR HAN RATS FEMALE<br>250 mg/kg                 | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |  |  |
|---|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|--|--|
|   | 0730        | 0752 | 0768 | 0773 | 0777 | 0777 | 0777 | 0766 | 0777 | 0777 | 0776 | 0777 | 0777 | 0744 | 0777 | 0777 | 0755 | 0772 | 0772 | 0773 | 0773 | 0766 | 0777 | 0777 |          |  |  |
| ANIMAL ID   | 0000        | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000     |  |  |
| Nose  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |  |
| Trachea   | +           | +    | +    | +    | +    | +    | +    | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 49       |  |  |
| <b>SPECIAL SENSES SYSTEM</b>                        |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |  |
| Eye   | +           | M    | +    | +    | +    | +    | +    | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 48       |  |  |
| Harderian Gland                                     | +           | M    | +    | +    | +    | +    | +    | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 48       |  |  |
| <b>URINARY SYSTEM</b>                               |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |  |
| Kidney  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |  |
| Adenocarcinoma, Metastatic, Uterus                  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      | 2        |  |  |
| Urinary Bladder                                     | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |  |
| Adenocarcinoma, Metastatic, Uterus                  |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    | 1        |  |  |
| Malignant Mixed Mullerian Tumor, Metastatic, Uterus |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      | 1        |  |  |
| <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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| Wistar Han Rats Female | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females (cont...) |
|------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-------------------|
|                        | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                   |
| 500 mg/kg              | 5           | 7 | 7 | 6 | 7 | 7 | 3 | 7 | 4 | 7 | 7 | 7 | 3 | 4 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 6 |                   |
|                        | 4           | 2 | 2 | 0 | 3 | 2 | 2 | 3 | 8 | 2 | 2 | 1 | 5 | 3 | 3 | 3 | 3 | 3 | 3 | 2 | 3 | 3 |                   |
|                        | 5           | 9 | 9 | 7 | 0 | 9 | 1 | 0 | 8 | 8 | 9 | 8 | 0 | 0 | 0 | 0 | 0 | 0 | 5 | 0 | 0 | 7 |                   |
|                        | 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 |                   |
|                        |             | 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 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 |                   |
|                        |             | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |   |                   |

ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum<br>Leiomyoma  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Liver<br>Adenocarcinoma, Metastatic, Uterus<br>Leukemia Mononuclear                                  | + | + | + | + | + | + |   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Mesentery<br>Adenocarcinoma, Metastatic, Uterus<br>Leiomyosarcoma, Metastatic, Stomach,<br>Glandular |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreas<br>Adenocarcinoma, Metastatic, Uterus   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | females<br>(cont...) |
|------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|
|                        | 0<br>5<br>4<br>5      | 0<br>7<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>6<br>0<br>7      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>3<br>2<br>1      | 0<br>7<br>3<br>0      | 0<br>4<br>8<br>8      | 0<br>7<br>2<br>8      | 0<br>7<br>2<br>9      | 0<br>3<br>1<br>0      | 0<br>4<br>5<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      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>9      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>6<br>3<br>7      |                       |                       |                      |
| 500 mg/kg              | 0<br>0<br>3<br>3<br>1 | 0<br>0<br>3<br>3<br>2 | 0<br>0<br>3<br>3<br>3 | 0<br>0<br>3<br>3<br>4 | 0<br>0<br>3<br>3<br>5 | 0<br>0<br>3<br>3<br>6 | 0<br>0<br>3<br>3<br>7 | 0<br>0<br>3<br>3<br>8 | 0<br>0<br>3<br>3<br>9 | 0<br>0<br>3<br>4<br>0 | 0<br>0<br>3<br>4<br>1 | 0<br>0<br>3<br>4<br>2 | 0<br>0<br>3<br>4<br>3 | 0<br>0<br>3<br>4<br>4 | 0<br>0<br>3<br>4<br>5 | 0<br>0<br>3<br>4<br>6 | 0<br>0<br>3<br>4<br>7 | 0<br>0<br>3<br>4<br>8 | 0<br>0<br>3<br>4<br>9 | 0<br>0<br>3<br>5<br>0 | 0<br>0<br>3<br>5<br>1 | 0<br>0<br>3<br>5<br>2 | 0<br>0<br>3<br>5<br>3 | 0<br>0<br>3<br>5<br>4 | 0<br>0<br>3<br>5<br>5 |                      |

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Stomach, Forestomach                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Glandular<br>Leiomyosarcoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

CARDIOVASCULAR SYSTEM

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

ENDOCRINE SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adrenal Cortex   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adrenal Medulla  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Islets, Pancreatic<br>Adenoma                                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Parathyroid Gland  | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Pituitary Gland<br>Pars Distalis, Adenoma                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Thyroid Gland<br>C-cell, Adenoma<br>Follicular Cell, Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | females<br>(cont...) |
|------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|----------------------|
|                        | 0<br>5<br>4<br>5 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>6<br>0<br>7 | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>9 | 0<br>3<br>2<br>1 | 0<br>7<br>3<br>0 | 0<br>4<br>8<br>8 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>8 | 0<br>3<br>1<br>0 | 0<br>4<br>5<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 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>9 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>6<br>3<br>7 |   |                      |
| 500 mg/kg              | 0                | 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<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                | 0                |   |                      |
| 0                      | 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                | 3                | 3                | 3                | 3                | 3                | 3                | 3                | 3                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 5                | 5                | 5                | 5                |   |                      |
| 1                      | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 2                | 3                | 4                | 5                |   |                      |

NONE

GENITAL SYSTEM

Clitoral Gland

+ +

Ovary

+ +

Adenocarcinoma, Metastatic, Uterus

Uterus

+ +

Adenocarcinoma

X X X

Adenocarcinoma, Multiple

Adenoma

X

Polyp Stromal

X X

Cervix, Sarcoma Stromal

X

Vagina

+

HEMATOPOIETIC SYSTEM

Bone Marrow

+ +

Lymph Node

Lymph Node, Mandibular

+ +

Lymph Node, Mediastinal

Adenocarcinoma, Metastatic, Uterus

Lymph Node, Mesenteric

+ +

\* .. 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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| WISTAR HAN RATS FEMALE | DAY ON TEST      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |  | females<br>(cont...) |
|------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|--|----------------------|
|                        | 0<br>5<br>4<br>5 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>6<br>0<br>7 | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>9 | 0<br>3<br>2<br>1 | 0<br>7<br>3<br>0 | 0<br>4<br>8<br>8 | 0<br>7<br>2<br>9 | 0<br>7<br>2<br>8 | 0<br>3<br>1<br>0 | 0<br>4<br>5<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 | 0<br>7<br>3<br>0 | 0<br>7<br>2<br>9 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>0 | 0<br>6<br>3<br>7 |   |  |                      |
| 500 mg/kg              | 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 |  |                      |
| 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                | 3                | 3                | 3                | 3                | 3                | 3                | 3                | 3                | 3                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 4                | 5                | 5                | 5                | 5 |  |                      |
| 1                      | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 2                | 3                | 4                | 5                | 6                | 7                | 8                | 9                | 0                | 1                | 2                | 3                | 4                | 5 |  |                      |

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Spleen                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Leukemia Mononuclear               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Thymus                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Thymoma Benign                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |

INTEGUMENTARY SYSTEM

|                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibroadenoma                | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Fibroadenoma, Multiple      |   | X |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |
| Skin                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Squamous Cell Papilloma     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Subcutaneous Tissue, Lipoma |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

MUSCULOSKELETAL SYSTEM

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Skeletal Muscle                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

NERVOUS SYSTEM

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Brain                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Ependymoma Malignant         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Glioma Malignant, Mixed Cell |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                               |   | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |   |   |   |   |
|-------------------------------|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|---|---|---|---|
|                               |   | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          | 0 | 0 |   |   |
| <b>WISTAR HAN RATS FEMALE</b> |   | 7           | 7 | 7 | 4 | 3 | 2 | 6 | 7 | 7 | 5 | 5 | 7 | 7 | 7 | 5 | 7 | 6 | 7 | 6 | 5 | 6        | 6 | 7 | 5 | 7 |
|                               |   | 2           | 2 | 2 | 9 | 7 | 4 | 9 | 2 | 2 | 3 | 3 | 3 | 3 | 2 | 6 | 2 | 3 | 2 | 3 | 2 | 4        | 0 | 2 | 7 | 2 |
| <b>500 mg/kg</b>              |   | 9           | 9 | 8 | 6 | 7 | 3 | 7 | 9 | 9 | 3 | 1 | 0 | 0 | 9 | 1 | 8 | 9 | 9 | 6 | 9 | 2        | 0 | 8 | 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 |
|                               |   | 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 | 5           | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7        | 7 | 7 | 8 |   |
|                               | 6 | 7           | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7        | 8 | 9 | 0 |   |

**ALIMENTARY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Esophagus   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Large, Cecum<br>Leiomyoma               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50<br>1 |
| Intestine Large, Colon                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Large, Rectum                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Small, Duodenum                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Small, Ileum                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Intestine Small, Jejunum                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Liver   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Adenocarcinoma, Metastatic, Uterus                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   | 3       |
| Leukemia Mononuclear                              | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1       |
| Mesentery   |   |   |   |   |   |   |   | + | + |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   | 5       |
| Adenocarcinoma, Metastatic, Uterus                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | 2       |
| Leiomyosarcoma, Metastatic, Stomach,<br>Glandular |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1       |
| Pancreas  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50      |
| Adenocarcinoma, Metastatic, Uterus                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | 1       |
| Salivary Glands                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | 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: 20320 - 03

Test Type: CHRONIC

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Species/Strain: RATS/Wistar Han

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE<br>500 mg/kg                          | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |              | * TOTALS |
|--|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------------|----------|
|  | 0729        | 0729  | 0728  | 0746  | 0737  | 0722  | 0767  | 0777  | 0775  | 0755  | 0777  | 0777  | 0777  | 0755  | 0777  | 0766  | 0776  | 0755  | 0766  | 0766  | 0777  | 0755  | 0777  |              |          |
| ANIMAL ID  | 00356       | 00357 | 00358 | 00359 | 00360 | 00361 | 00362 | 00363 | 00364 | 00365 | 00366 | 00367 | 00368 | 00369 | 00370 | 00371 | 00372 | 00373 | 00374 | 00375 | 00376 | 00377 | 00378 |              |          |
| Stomach, Forestomach   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50           |          |
| Stomach, Glandular<br>Leiomyosarcoma                         | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50<br>1      |          |
| <b>CARDIOVASCULAR SYSTEM</b>                                 |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |              |          |
| Blood Vessel   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50           |          |
| Heart  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50           |          |
| <b>ENDOCRINE SYSTEM</b>                                      |             |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |              |          |
| Adrenal Cortex   | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50           |          |
| Adrenal Medulla  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50           |          |
| Islets, Pancreatic<br>Adenoma                                | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50<br>1      |          |
| Parathyroid Gland  | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | M     | 48           |          |
| Pituitary Gland<br>Pars Distalis, Adenoma                    | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50<br>18     |          |
| Thyroid Gland<br>C-cell, Adenoma<br>Follicular Cell, Adenoma | +           | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | +     | 50<br>5<br>2 |          |

**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: 20320 - 03

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Tetrabromobisphenol A

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|                               |                  | 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 |   |   |          |  |  |
| <b>WISTAR HAN RATS FEMALE</b> | <b>500 mg/kg</b> | 7           | 7 | 7 | 4 | 3 | 2 | 6 | 7 | 7 | 5 | 5 | 7 | 7 | 7 | 5 | 7 | 6 | 7 | 6 | 5 | 6 | 6 | 7 | 5 | 7        |  |  |
|                               |                  | 2           | 2 | 2 | 9 | 7 | 4 | 9 | 2 | 2 | 3 | 3 | 3 | 3 | 2 | 6 | 2 | 3 | 2 | 3 | 2 | 4 | 0 | 2 | 7 | 2        |  |  |
|                               |                  | 9           | 9 | 8 | 6 | 7 | 3 | 7 | 9 | 9 | 3 | 1 | 0 | 0 | 9 | 1 | 8 | 9 | 9 | 6 | 9 | 2 | 0 | 8 | 2 | 9        |  |  |
|                               |                  | 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        |  |  |
|                               |                  | 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           | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 |          |  |  |
|                               |                  | 6           | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | * TOTALS |  |  |

NONE

**GENITAL SYSTEM**

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Clitoral Gland                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Ovary                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 1  |
| Uterus                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma                     | X |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   | X |   | X |   |   |   |   | 7  |
| Adenocarcinoma, Multiple           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 1  |
| Adenoma                            |   |   | X |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Polyp Stromal                      |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Cervix, Sarcoma Stromal            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Vagina                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**HEMATOPOIETIC SYSTEM**

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Bone Marrow                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +  | 50 |
| Lymph Node                         |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Lymph Node, Mandibular             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | 49 |    |
| Lymph Node, Mediastinal            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   | 1  |    |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   | 1  |    |
| Lymph Node, Mesenteric             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
X .. Lesion present  
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|-------------------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|----|--|
|                                     | 07          | 07 | 07 | 04 | 03 | 02 | 06 | 07 | 07 | 05 | 05 | 07 | 07 | 07 | 05 | 07 | 06 | 07 | 06 | 05 | 06 | 06 | 07 | 05 |          | 07 |  |
| ANIMAL ID                           | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00       |    |  |
| Spleen                              | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | 50       |    |  |
| Adenocarcinoma, Metastatic, Uterus  |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | X  |    | 1        |    |  |
| Leukemia Mononuclear                | X           |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1        |    |  |
| Thymus                              | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | M  | +  | +  | 49       |    |  |
| Thymoma Benign                      |             |    |    |    |    |    |    |    |    |    |    |    | X  |    |    |    |    |    |    |    |    |    |    |    | 2        |    |  |
| <b>INTEGUMENTARY SYSTEM</b>         |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |  |
| Mammary Gland                       | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | 50       |    |  |
| Adenoma                             |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 2        |    |  |
| Fibroadenoma                        |             |    |    | X  |    | X  |    |    |    |    | X  |    |    |    |    |    |    | X  |    |    |    |    |    |    | 6        |    |  |
| Fibroadenoma, Multiple              |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | X  |    | 2        |    |  |
| Skin                                | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | 50 |          |    |  |
| Squamous Cell Papilloma             |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | X  |    |    | 1        |    |  |
| Subcutaneous Tissue, Lipoma         |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1        |    |  |
| <b>MUSCULOSKELETAL SYSTEM</b>       |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |  |
| Bone                                | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | 50 |          |    |  |
| Skeletal Muscle                     |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1        |    |  |
| Adenocarcinoma, Metastatic, Uterus  |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1        |    |  |
| <b>NERVOUS SYSTEM</b>               |             |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |    |  |
| Brain                               | +           | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | 50 |          |    |  |
| Ependymoma Malignant                |             |    |    | X  |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | 1        |    |  |
| Glioma Malignant, Mixed Cell        |             |    |    |    | 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                               |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                 |   |
|-------------------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|-----------------|---|
| <b>WISTAR HAN RATS FEMALE</b> | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>* TOTALS</b> |   |
|                               | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                 |   |
|                               | 7           | 7 | 7 | 4 | 3 | 2 | 6 | 7 | 7 | 5 | 5 | 7 | 7 | 7 | 5 | 7 | 6 | 7 | 6 | 5 | 6 | 6 | 7 |                 | 5 |
| <b>500 mg/kg</b>              | ANIMAL ID   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>* TOTALS</b> |   |
|                               | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                 | 0 |
|                               | 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           | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8               |   |
|                               | 6           | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9               | 0 |

**RESPIRATORY SYSTEM**

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Nose                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Trachea                            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SPECIAL SENSES SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | 49 |
| Harderian Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | 49 |

**URINARY SYSTEM**

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lipoma          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Urinary Bladder | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

**SYSTEMIC LESIONS**

|                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Leukemia Mononuclear | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

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First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                               |                   |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |                          |
|-------------------------------|-------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--------------------------|
| <b>WISTAR HAN RATS FEMALE</b> | DAY ON TEST       | 0729  | 0729  | 0531  | 0729  | 0729  | 0729  | 0729  | 0571  | 0770  | 0770  | 0633  | 0634  | 0770  | 0575  | 0664  | 0772  | 0772  | 0722  | 0722  | 0722  | 0675  | 0119  | 0773  | 0773  | 0773  | <b>females (cont...)</b> |
|                               | <b>1000 mg/kg</b> | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 | 00382 |                          |

ALIMENTARY SYSTEM

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Colon             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Jejunum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Leiomyoma                          |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Liver                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Adenoma             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mesentery                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreas                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Salivary Glands                    | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Stomach, Forestomach               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
X .. Lesion present  
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A .. Autolysis precludes evaluation  
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Experiment Number: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

|                               |                   | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |   |   |   |   |
|-------------------------------|-------------------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|---|---|---|---|
| <b>WISTAR HAN RATS FEMALE</b> | <b>1000 mg/kg</b> | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                      | 0 | 0 |   |   |   |
|                               |                   | 7           | 7 | 5 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 6 | 6 | 7 | 7 | 5 | 6 | 7 | 7 | 2 | 2 |                      | 2 | 6 | 1 | 7 | 7 |
|                               |                   | 2           | 2 | 3 | 2 | 2 | 2 | 2 | 0 | 3 | 3 | 0 | 8 | 3 | 2 | 4 | 1 | 2 | 2 | 2 | 1 | 9                    | 3 | 3 | 3 | 3 | 3 |
|                               |                   | 9           | 9 | 1 | 9 | 9 | 9 | 1 | 0 | 0 | 3 | 4 | 0 | 9 | 5 | 4 | 8 | 9 | 9 | 5 | 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 | 0                    | 0 | 0 | 0 | 0 |   |
|                               |                   | 3           | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 4 | 4                    | 4 | 4 | 4 | 4 |   |
|                               |                   | 8           | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0                    | 0 | 0 | 0 | 0 |   |
|                               |                   | 2           | 3 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 0 | 1 | 2 | 3 | 6                    | 7 | 8 | 9 | 0 |   |

GENITAL SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Clitoral Gland                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Ovary                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Adenocarcinoma, Metastatic, Uterus         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Sex Cord Stromal Tumor, Benign, Mixed Cell |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Uterus                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma                             |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | X |   |   |
| Adenoma                                    |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Malignant Mixed Mullerian Tumor            |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |
| Polyp Stromal                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Sarcoma Stromal                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |
| Vagina                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |
| Polyp                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |

HEMATOPOIETIC SYSTEM

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone Marrow                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node, Mandibular             | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymph Node, Mesenteric             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Spleen                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

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

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Experiment Number: 20320 - 03

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P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

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First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE | DAY ON TEST |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       |       | * TOTALS |
|------------------------|-------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|----------|
|                        | 0728        | 0684  | 0730  | 0738  | 0688  | 0666  | 0667  | 0743  | 0744  | 0777  | 0777  | 0777  | 0777  | 0667  | 0773  | 0773  | 0722  | 0722  | 0722  | 0733  | 0744  | 0744  | 0767  | 0665  |          |
| 1000 mg/kg             | 00411       | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 00411 | 50       |

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 |
| Leiomyoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Liver                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Hepatocellular Adenoma             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Mesentery                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Pancreas                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Salivary Glands                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Stomach, Forestomach               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
 + .. Tissue examined microscopically  
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Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE<br>1000 mg/kg          | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          | * TOTALS |
|---|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|----------|
|   | 0728        | 0684   | 0730   | 0728   | 0688   | 0666   | 0667   | 0743   | 0744   | 0777   | 0777   | 0777   | 0777   | 0667   | 0776   | 0777   | 0777   | 0777   | 0777   | 0777   | 0474   | 0774   | 0676   | 0665     |          |
| ANIMAL ID                                     | 004111      | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411   |          |
| Stomach, Glandular                            | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |          |
| <b>CARDIOVASCULAR SYSTEM</b>                  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |          |
| Blood Vessel                                  | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |          |
| Heart   | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |          |
| <b>ENDOCRINE SYSTEM</b>                       |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |          |
| Adrenal Cortex<br>Adenoma                     | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50<br>1  |          |
| Adrenal Medulla<br>Pheochromocytoma Malignant | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50<br>1  |          |
| Islets, Pancreatic                            | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50       |          |
| Parathyroid Gland                             | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | M      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 49       |          |
| Pituitary Gland<br>Pars Distalis, Adenoma     | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50<br>16 |          |
| Pars Distalis, Carcinoma                      |             |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |        |        |        |        |        | X      | X      |        | 1        |          |
| Pars Intermedia, Adenoma                      |             |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |        |        |        |        |        |        |        | 1        |          |
| Thyroid Gland<br>C-cell, Adenoma              | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 50<br>3  |          |
| <b>GENERAL BODY SYSTEM</b>                    |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |          |
| NONE  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |          |

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

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

Experiment Number: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE | DAY ON TEST |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | * TOTALS |
|------------------------|-------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|
|                        | 07          | 06 | 07 | 07 | 06 | 06 | 06 | 07 | 04 | 04 | 07 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 07 | 07 | 04 | 07 | 06 |    |          |
| 1000 mg/kg             | 28          | 84 | 30 | 28 | 88 | 66 | 03 | 62 | 42 | 02 | 09 | 00 | 03 | 33 | 33 | 28 | 29 | 88 | 00 | 03 | 22 | 46 | 25 |    |          |
|                        | 00          | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | 00 |    |          |
|                        | 44          | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 | 44 |    |          |
|                        | 11          | 11 | 11 | 11 | 11 | 11 | 11 | 22 | 22 | 22 | 22 | 22 | 22 | 22 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 33 | 44 |    |          |
|                        | 11          | 22 | 44 | 55 | 66 | 77 | 88 | 99 | 00 | 11 | 44 | 55 | 66 | 88 | 99 | 00 | 11 | 22 | 33 | 44 | 55 | 66 | 77 | 50 |          |

GENITAL SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Clitoral Gland                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Ovary                                      | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Adenocarcinoma                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Adenocarcinoma, Metastatic, Uterus         |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Sex Cord Stromal Tumor, Benign, Mixed Cell |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Uterus                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma                             |   | X |   |   |   | X | X |   |   |   | X | X |   |   | X |   |   |   |   |   |   |   |   | 9  |
| Adenoma                                    |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | 4  |
| Malignant Mixed Mullerian Tumor            |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Polyp Stromal                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Sarcoma Stromal                            |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Vagina                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Polyp                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

HEMATOPOIETIC SYSTEM

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Lymph Node, Mandibular             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 49 |
| Lymph Node, Mesenteric             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Spleen                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 50 |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 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: 20320 - 03

Test Type: CHRONIC

Route: GAVAGE

Species/Strain: RATS/Wistar Han

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| WISTAR HAN RATS FEMALE<br>1000 mg/kg | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |        |        |        |  |  |
|--------------------------------------|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|--------|--------|--------|--|--|
|                                      | 07288       | 06732  | 07728  | 06688  | 06686  | 07670  | 04436  | 04432  | 07729  | 07720  | 07720  | 07720  | 06677  | 07722  | 06678  | 07728  | 07728  | 07720  | 07723  | 07729  |          | 04426  | 07728  | 06625  |  |  |
| ANIMAL ID                            | 004111      | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411 | 004411   | 004411 | 004411 | 004411 |  |  |
| Thymus                               | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | +      | +      | 50     |  |  |
| <b>INTEGUMENTARY SYSTEM</b>          |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |        |        |  |  |
| Mammary Gland                        | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | +      | +      | 50     |  |  |
| Adenocarcinoma                       |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | X      |        |          |        | X      | 3      |  |  |
| Fibroadenoma                         |             | X      |        |        |        |        |        |        | X      |        |        |        |        | X      |        |        |        |        | X      |        |          |        |        | 11     |  |  |
| Skin                                 | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | +      | +      | 50     |  |  |
| <b>MUSCULOSKELETAL SYSTEM</b>        |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |        |        |  |  |
| Bone                                 | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | +      | +      | 50     |  |  |
| Skeletal Muscle                      |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |        | 1      |  |  |
| <b>NERVOUS SYSTEM</b>                |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |        |        |  |  |
| Brain                                | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | +      | +      | 50     |  |  |
| <b>RESPIRATORY SYSTEM</b>            |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |        |        |  |  |
| Lung                                 | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | +      | +      | 50     |  |  |
| Adenocarcinoma, Metastatic, Uterus   |             |        |        |        |        |        |        | X      |        |        |        |        | X      |        |        |        |        |        |        |        |          |        |        | 4      |  |  |
| Alveolar/Bronchiolar Adenoma         |             |        |        | X      |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        | X      | 2      |  |  |
| Nose                                 | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | +      | +      | 50     |  |  |
| Trachea                              | +           | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +        | +      | +      | 50     |  |  |
| <b>SPECIAL SENSES SYSTEM</b>         |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |        |        |        |  |  |

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 + .. Tissue examined microscopically  
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Experiment Number: 20320 - 03

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P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Tetrabromobisphenol A

CAS Number: 79-94-7

Date Report Requested: 01/23/2013

Time Report Requested: 15:06:22

First Dose M/F: 07/25/07 / 07/26/07

Lab: BAT

| Wistar Han Rats Female<br>1000 mg/kg | DAY ON TEST |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | * TOTALS |  |
|--------------------------------------|-------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------|--|
|                                      | 0728        | 0684 | 0730 | 0728 | 0688 | 0666 | 0667 | 0743 | 0444 | 0777 | 0777 | 0777 | 0777 | 0666 | 0777 | 0666 | 0777 | 0777 | 0777 | 0777 | 0444 | 0777 | 0666 | 0777 | 0666 |          |  |
| ANIMAL ID                            | 0041        | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 | 0044 |          |  |
| Eye                                  | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 49       |  |
| Harderian Gland                      | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 49       |  |
| <b>URINARY SYSTEM</b>                |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |
| Kidney                               | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| Adenocarcinoma, Metastatic, Uterus   |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | 1        |  |
| Urinary Bladder                      | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |
| <b>SYSTEMIC LESIONS</b>              |             |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |          |  |
| Multiple Organ                       | +           | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | 50       |  |

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

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