ICMJE DISCLOSURE FORM

Date:2/22/2023
Your Name:Matthew Gumbleton
Manuscript Title: TTF-1 and immune checkpoint therapy in non-small cell lung cancer
Manuscript number (if known):TLCR-23-101

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	_xNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	Lung Cancer Research Foundation	
3	Royalties or licenses	Alterna Therapeutics	
4	Consulting fees	x_None	

5	Payment or honoraria for	MJH Lifesciences	
	lectures, presentations, speakers bureaus, manuscript writing or educational events	OMNI Health Media	
6	Payment for expert testimony	_x_None	
7	Support for attending meetings and/or travel	_xNone	
8	Patents planned, issued or pending	US10702538B2 W02015195812	
9	Participation on a Data Safety Monitoring Board or Advisory Board	_x_None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	xNone	
11	Stock or stock options	_xNone	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_xNone	
13	Other financial or non- financial interests	_xNone	

Please summarize the above conflict of interest in the following box:

M.G. reports grant funding from the LCRF, patents licensed to Alterna Theraputics, and honoraria from MJH Lifesciences and OMNI Health Media, all outside the scope of the work included here.

Please place an "X" next to the following statement to indicate your agreement:

x I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date:	2/24/2023	
Your Name:	Eric Snyder	
Manuscript	Title: TTF-1 and	l immune checkpoint therapy in non-small cell lung cancer
Manuscript	number (if known):	TLCR-23-101

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

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1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	Time frame: Since the initialxNone	pranning of the work
2	Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses	NIH R01CA212415 NIH R01CA240317 ALA Lung Cancer Discovery Award x None	36 months
4	Consulting fees	x_None	

		1	
5	Payment or honoraria for lectures, presentations,	_xNone	
	speakers bureaus,		
	manuscript writing or		
	educational events	N.	
6	Payment for expert testimony	_xNone	
7	Cupport for attending	y None	
/	Support for attending meetings and/or travel	x_None	
	meetings and/or traver		
8	Patents planned, issued or	y None	
0	pending	_xNone	
	pending		
9	Participation on a Data	x None	
,	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	x None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	x_None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other	_xNone	
12	Services Other financial or non	v None	
13	Other financial or non- financial interests	x_None	
Dla	ease summarize the above co	onflict of interest in the fo	llowing hov:
rie	ase summanize the above to	omnet of interest in the lo	IIOMIIIP MOV.

ELS has no conflicts of interest to declare.				

Please place an "X" next to the following statement to indicate your agreement:

x I certify that I have answered every question and have not altered the wording of any of the questions on this form.