

ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Baoqing Sun

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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 author's relationships/activities/interests should be defined broadly. 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.

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Date: 5/30/2024

Your Name: Qian Wang

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Peiyan Zheng

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Xuefeng Niu

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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Date: 5/30/2024

Your Name: Ying Feng

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

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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: 5/30/2024

Your Name: Weijie Guan

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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.

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ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Si Chen

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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.

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ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Jin Li

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Tingting Cui

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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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: 5/30/2024

Your Name: Yijun Deng

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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.

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ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Zhangkai J Cheng

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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.

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ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Yongmei Li

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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.

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ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Xinke Zhou

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Yi Fang

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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.

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ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Wei Wang

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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ICMJE DISCLOSURE FORM

Date: 5/30/2024

Your Name: Zhongfang Wang

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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Date: 5/30/2024

Your Name: Ling Chen

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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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.	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table> <p style="font-size: small; text-align: right; margin-top: 5px;">Click the tab key to add additional rows.</p>						
Time frame: past 36 months								
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>						
3	Royalties or licenses	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>						

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4	Consulting fees	<input checked="" type="checkbox"/> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input checked="" type="checkbox"/> None	
8	Patents planned, issued or pending	<input type="checkbox"/> None	
		Guangzhou nBiomed Ltd.	issued and pending patents
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input type="checkbox"/> None	
		Guangzhou nBiomed Ltd.	Board member of Guangzhou nBiomed Ltd.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
11	Stock or stock options	<input type="checkbox"/> None	
		Guangzhou nBiomed Ltd.	Board member of Guangzhou nBiomed Ltd.
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	<input checked="" type="checkbox"/> None	
13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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

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: 5/30/2024

Your Name: Nanshan Zhong

Manuscript Title: An intranasally-administered SARS-CoV-2 Omicron vaccine induces robust mucosal secretory IgA in the nasal passage

Manuscript Number (if known): 180784-INS-CMED

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 author's relationships/activities/interests should be defined broadly. 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.

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