

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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Pending: The patent has been filed but not issued **Issued:** The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

Jonna 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Sushma	2. Surname (Last Name) Jonna	3. Date 20-September-2020
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name
5. Manuscript Title Effect of Prior Therapy on Tumor Mutat	ional Burden in NSCLC	
6. Manuscript Identifying Number (if you kr	now it)	
Section 2. The Work Under C	onsideration for Public	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descr	ibed in the instructions. Us port relationships that we	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by tree present during the 36 months prior to publication.
Section 4. Intellectual Proper	rty Patents & Copyri	ghts
Do you have any patents, whether plan	ned, pending or issued, br	roadly relevant to the work? Yes V No

Jonna 2



Evaluation and Feedback

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Jonna 3



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patent



Section 1. Identifying Information	ation		
1. Given Name (First Name) Ari	2. Surname (Last Name) VanderWalde		3. Date 05-January-2021
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author	or's Name
5. Manuscript Title Effect of prior therapy on tumor mutatio	onal burden in NSCLC		
6. Manuscript Identifying Number (if you kno	ow it)	_	
Section 2. The Week Hadea Co			
Did you or your institution at any time received any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interest of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interest of the submitted work (including statistical analysis, etc.)?	but not limited to grants, da st? Yes No rmation below. If you have	a third party (governmenta monitoring board, st	udy design, manuscript preparation,
Name of Institution/Company	Grant'	n-Financial Other?	Comments
Caris Life Sciences		✓	Writing support
Section 3. Relevant financial a	activities outside the s	submitted work.	
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should report there any relevant conflicts of interest fyes, please fill out the appropriate information.	bed in the instructions. Use fort relationships that we st?	se one line for each er	ntity; add as many lines as you need by
Name of Entity	Grant'	n-Financial upport?	Comments
Bristol-Myers Squibb			Consulting
Elsevier			Consulting
George Clinical			Consulting



Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other? Comments	
Concerto Health-Al			Consulting	
Caris Life Sciences			Consulting	
Section 4. Intellectual Browns				
Intellectual Propert	ty Patents & Co	pyrights		
Do you have any patents, whether plann	ed, pending or issu	ed, broadly releva	nt to the work? Yes	✓ No
Section 5. Relationships not c	overed above			
Are there other relationships or activities potentially influencing, what you wrote in Yes, the following relationships/conditions/cir. At the time of manuscript acceptance, jo On occasion, journals may ask authors to	in the submitted wo ditions/circumstance rcumstances that pr ournals will ask autho	ork? es are present (exp esent a potential o ors to confirm and	olain below): conflict of interest I, if necessary, update their	
Section 6. Disclosure Stateme	nt			
Based on the above disclosures, this form below.	n will automatically	generate a disclo:	sure statement, which will a	ppear in the box
Dr. VanderWalde reports non-financial s Bristol-Myers Squibb, personal fees from personal fees from Caris Life Sciences, o	n Elsevier, personal f	ees from George		



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patent

Nieva 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi	rst Name)	2. Surname (Last Nar Nieva	ne)	3. Date 24-August-2020
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Authors Stephen Liu	or's Name
5. Manuscript Title Effect of Prior Th	erapy on Tumor Mutat	ional Burden in NSCL	С	
6. Manuscript lder	ntifying Number (if you kr	now it)		
	ı			
Section 2.	The Work Under Co	onsideration for P	ublication	
any aspect of the s statistical analysis, Are there any rel	ubmitted work (including	but not limited to gran	its, data monitoring board, st	ent, commercial, private foundation, etc.) for eudy design, manuscript preparation,
Section 3.	Relevant financial	activities outside	the submitted work.	
of compensation clicking the "Add) with entities as descri	ibed in the instruction port relationships tha	ns. Use one line for each e	cial relationships (regardless of amount ntity; add as many lines as you need by e 36 months prior to publication.
If yes, please fill o	out the appropriate info	ormation below.		
Name of Entity		Grant? Personal Fees?	Non-Financial Support? Other?	Comments
Merck		✓		
Astra Zeneca				
Genentech				
Western Oncolytics				

Nieva 2



Continue 4
Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
Section 5. Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statement On occasion, journals may ask authors to disclose further information about reported relationships.
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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Nieva reports grants from Merck, personal fees from Astra Zeneca, personal fees from Genentech, personal fees from Western Oncolytics, outside the submitted work; .

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Nieva 3



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Royalties: Funds are coming in to you or your institution due to your patent

Poorman 1



Section 1. Identifying Inform	ation		
identifying inform	ation		
Given Name (First Name) Kelsey	2. Surname (Last Name) Poorman		3. Date 26-August-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Autho	or's Name
5. Manuscript Title Effect of Prior Therapy on Tumor Mutati	on Burden in NSCLC		
6. Manuscript Identifying Number (if you kn	ow it)		
		_	
Section 2. The Work Under Co	onsideration for Publi	cation	
Did you or your institution at any time receivany aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interest of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interest of the submitted work (including statistical analysis, etc.)? Name of Institution/Company	est? Yes No ormation below. If you have the "X" button. Grant? Personal No	ata monitoring board, st	udy design, manuscript preparation, ity press the "ADD" button to add a row.
Caris Life Sciences			Full Time Employee
Place a check in the appropriate boxes in of compensation) with entities as descril clicking the "Add +" box. You should rep Are there any relevant conflicts of interest lf yes, please fill out the appropriate info	bed in the instructions. Uport relationships that we st? Yes No	nether you have financ se one line for each er	ntity; add as many lines as you need by
	Grant? Personal No	n-Financial	
Name of Entity	Grant'	other?	Comments
Caris Life Sciences			Full Time Employee

Poorman 2



Section 4. Intellectual Dispositive Detents & Commission
Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
Section 5. Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
✓ Yes, the following relationships/conditions/circumstances are present (explain below):
No other relationships/conditions/circumstances that present a potential conflict of interest
Full Time Employee of Caris Life Sciences
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Poorman reports personal fees from Caris Life Sciences, during the conduct of the study; personal fees from Caris Life Sciences, outside the submitted work; and Full Time Employee of Caris Life Sciences.

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Saul 1



Section 1. Identifying Infor	mation	
Given Name (First Name) Michelle	2. Surname (Last Nan Saul	ne) 3. Date 12-August-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Jonna Sushma
5. Manuscript Title Effect of Prior Therapy on Tumor Muta	ational Burden in NSCL0	C
6. Manuscript Identifying Number (if you	know it)	
Section 2. The Work Under	Consideration for P	ublication
		from a third party (government, commercial, private foundation, etc.) for ts, data monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of inte		No
If yes, please fill out the appropriate in Excess rows can be removed by pressi	•	u have more than one entity press the "ADD" button to add a row
Name of Institution/Company	Grant? Personal Fees?	Non-Financial Other? Comments
aris Life Sciences		I am a salaried biostatistician with Caris Life Sciences.
Section 3. Relevant financia	al activities outside t	the submitted work.
of compensation) with entities as desc	cribed in the instructior	e whether you have financial relationships (regardless of amount ns. Use one line for each entity; add as many lines as you need by t were present during the 36 months prior to publication .
Are there any relevant conflicts of inte	· ·	No
If yes, please fill out the appropriate ir	nformation below.	
Name of Entity	Grant? Personal Fees?	Non-Financial Support? Comments
aris Life Sciences		✓ Employment

Saul 2



Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No Section 5. Relationships not covered above Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work? Yes, the following relationships/conditions/circumstances are present (explain below): No other relationships/conditions/circumstances that present a potential conflict of interest	
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Saul 3



Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check

Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

Relationships not covered above. 5.

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earning royalties or not

Royalties: Funds are coming in to you or your institution due to your

patent

von Buttlar 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Xinyu	2. Surname (Last Name) von Buttlar	3. Date 20-August-2020
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Stephen V. Liu, MD
5. Manuscript Title Effect of Prior Therapy on Tumor Mutar	tional Burden in NSCLC	
6. Manuscript Identifying Number (if you k	now it)	
Section 2. The Work Under C	onsideration for Publi	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work.
of compensation) with entities as descri	ribed in the instructions. U port relationships that we	nether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by tree present during the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyri	ghts
Do you have any patents, whether plan	nned, pending or issued, b	roadly relevant to the work? Yes V No

von Buttlar 2



Section 5. Polationships not	or and taken
Relationships not	covered above
Are there other relationships or activitie potentially influencing, what you wrote	s that readers could perceive to have influenced, or that give the appearance of in the submitted work?
Yes, the following relationships/cond	ditions/circumstances are present (explain below):
✓ No other relationships/conditions/ci	rcumstances that present a potential conflict of interest
	ournals will ask authors to confirm and, if necessary, update their disclosure statements o disclose further information about reported relationships.
Section 6. Disclosure Stateme	ent
Based on the above disclosures, this form below.	m will automatically generate a disclosure statement, which will appear in the box
Dr. von Buttlar has nothing to disclose.	

Evaluation and Feedback

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Royalties: Funds are coming in to you or your institution due to your

patent

Hu 1



Section 1. Identifying Info	ormation				
1. Given Name (First Name) John	2. Surname (Last Name) Hu	3. Date 31-August-2020			
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Stephen V. Liu			
5. Manuscript Title Effect of Prior Therapy on Tumor Mutational Burden in NSCLC					
6. Manuscript Identifying Number (if yo	u know it)				
		_			
Section 2. The Work Unde	r Consideration for Publi	cation			
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No					
Section 3. Relevant finance	ial activities outside the	submitted work.			
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo					
Section 4. Intellectual Pro	perty Patents & Copyri	ghts			
Do you have any patents, whether p	lanned, pending or issued, bi	roadly relevant to the work? Yes V No			

Hu 2



Section 5.				
Section 5.	Relationships not covered above			
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?			
Yes, the following relationships/conditions/circumstances are present (explain below):				
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	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements rnals may ask authors to disclose further information about reported relationships.			
Cartina				
Section 6.	Disclosure Statement			
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Dr. Hu has nothi	ng to disclose.			

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patent

Liu 1



Section 1. Identifying Inform					
Identifying Inform	ation				
1. Given Name (First Name) Stephen	2. Surname (Last Name) Liu 3. Date 11-August-2020				
4. Are you the corresponding author?	e corresponding author? Yes No				
5. Manuscript Title Effect of Prior Therapy on Tumor Mutational Burden in NSCLC					
6. Manuscript Identifying Number (if you kno	ow it)				
Section 2. The Work Under Co	nsideration for P	ublication			
Did you or your institution at any time received any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to gran				
Section 3. Relevant financial a	activities outside :	the submitted t	work.		
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Name of Entity	Grant? Personal Fees?	Non-Financial Support?	Other?	Comments	
Alkermes	V				
AstraZeneca	V	√			
Bayer	✓				
Blueprint	✓				
Boehringer-Ingelheim		√			
Bristol-Myers Squibb	✓				
Catalyst					

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Celgene



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments
Clovis	✓				
Corvus	✓				
G1 Therapeutics		✓			
Genentech/Roche	✓	\checkmark	√		
Guardant Health		✓			
Inivata		✓			
Janssen	✓	√			
Lilly	✓	\checkmark			
Lycera	✓				
LOXO		✓			
Merck/MSD	✓	\checkmark	√		
Merus	✓				
Molecular Partners	✓				
Pfizer	✓	\checkmark			
PharmaMar		\checkmark			
Rain Therapeutics	✓				
Regeneron		√			
RAPT	✓				
Spectrum		✓			
Takeda	✓				
Turning Point Therapeutics	✓				

Section 4.	Intellectual Property Patents & Copyrights	
Do you have any	patents, whether planned, pending or issued, broadly relevant to the work?	√ No

Liu 3



Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
	wing relationships/conditions/circumstances are present (explain below): tionships/conditions/circumstances that present a potential conflict of interest
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Dr. Liu reports grants from Alkermes, grants, personal fees and non-financial support from AstraZeneca, grants from Bayer, grants and personal fees from Blueprint, non-financial support from Boehringer-Ingelheim, grants and personal fees from Bristol-Myers Squibb, personal fees from Catalyst, personal fees from Celgene, grants from Clovis, grants from Corvus, personal fees from G1 Therapeutics, grants, personal fees and non-financial support from Genentech/Roche, personal fees from Guardant Health, personal fees from Inivata, grants and personal fees from Janssen, grants and personal fees from Lilly, grants from Lycera, personal fees from LOXO, grants, personal fees and non-financial support from Merck/MSD, grants from Merus, grants from Molecular Partners, grants and personal fees from Pfizer, personal fees from PharmaMar, grants from Rain Therapeutics, personal fees from Regeneron, grants from RAPT, personal fees from Spectrum, grants from Takeda, grants from Turning Point Therapeutics, outside the submitted work;

Evaluation and Feedback

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