

ICMJE DISCLOSURE FORM

Date: 18 Jan 2022
 Your Name: Zhisong Fan
 Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer
 Manuscript number (if known): ATM-22-412

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 **current manuscript only**.

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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)	Specifications/Comments (e.g., if payments were made to you or to your institution)
Time frame: Since the initial planning of the work			
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.	___ None	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	___ None	
3	Royalties or licenses	___ None	
4	Consulting fees	___ None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	____ None	
6	Payment for expert testimony	____ None	
7	Support for attending meetings and/or travel	____ None	
8	Patents planned, issued or pending	____ None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	____ None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	____ None	
11	Stock or stock options	____ None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	____ None	
13	Other financial or non-financial interests	____ None	

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

None.

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: 18 Jan 2022
 Your Name: Qi Zhang
 Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer
 Manuscript number (if known): ATM-22-412

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3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_____None	
6	Payment for expert testimony	_____None	
7	Support for attending meetings and/or travel	_____None	
8	Patents planned, issued or pending	_____None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	_____None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	_____None	
11	Stock or stock options	_____None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_____None	
13	Other financial or non-financial interests		Qi Zhang was a student of Hebei medical university and studied in the Forth Hospital of Hebei medical university during the conduct of this study.

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

Qi Zhang was a student of Hebei medical university and studied in the Forth Hospital of Hebei medical university during the conduct of this study.

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: 18 Jan 2022
 Your Name: Li Feng
 Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer
 Manuscript number (if known): ATM-22-412

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11	Stock or stock options	<u> </u> None	
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ICMJE DISCLOSURE FORM

Date: 18 JAN 2022

Your Name: Long Wang

Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer

Manuscript number (if known): ATM-22-412

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13	Other financial or non-financial interests	<u> </u> None	

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ICMJE DISCLOSURE FORM

Date: 18 JAN 2022

Your Name: Xinglang Zhou

Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer

Manuscript number (if known): ATM-22-412

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

<p>None.</p>

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: 18 Jan 2022 _____

Your Name: Jing Han _____

Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer _____

Manuscript number (if known): ATM-22-412 _____

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11	Stock or stock options	____ None	
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13	Other financial or non-financial interests	____ None	

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

<p>None.</p>

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ICMJE DISCLOSURE FORM

Date: 18 Jan 2022
 Your Name: Dan Li
 Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer
 Manuscript number (if known): ATM-22-412

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13	Other financial or non-financial interests	____ None	

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<p>None.</p>

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ICMJE DISCLOSURE FORM

Date: 18 Jan 2022 _____

Your Name: Jiayin Liu _____

Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer _____

Manuscript number (if known): ATM-22-412 _____

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<p>None.</p>

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ICMJJE DISCLOSURE FORM

Date: 18 Jan 2022
 Your Name: Xue Zhang
 Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer
 Manuscript number (if known): ATM-22-412

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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	____ None	
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ICMJE DISCLOSURE FORM

Date: 18 Jan 2022
 Your Name: Jing Zuo
 Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer
 Manuscript number (if known): ATM-22-412

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ICMJE DISCLOSURE FORM

Date: 18 Jan 2022
 Your Name: Xiao Zou
 Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer
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12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_____None	
13	Other financial or non-financial interests	<u>Burning Rock Biotech</u>	Xiao Zou was an employee of Burning Rock Biotech during the conduct of this study.

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

Xiao Zou was an employee of Burning Rock Biotech during the conduct of this study.

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ICMJE DISCLOSURE FORM

Date: 18 Jan 2022

Your Name: Yiran Cai

Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer

Manuscript number (if known): ATM-22-412

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3	Royalties or licenses	___ None	
4	Consulting fees	___ None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	____None	
6	Payment for expert testimony	____None	
7	Support for attending meetings and/or travel	____None	
8	Patents planned, issued or pending	____None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	____None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	____None	
11	Stock or stock options	____None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	____None	
13	Other financial or non-financial interests	<u>Burning Rock Biotech</u>	Yiran Cai was an employee of Burning Rock Biotech during the conduct of this study.

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

Yiran Cai was an employee of Burning Rock Biotech during the conduct of this study.

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: 18 Jan 2022

Your Name: Ying Sun

Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer

Manuscript number (if known): ATM-22-412

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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Time frame: Since the initial planning of the work			
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.	___ None	
Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	___ None	
3	Royalties or licenses	___ None	
4	Consulting fees	___ None	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_____None	
6	Payment for expert testimony	_____None	
7	Support for attending meetings and/or travel	_____None	
8	Patents planned, issued or pending	_____None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	_____None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	_____None	
11	Stock or stock options	_____None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_____None	
13	Other financial or non-financial interests	<u>Burning Rock Biotech</u>	Ying Sun was an employee of Burning Rock Biotech during the conduct of this study.

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

Ying Sun was an employee of Burning Rock Biotech during the conduct of this study.

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: 18 Jan 2022
 Your Name: Yudong Wang
 Manuscript Title: Genomic landscape and prognosis of patients with TP53-mutated non-small cell lung cancer
 Manuscript number (if known): ATM-22-412

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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Time frame: past 36 months			
2	Grants or contracts from any entity (if not indicated in item #1 above).	<u> None </u>	
3	Royalties or licenses	<u> None </u>	
4	Consulting fees	<u> None </u>	

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

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

<p>None.</p>

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.