

#### **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.

## 2. 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 "Yes".

### 3. 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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# 4. Intellectual Property.

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

# Relationships not covered above.

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

Campesato 1



Section 1.	Identifying Inform	nation					
1. Given Name (Fi Luis Felipe	rst Name)	Surname (Last Name)     Campesato	3. Date 09-June-2020				
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Taha Merghoub				
5. Manuscript Title Innate immune checkpoints for cancer immunotherapy: expanding the scope of non T cell targets							
•	ntifying Number (if you kr 03(ATM-20-1816)	now it)					
Section 2.	The Work Under Co	onsideration for Public	cation				
Did you or your institution <b>at any time</b> 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 Vo							
Section 3.	Relevant financial	activities outside the s	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 <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo							
Section 4.	Intellectual Proper	rty Patents & Copyrig	ghts				
Do you have any			roadly relevant to the work? Yes V No				

Campesato 2



Section 5. Polationships not sovered above
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):
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Section 6. Disclosure Statement
Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Campesato has nothing to disclose.

## **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

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Section 1.	Identifying Inform	nation					
1. Given Name (Fir CHIEN-HUAN	rst Name)	2. Surname (Last Name) WENG	3. Date 03-June-2020				
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name TAHA MERGHOUB				
5. Manuscript Title Innate immune c		immunotherapy: expandir	ng the scope of non T cell targets				
	ntifying Number (if you kr 03(ATM-20-1816)	now it)					
			-				
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Section 4.	Intellectual Proper	ty Patents & Copyrig	hts				
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No				

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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?
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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.
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Merghoub 1



Section 1.	Identifying Inform	nation							
1. Given Name (First Name)  2. Surname (Last Name)  3. Date  Merghoub  15-May-2020									
4. Are you the corresponding author?   ✓ Yes   No									
<ul> <li>5. Manuscript Title</li> <li>Peripheral blood immune cell phenotype defined by expression of LAG-3 linked to clinical outcome in cancer patients treated with immune checkpoint blockade</li> <li>6. Manuscript Identifying Number (if you know it)</li> </ul>									
Section 2.	The Work Under Co	ancidaration for	Dublication						
any aspect of the s statistical analysis,	stitution <b>at any time</b> recei ubmitted work (including	ive payment or servi	ces from a third party	-	ommercial, private foundation, clesign, manuscript preparation,	etc.) for			
Section 3.	Relevant financial	activities outsid	e the submitted	work.					
of compensation clicking the "Add Are there any rel	n) with entities as descri	ibed in the instruct port relationships t est?	ions. Use one line fo	or each entity;	elationships (regardless of am add as many lines as you ned months prior to publication	ed by			
Name of Entity		Grant? Person	al Non-Financial Support?	Other? Co	mments				
MVAQ therapeutics				Four	nder				
Immuno Therapeutic	S								
Pfizer									
Bristol-Myers Squibb		<b>✓</b>							
Surface Oncology		<b>✓</b>							
Kyn Therapeutics									
Infinity Pharmaceutic									
Peregrine Pharmeceu	uticals, Inc.	<b>√</b>							

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		2 Po	rconal No	on-Financial	3		
Name of Entity	Gr	ant•		Support?	Other?	Comments	
Adaptive Biotechnologies		✓					
Leap Therapeutics, Inc.		<b>√</b>					
Aprea		<b>√</b>					
Section 4. Intellectual	Property	Patents	& Copyr	ights			
Do you have any patents, whet	her planned.	pendina	or issued. ł	oroadly releva	int to the i	work? 🗸 Yes 📄 No	
If yes, please fill out the approp	riate informa	tion belo	w. If you ha	-		ry press the "ADD" button to add	l a row.
Excess rows can be removed by	pressing the	"X" butto	on.				
Patent?	Pending?	Issued <mark>?</mark>	Licensed	Royalties?	License	? Comments	
Inventor on patent applications							
related to work on Oncolytic Viral		<b>✓</b>					
Alpha Virus Based Vaccine		<b>V</b>					
Neo Antigen Modeling		<b>▼</b>					
CD40							
GITR							
OX40		<b>▼</b>					
PD-1		<b>▼</b>					
CTLA-4		<b>▼</b>					
CIERT		V					
Section 5. Relationsh	ips not cove	ared abo	WA.				
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potentially influencing, what yo			•	Leive to nave	iniiuenced	d, or that give the appearance of	
Yes, the following relationships/conditions/circumstances are present (explain below):							
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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements.							

Merghoub 3

On occasion, journals may ask authors to disclose further information about reported relationships.



Section 6.

**Disclosure Statement** 

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Dr. Merghoub reports other from IMVAQ therapeutics, personal fees from Immuno Therapeutics, personal fees from Pfizer, grants from Bristol-Myers Squibb, grants from Surface Oncology, grants from Kyn Therapeutics, grants and personal fees from Infinity Pharmaceuticals, Inc., grants from Peregrine Pharmaceuticals, Inc., grants from Adaptive Biotechnologies, grants from Leap Therapeutics, Inc., grants from Aprea, outside the submitted work; In addition, Dr. Merghoub has a patent Inventor on patent applications related to work on Oncolytic Viral therapy issued, a patent Alpha Virus Based Vaccine issued, a patent Neo Antigen Modeling issued, a patent CD40 pending, a patent GITR issued, a patent OX40 issued, a patent PD-1 issued, and a patent CTLA-4 issued.

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