

ICMJE DISCLOSURE FORM

Date: August 8/23/22

Your Name: Naoto T. Ueno

Manuscript Title: Interview with Prof. Naoto T. Ueno

Manuscript number (if known): CCO-22-78 (CCO-2022-OGE-03)

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

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The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains

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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. | <u> X </u> None | |
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| Time frame: past 36 months | | | |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | <u> </u> None | Daiichi Sankyo |
| | | | Therimunex |
| | | | Puma |
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| | | | Phoenix Molecular Designs |
| | | | Merck |
| | | | Oncolys BioPharma |
| | | | Immunomedics |
| | | | OBI Pharma Inc. |
| | | | ChemDiv, Inc. |
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| | | | CytoDyn Inc. |
| | | | Dualitybiology |
| | | | Tolero Pharmaceuticals, Inc. |
| | | | Carisma Therapeutics, Inc. |
| 3 | Royalties or licenses | <input type="checkbox"/> None | Ourotech, Inc. |
| | | | DBA Pear Bio |
| 4 | Consulting fees | <input type="checkbox"/> None | AstraZeneca Pharmaceutical, Inc. |
| | | | Carisma Therapeutics, Inc. |
| | | | Chugai Pharmaceutical |
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| | | | Preferred Medicine |
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| | | | Sumitomo Dainippon Pharma |
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| | | | Takeda Pharmaceuticals (terminated) |
| | | | Unitech Medical, Inc. (terminated) |
| 5 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | <input checked="" type="checkbox"/> None | |
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|----|---|--|-----------------------------------|
| 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 checked="" type="checkbox"/> None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | <input type="checkbox"/> None | Gilead CARNA Biosciences, Inc. |
| 10 | Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | <input checked="" type="checkbox"/> None | |
| 11 | Stock or stock options | <input type="checkbox"/> None | |
| 12 | Receipt of equipment, materials, drugs, medical writing, gifts or other services | <input type="checkbox"/> None | |
| 13 | Other financial or non-financial interests | <input type="checkbox"/> None | |

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

Dr. Ueno has received grants or contracts from Daiichi Sankyo, Therimunex, Puma, Eisai, Phoenix Molecular Designs, Merck, Oncolys BioPharma, Immunomedics, OBI Pharma Inc., ChemDiv, Inc., AnHeart Therapeutics Inc., CytoDyn Inc., Dualitybiology, Tolero Pharmaceuticals, Inc. and Carisma Therapeutics, Inc.

He has received royalties or licenses from Ourotech, Inc. and DBA Pear Bio.

He has received consulting fees from AstraZeneca Pharmaceutical, Inc., Carisma Therapeutics, Inc., Chugai Pharmaceutical, CytoDyn, Dalichi Sankyo, Inc., Eisai Medical Research Inc, Gilead Sciences, Inc., Kechow Pharma, Kirilys Therapeutics, Inc., Lavender Health Ltd., OncoCyte, Peptilogics, Pfizer Inc., Phoenix Molecular Designs, Preferred Medicine, Sumitomo Dainippon Pharma, Sysmex.

He has participated on a Data Safety Monitoring Board or Advisory Board in Gilead and CARNA Biosciences, Inc.

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: August 23, 2022
 Your Name: Aisling Y. Luo
 Manuscript Title: Interview with Prof. Naoto T. Ueo
 Manuscript number (if known): CCO-22-78 (CCO-2022-OGE-03)

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| Time frame: past 36 months | | | |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | <input checked="" type="checkbox"/> None | |
| | | | |
| 3 | Royalties or licenses | <input checked="" type="checkbox"/> None | |
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| 4 | Consulting fees | <input checked="" type="checkbox"/> None | |
| | | | |
| 5 | | <input checked="" type="checkbox"/> None | |

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| | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | | |
| 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 checked="" type="checkbox"/> None | |
| 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 checked="" type="checkbox"/> None | |
| 11 | Stock or stock options | <input checked="" type="checkbox"/> None | |
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ICMJE DISCLOSURE FORM

Date: August 23, 2022

Your Name: Yixuan Zeng

Manuscript Title: Interview with Prof. Naoto T. Ueo

Manuscript number (if known): CCO-22-78 (CCO-2022-OGE-03)

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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 | |
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| Time frame: past 36 months | | | |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | <input checked="" type="checkbox"/> None | |
| | | | |
| 3 | Royalties or licenses | <input checked="" type="checkbox"/> None | |
| | | | |
| 4 | Consulting fees | <input checked="" type="checkbox"/> None | |
| | | | |
| 5 | | <input checked="" type="checkbox"/> None | |

| | | | |
|----|--|--|--|
| | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events | | |
| 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 checked="" type="checkbox"/> None | |
| 9 | Participation on a Data Safety Monitoring Board or Advisory Board | <input checked="" type="checkbox"/> None | |
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| 11 | Stock or stock options | <input checked="" type="checkbox"/> None | |
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