Date:_____2022/5/30_____

Consulting fees

__X__None

You	r Name: Kai C	Cai	
Maı	nuscript Title: Amentof	lavone inhibits colorectal o	cancer Epithelial-mesenchymal transition via the miR-16-
5p/	HMGA2/β-catenin pathway		
Maı	nuscript number (if known):		
rela part to t	ted to the content of your n ties whose interests may be	nanuscript. "Related" mea affected by the content of ecessarily indicate a bias.	relationships/activities/interests listed below that are ns any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.
	following questions apply to nuscript only.	o the author's relationship	os/activities/interests as they relate to the current
to t		nsion, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive he manuscript.
	em #1 below, report all sup time frame for disclosure is		I in this manuscript without time limit. For all other items,
		Name all entities with	Superifications/Community
		whom you have this	Specifications/Comments (e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	, and the second
		needed)	
		Time frame: Since the initia	I planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials, medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
3	in item #1 above). Royalties or licenses	X None	
3	Noyalties of ficelises		

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

None			

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

Date	e:2022/5/3	80	
You	r Name: Yang	Yang	
Mar	nuscript Title: Amentof	lavone inhibits colorectal	cancer Epithelial-mesenchymal transition via the miR-16-
5p/	HMGA2/β-catenin pathway		
Mar	nuscript number (if known):		
rela part to t	ted to the content of your n ties whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a so.
	following questions apply t	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
to t		nsion, you should declare	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.
	em #1 below, report all sup time frame for disclosure is		d in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initi	al planning of the work
1	All support for the present	XNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article processing charges, etc.)		
	No time limit for this item.		
	The time initial for this feelin.		
		Time frame: pas	st 36 months
2	Grants or contracts from	X None	
	any entity (if not indicated		
	l	h	
	in item #1 above).		
3	in item #1 above). Royalties or licenses	XNone	
3	-	XNone	

None

Consulting fees

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

None			

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

Date:	2022/5/30
Your Name:	Zi-Jian Guo
Manuscript Title:	Amentoflavone inhibits colorectal cancer Epithelial-mesenchymal transition via the miR-16-
5p/HMGA2/β-cate	nin pathway
Manuscript numbe	r (if known):
	ansparency, we ask you to disclose all relationships/activities/interests listed below that are

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

		1	
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	XNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	XNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	XNone	
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
Dlas	se summarize the above co	nflict of interest in the fo	llowing hove

None			

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

Date:	2022/5/30	
Your Name:	Rui-Lin Cai	
Manuscript Title:	Amentoflavone inhibits colorectal cancer Epithelial-mesenchymal transiti	on via the miR-16
5p/HMGA2/β-cateı	in pathway	
Manuscript numbe	(if known):	
related to the conte	nsparency, we ask you to disclose all relationships/activities/interests listed nt of your manuscript. "Related" means any relation with for-profit or not-forests may be affected by the content of the manuscript. Disclosure represents	or-profit third
•	does not necessarily indicate a bias. If you are in doubt about whether to li	

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) 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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	XNone	
	meetings and/or travel		
8	Patents planned, issued or	X None	
0	pending	XNone	
	periumg		
9	Participation on a Data	X None	
	Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
10	in other board, society,	XIVOITC	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
	Stock of Stock options		
12	Receipt of equipment,	X None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	XNone	
	financial interests		
		•	
-1			

None			

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

Date:	2022/5/30	
Your Name:	Hiroki Hashida	
Manuscript Title:	Amentoflavone inhibits colorectal cancer Epithelial-meser	nchymal transition via the miR-16
5p/HMGA2/β-cat	nin pathway	
Manuscript numb	er (if known):	
	ransparency, we ask you to disclose all relationships/activities ent of your manuscript. "Related" means any relation with fo	
	rests may be affected by the content of the manuscript. Disclo	-
•	d does not necessarily indicate a bias. If you are in doubt abo	•

The following questions apply to the author's relationships/activities/interests as they relate to the <u>current manuscript only</u>.

relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		Name all entities with whom you have this relationship or indicate none (add rows as needed) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution) 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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5 Paymer	Payment or honoraria for lectures, presentations,	XNone				
lectures						
speaker	s bureaus,					
manusc	ript writing or					
educati	onal events					
6 Paymer	nt for expert	XNone				
testimo	ny					
7 Support	t for attending	X None				
	gs and/or travel					
	•					
8 Patents	planned, issued or	XNone				
pending		XNone				
pending	5					
9 Particip	ation on a Data	X None				
	Monitoring Board or	XNone				
Advisor						
	thip or fiduciary role	X None				
	board, society,	XNone				
	tee or advocacy					
	paid or unpaid					
	r stock options	X None				
11 Stock of	stock options	XNone				
12 Receipt	of aquipment	X None				
	Receipt of equipment, materials, drugs, medical	^_NOTIE				
	gifts or other					
services						
	nancial or non-	X None				
	Il interests	NUITE				
IIIIaiicia	ii iiiterests					
Dlagge gum	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:

Date:_____2022/5/30_____

You	r Name: Hong	-Xia Li	
			cancer Epithelial-mesenchymal transition via the miR-16-
	 HMGA2/β-catenin pathway		•
	nuscript number (if known):		
rela part to t	ted to the content of your n ties whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of the same in doubt about whether to list a so.
	following questions apply to nuscript only.	o the author's relationshi	ps/activities/interests as they relate to the <u>current</u>
to t med In it	he epidemiology of hyperter dication, even if that medica	nsion, you should declare tion is not mentioned in t port for the work reporte	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript. d in this manuscript without time limit. For all other items,
		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 initia	al planning of the work
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		Time frame: pas	t 36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	

Consulting fees

__X__None

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

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