ICMJE DISCLOSURE FORM

Date: February 7, 2023 Your Name: Xavier Adhoute

Manuscript Title: COSMIC-312, a disappointing result. Is that so surprising?

Manuscript number (if known): ATM-23-421

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 <u>current</u> <u>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) Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
1	All consists of family and a superior		planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.) No time limit for this item.		
	No time limit for this item.		
	Time frame: past 36 months		
2	Grants or contracts from	none	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	Bayer	To x adhoute

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

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

Board member [lectures, presentations, speaker's bureaus, manuscript writing], Consultancy: Bayer, Ipsen, Eisai, Servier.
Support for attending meetings and/or travel: Ipsen, Milan, Gilead

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: February 7, 2023 Your Name: Marc Bourlière

Manuscript Title: COSMIC-312, a disappointing result. Is that so surprising?

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		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)
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	Merck-Schering Plow Gliead Janssen Roche Abbvie	To M Bourlière

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

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

Board member [lectures, presentations, speaker's bureaus, manuscript writing or educational events], Consultancy:
(Merck-Schering Plow, Gilead, Janssen, Vertex, Boehringer-Ingelheim, BMS, Roche, Abbvie, GSK)

Support for attending meetings and/or travel: Gilead, Roche, Abbvie, BMS

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: February 7, 2023 Your Name: Rodolphe Anty

Manuscript Title: COSMIC-312, a disappointing result. Is that so surprising?

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	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	Bayer	To r Anty
		Ipsen	To r Anty
		Eisai	To r Anty

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony	Abbvie MSD Intercept Gilead Bayer Abbvie	To r Anty
7	Support for attending meetings and/or travel	Gilead Abbvie	To r Anty
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:

Board member [Payment or honoraria for lectures, presentations, speaker's bureaus, manuscript writing or
educational events], Consultancy: Gilead, Bayer, Eisai, Intercept, Abbvie, MSD, Ipsen
Support for attending meetings and/or travel: Gilead, Abbvie

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.