Date:	22-2-14	
Your Nam	: Yiyan Jiang	
Manuscri	Title:Metformin reverses tamoxifen resistance through the lncRNA GAS5-medicated mTOR path	way in
breast car	<u>er</u>	
Manuscri	number (if known):	

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 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.

		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)
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	planning of the work
		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		X None			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert testimony	_ X None			
	testimony				
7	Support for attending	X None			
,	meetings and/or travel	X None			
8	Patents planned, issued or	X None			
	pending				
9	Participation on a Data	X None			
	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	X None			
	Cook of Cook op action	_ XNone			
12	Receipt of equipment,	X None			
	materials, drugs, medical				
	writing, gifts or other				
10	services				
13	Other financial or non- financial interests	XNone			
	illialiciai liiterests				
Ple	Please summarize the above conflict of interest in the following box:				
	Name				
	None				

__ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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

Date:2022-2	2-14
Your Name:	_ Ting Qian
Manuscript Titl	e: Metformin reverses tamoxifen resistance through the IncRNA GAS5-medicated mTOR pathway in
breast cancer	
Manuscript nui	mber (if known):

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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4	Consulting fees	XNone	

5		X None			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert testimony	_ X None			
	testimony				
7	Support for attending	X None			
,	meetings and/or travel	X None			
8	Patents planned, issued or	X None			
	pending				
9	Participation on a Data	X None			
	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	X None			
	Cook of Cook op action	_ XNone			
12	Receipt of equipment,	X None			
	materials, drugs, medical				
	writing, gifts or other				
42	services				
13	Other financial or non- financial interests	XNone			
	illialiciai liiterests				
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	Name				
	None				

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

Date:2022-2	-14
Your Name:	_ Su x ia Li
Manuscript Title	: Metformin reverses tamoxifen resistance through the IncRNA GAS5-medicated mTOR pathway in
breast cancer	
Manuscript num	ber (if known):

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		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		X None			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert testimony	_ X None			
	testimony				
7	Support for attending	X None			
,	meetings and/or travel	X None			
8	Patents planned, issued or	X None			
	pending				
9	Participation on a Data	X None			
	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	X None			
	Cook of Cook op action	_ XNone			
12	Receipt of equipment,	X None			
	materials, drugs, medical				
	writing, gifts or other				
10	services				
13	Other financial or non- financial interests	XNone			
	illialiciai liiterests				
Ple	Please summarize the above conflict of interest in the following box:				
	Name				
	None				

__ X _ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

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

Date:2022-2-14
Your Name: Yuanyuan Xie
Manuscript Title:Metformin reverses tamoxifen resistance through the lncRNA GAS5-medicated mTOR pathway in
<u>breast cancer</u>
Manuscript number (if known):

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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		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	_ X None	
	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		
	in item #1 above).		
3	Royalties or licenses	X None	
4	Consulting fees	X None	

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

Date:2022-2-14					
Your Name	: Min Tao				
Manuscript	Title:Metformin reverses tamoxifen resistance through the IncRNA GAS5-medicated mTOR pathway in				
breast canc	<u>er</u>				
Manuscript	number (if known):				

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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	_ X None				
	testimony					
-	6					
7	Support for attending	X None				
	meetings and/or travel					
_	D	•				
8	Patents planned, issued or pending	X None				
	pending					
9	Participation on a Data	V None				
9	Safety Monitoring Board or	X None				
	Advisory Board					
10	Leadership or fiduciary role	X None				
10	in other board, society,	XNone				
	committee or advocacy					
	group, paid or unpaid					
11	Stock or stock options	_ X None				
12	Receipt of equipment,	X None				
	materials, drugs, medical					
	writing, gifts or other					
12	services	Y				
13	Other financial or non- financial interests	XNone				
	illidiicidi iliterests					
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