Date:2023-10-16	
Your Name:_ Peixi Zhao	
Manuscript Title: The e	fficacy-associated biomarkers for immune checkpoint inhibitors in gastrointestinal cancer: a
literature review	
Manuscript number (if kn	own):

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)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials,	Shaanxi Provincial Department of Science and Technology	General Project of Key Research and Development Plan, 2021SF-374
	medical writing, article processing charges, etc.)  No time limit for this item.	Xi'an Science and Technology Bureau	General Research Project (23YXYJ0136)
		<b>-</b> · .	25
2		Time frame: past	36 Months
2	Grants or contracts from any entity (if not indicated in item #1 above).	VNone	
3	Royalties or licenses	VNone	

4 Consulting fees  V_None    V_None				
lectures, presentations, speakers bureaus, manuscript writing or educational events  6 Payment for expert testimony  7 Support for attending meetings and/or travel  8 Patents planned, issued or pending  9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  15 Other financial or non-  16 Payment for expert  17 V_None  18 V_None  19 V_None  10 V_None  11 Stock or stock options  10 V_None  11 Stock or stock options  12 Other financial or non-  13 Other financial or non-  15 Other financial or non-  16 V_None	4	Consulting fees	√None	
lectures, presentations, speakers bureaus, manuscript writing or educational events  6 Payment for expert testimony  7 Support for attending meetings and/or travel  8 Patents planned, issued or pending  9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  15 Other financial or non-  16 Payment for expert  17 V_None  18 V_None  19 V_None  10 V_None  11 Stock or stock options  10 V_None  11 Stock or stock options  12 Other financial or non-  13 Other financial or non-  15 Other financial or non-  16 V_None				
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manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel  8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non-    V None   V Non				
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Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-  J None  J None	0		vNone	
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Meetings and/or travel	7	Support for attending	y None	
8 Patents planned, issued or pending  9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-    V None	,			
pending  Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  V_None  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  V_None		and a second and a second		
pending  Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  V_None  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  V_None				
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9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  V_None	8	Patents planned, issued or	vNone	
Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-    V_None		pending		
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Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  14 Leadership or fiduciary roleV_None	9		v_None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-				
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committee or advocacy group, paid or unpaid  11 Stock or stock options VNone  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or nonVNone	10		VNone	
group, paid or unpaid  11 Stock or stock options VNone  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or nonVNone				
12 Receipt of equipment,		•		
materials, drugs, medical writing, gifts or other services  13 Other financial or non	11	Stock or stock options	v_None	
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materials, drugs, medical writing, gifts or other services  13 Other financial or non				
writing, gifts or other services  13 Other financial or nonvNone	12		vNone	
services  13 Other financial or non				
<del></del>				
financial interests	13	Other financial or non-	vNone	
		financial interests		

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

Dr. Zhao received funding from Shaanxi Provincial Department of Science and Technology, and Xi'an Science and Technology Bureau. He has no conflict of interest with other authors.

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

Date:2023-10-16	
Your Name:_ Rui Jin	
Manuscript Title: The e	efficacy-associated biomarkers for immune checkpoint inhibitors in gastrointestinal cancer: a
literature review	
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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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.	vNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	vNone	
3	Royalties or licenses	v_None	
4	Consulting fees	v_None	

5	Payment or honoraria for lectures, presentations,	vNone		
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	vNone		
	testimony			
7	Support for attending	√ None		
,	meetings and/or travel			
	-			
8	Patents planned, issued or	√_None		
	pending			
	Double in a contraction on a Date	./ None		
9	Participation on a Data Safety Monitoring Board or	v_None		
	Advisory Board			
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	v_None		
11	Stock or stock options	v_None		
12	Receipt of equipment,	√ None		
12	materials, drugs, medical	vnone		
	writing, gifts or other			
	services			
13	Other financial or non-	vNone		
	financial interests			
Plea	Please summarize the above conflict of interest in the following box:			
			ı	

Dr. Jin has nothing to disclose.

Date:2023-10-16	
Your Name:_ Bin Zhao	
Manuscript Title: The effi	cacy-associated biomarkers for immune checkpoint inhibitors in gastrointestinal cancer: a
literature review	
Manuscript number (if kn	own):

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

5	Payment or honoraria for	v_None		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	v_None		
	testimony			
7	Support for attending meetings and/or travel	VNone		
8	Patents planned, issued or pending	VNone		
9	Participation on a Data	v_None		
	Safety Monitoring Board or			
	Advisory Board			
10	Leadership or fiduciary role	v_None		
	in other board, society,			
	committee or advocacy			
	group, paid or unpaid			
11	Stock or stock options	v_None		
12	Receipt of equipment,	v_None		
	materials, drugs, medical			
	writing, gifts or other			
	services			_
13	Other financial or non-	vNone		_
	financial interests			_
Plea	se summarize the above co	nflict of interest in the fo	ollowing box:	
_				
D	r. Zhao has nothing to disclose.			

Date:2023-10-16	
Your Name:_ Le Han	
Manuscript Title: The e	fficacy-associated biomarkers for immune checkpoint inhibitors in gastrointestinal cancer: a
literature review	
Manuscript number (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).	vNone	
3	Royalties or licenses	v_None	
4	Consulting fees	v_None	

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

Date:2023-10-16	
Your Name:_ Wenjuan	Chen
Manuscript Title: The	fficacy-associated biomarkers for immune checkpoint inhibitors in gastrointestinal cancer: a
literature review	
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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		Time frame: Since the initial	planning of the work
1	All support for the present	vNone	
	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	√_None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	v_None	
4	Consulting fees	vNone	

5	Payment or honoraria for	vNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	vNone	
	testimony		
7	Support for attending	v_None	
	meetings and/or travel		
8	Patents planned, issued or	√None	
	pending		
9	Participation on a Data	vNone	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	vNone	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	vNone	
12	Receipt of equipment,	vNone	
	materials, drugs, medical		
	writing, gifts or other		
13	services Other financial or non-	√ None	
13	financial interests	vnone	
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	ase sammanize the above to		morning work
Г	Or. Chen has nothing to disclose		
ן '	or cheminas nothing to disclose	•	
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Date:2023-10-16	
Your Name:_ Nina Hao	
Manuscript Title: The effic	cacy-associated biomarkers for immune checkpoint inhibitors in gastrointestinal cancer: a
literature review	
Manuscript number (if kn	own):

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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.	vNone	
		Time frame: past	26 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	v_None	
3	Royalties or licenses	vNone	
4	Consulting fees	VNone	

5 Payment or honoraria for		v_None			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or educational events				
6	Payment for expert	√ None			
	testimony				
	,				
7	Support for attending meetings and/or travel	VNone			
8	Patents planned, issued or	vNone			
	pending				
9	Participation on a Data	√ None			
9	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	v_None			
	-				
12	Receipt of equipment,	v_None			
	materials, drugs, medical writing, gifts or other				
	services				
13	Other financial or non-	v_None			
	financial interests				
Dlaa	isa summariza tha ahovo co	nflict of interest in the fall	owing hov		
riea	Please summarize the above conflict of interest in the following box:				

Dr. Hao has nothing to disclose.	

Date:2023-10-16	
Your Name:_ Yi Cui	
Manuscript Title: The effi	cacy-associated biomarkers for immune checkpoint inhibitors in gastrointestinal cancer: a
literature review	
Manuscript number (if kn	own):

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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	vNone	
	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	√_None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	v_None	
4	Consulting fees	vNone	

5 Payment or honoraria for		v_None			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or educational events				
6	Payment for expert	√ None			
	testimony				
	,				
7	Support for attending meetings and/or travel	VNone			
8	Patents planned, issued or	vNone			
	pending				
9	Participation on a Data	√ None			
9	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	v_None			
	-				
12	Receipt of equipment,	v_None			
	materials, drugs, medical writing, gifts or other				
	services				
13	Other financial or non-	v_None			
	financial interests				
Dlaa	isa summariza tha ahovo co	nflict of interest in the fall	owing hov		
riea	Please summarize the above conflict of interest in the following box:				

Dr. Cui has nothing to disclose.	

Date:9/26/23

Your Name: Ankit Madan

Manuscript Title: The efficacy-associated biomarkers for immune checkpoint inhibitors in gastrointestinal cancer: a

literature review

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.

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.

		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.	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	

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

Received payment/honoraria for being speaker and panelist at ASCO Advantage program upper GI cancer program in Virginia, USA for 2022 and 2023

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

Date: 9/28/23

Your Name: Joy Awosika

Manuscript Title: The efficacy-associated biomarkers for immune checkpoint inhibitors in gastrointestinal cancer: a

literature review

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.

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)
		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	

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			
	G ,				
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				
<b>6</b> 1		Clara . Chara	H		
Ple	ease summarize the above c	onflict of interest in the fo	liowing box:		
	None.				

Date: 10/3/23

Your Name: Shane Lloyd

Manuscript Title: The efficacy-associated biomarkers for immune checkpoint inhibitors in gastrointestinal cancer: a

literature review

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.

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)
		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	Cancer Study Group	

		T				
5	Payment or honoraria for	XNone				
	lectures, presentations,					
	speakers bureaus,					
	manuscript writing or					
	educational events					
6	Payment for expert	Kipp and Christian				
	testimony	- 1 1				
	•					
7	Support for attending	X None				
•	meetings and/or travel					
	meetings and, or traver					
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				
	·	<del></del>				
12	Receipt of equipment,	X None				
	materials, drugs, medical					
	writing, gifts or other					
	services					
13	Other financial or non-	X None				
	financial interests					
Dlaa	sa summariza tha abaya sa	nflict of interest in the	Disease summering the phase conflict of interest in the following how			

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

Dr. Lloyd reports consulting fees from Cancer Study Group and expert witness fees from Kipp and Christian

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

Date:2023-10-16	
Your Name:_ Yili Zhang	
Manuscript Title: The effi	cacy-associated biomarkers for immune checkpoint inhibitors in gastrointestinal cancer: a
literature review	
Manuscript number (if kn	own):

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

5	Payment or honoraria for lectures, presentations,	v_None			
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	vNone			
	testimony				
7	Support for attending meetings and/or travel	VNone			
8	Patents planned, issued or	vNone	_		
	pending		_		
_				_	
9	Participation on a Data	vNone			
	Safety Monitoring Board or Advisory Board				
10	<u>-</u>	of Name			
10	Leadership or fiduciary role in other board, society,	VNone		_	
	committee or advocacy		+		
	group, paid or unpaid				
11	Stock or stock options	v_None			
12	Receipt of equipment,	v_None			
	materials, drugs, medical				
	writing, gifts or other				
13	services Other financial or non-	√ None			
13	financial interests				
	illialiciai ilitelests			-	
Plea	Please summarize the above conflict of interest in the following box:				
D	r. Zhang has nothing to disclose	е.			