Date: April 24, 2023

Your Name: Rintaro Imazu

Manuscript Title: Marginal calcification of thymoma: Differences in the location of calcification indicate differences in

the characteristics of thymomas

Manuscript number (if known): JTD-23-164-CL

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)	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	x_None	

5	Payment or honoraria for	xNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	x None		
6	•	_xNone		
	testimony			
7	Support for attending	_xNone		
	meetings and/or travel			
8	Patents planned, issued or	xNone		
	pending			
9	Participation on a Data	x None		
	Safety Monitoring Board or			
	Advisory Board			
10		Nieus		
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,	x None		
	materials, drugs, medical			
	writing, gifts or other			
4.0	services			
13	Other financial or non-	_xNone		
	financial interests			
	Please summarize the above conflict of interest in the following box:			
N	None.			

Date: April 24, 2023

Your Name: Motoki Yano

Manuscript Title: Marginal calcification of thymoma: Differences in the location of calcification indicate differences in

the characteristics of thymomas

Manuscript number (if known): JTD-23-164-CL

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	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		
	in item #1 above).		
3	Royalties or licenses	xNone	
4	Consulting fees	x_None	

5	Payment or honoraria for	xNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	x None		
6	•	_xNone		
	testimony			
7	Support for attending	_xNone		
	meetings and/or travel			
8	Patents planned, issued or	xNone		
	pending			
9	Participation on a Data	x None		
	Safety Monitoring Board or			
	Advisory Board			
10		Nieus		
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,	x None		
	materials, drugs, medical			
	writing, gifts or other			
4.0	services			
13	Other financial or non-	_xNone		
	financial interests			
	Please summarize the above conflict of interest in the following box:			
N	None.			

Date: April 24, 2023

Your Name: Yuka Kitagawa

Manuscript Title: Marginal calcification of thymoma: Differences in the location of calcification indicate differences in

the characteristics of thymomas

Manuscript number (if known): JTD-23-164-CL

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)	Specifications/Comments (e.g., if payments were made to you or to your institution)
1	All support for the present	Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding,	xNone	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)  No time limit for this item.		
	THE TIME TO THIS ICENT		
		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		
4	Consulting fees	x_None	

5	Payment or honoraria for	xNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	x None		
6	•	_xNone		
	testimony			
7	Support for attending	_xNone		
	meetings and/or travel			
8	Patents planned, issued or	xNone		
	pending			
9	Participation on a Data	x None		
	Safety Monitoring Board or			
	Advisory Board			
10		Nieus		
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,	x None		
	materials, drugs, medical			
	writing, gifts or other			
4.0	services			
13	Other financial or non-	_xNone		
	financial interests			
	Please summarize the above conflict of interest in the following box:			
N	None.			

Date: April 24, 2023

Your Name: Ryotaro Katsuya

Manuscript Title: Marginal calcification of thymoma: Differences in the location of calcification indicate differences in

the characteristics of thymomas

Manuscript number (if known): JTD-23-164-CL

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)	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.	Time frame: Since the initialxNone	pranning 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	x_None	

5	Payment or honoraria for	xNone		
	lectures, presentations,			
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	x None		
6	•	_xNone		
	testimony			
7	Support for attending	_xNone		
	meetings and/or travel			
8	Patents planned, issued or	xNone		
	pending			
9	Participation on a Data	x None		
	Safety Monitoring Board or			
	Advisory Board			
10		Nieus		
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,	x None		
	materials, drugs, medical			
	writing, gifts or other			
4.0	services			
13	Other financial or non-	_xNone		
	financial interests			
	Please summarize the above conflict of interest in the following box:			
N	None.			

Date: June 9, 20	23
Your Name: <u>Sawa</u>	ko Okamoto
Manuscript Title:	Marginal calcification of thymoma: Differences in the location of calcification indicate
differences in the cha	racteristics of thymomas
Manuscript number	if known): JTD-23-164-CL

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.	Time frame: Since the initial 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	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	x_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	xNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	v. Name	
11	Stock or stock options	x_None	
12	Receipt of equipment,	x None	
12	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	xNone	
	financial interests		
Dlas		afice of income to the disc.	fallandaa ban

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:

form.

Date: April 24, 2023

Your Name: Chihiro Furuta

Manuscript Title: Marginal calcification of thymoma: Differences in the location of calcification indicate differences in

the characteristics of thymomas

Manuscript number (if known): JTD-23-164-CL

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)	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.	Time frame: Since the initialxNone	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	x_None	
4	Consulting fees	x_None	

5	Payment or honoraria for lectures, presentations,	xNone		
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	x None		
6	•	_xNone		
	testimony			
7	Support for attending	_xNone		
	meetings and/or travel			
8	Patents planned, issued or	xNone		
	pending			
9	Participation on a Data	x None		
	Safety Monitoring Board or			
	Advisory Board			
10		Nieus		
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,	x None		
	materials, drugs, medical			
	writing, gifts or other			
4.0	services			
13	Other financial or non-	_xNone		
	financial interests			
	Please summarize the above conflict of interest in the following box:			
N	None.			

Date: April 24, 2023

Your Name: Yuta Kawasumi

Manuscript Title: Marginal calcification of thymoma: Differences in the location of calcification indicate differences in

the characteristics of thymomas

Manuscript number (if known): JTD-23-164-CL

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)	Specifications/Comments (e.g., if payments were made to you or to your institution)
1	All support for the present	Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding,	xNone	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)  No time limit for this item.		
	THE TIME TO THIS ICENT		
		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		
4	Consulting fees	x_None	

5	Payment or honoraria for lectures, presentations,	xNone		
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	x None		
6	•	_xNone		
	testimony			
7	Support for attending	_xNone		
	meetings and/or travel			
8	Patents planned, issued or	xNone		
	pending			
9	Participation on a Data	x None		
	Safety Monitoring Board or			
	Advisory Board			
10		Nieus		
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,	x None		
	materials, drugs, medical			
	writing, gifts or other			
4.0	services			
13	Other financial or non-	_xNone		
	financial interests			
	Please summarize the above conflict of interest in the following box:			
N	None.			

Date:June 9	, 2023				
Your Name:N	laoki Ozeki				
Manuscript Title:	Marginal calcification of thymoma: Differences in the location of calcification indicate				
differences in the characteristics of thymomas					
Manuscrint numb	per (if known): ITD-23-164-CI				

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.	Time frame: Since the initial 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	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	x_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	xNone	
	in other board, society,		
	committee or advocacy		
11	group, paid or unpaid	v. Name	
11	Stock or stock options	x_None	
12	Receipt of equipment,	x None	
12	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	xNone	
	financial interests		
Dlas		afice of income to the disc.	fallandaa ban

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:

form.

Date: April 24, 2023

Your Name: Emiko Takahashi

Manuscript Title: Marginal calcification of thymoma: Differences in the location of calcification indicate differences in

the characteristics of thymomas

Manuscript number (if known): JTD-23-164-CL

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)	Specifications/Comments (e.g., if payments were made to you or to your institution)
1	All support for the present	Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding,	xNone	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)  No time limit for this item.		
	No time illinic for this item.		
		Time frame: past	36 months
2	Grants or contracts from	xNone	
	any entity (if not indicated		
2	in item #1 above).	y None	
3	Royalties or licenses	xNone	
4	Consulting fees	x_None	

5	Payment or honoraria for lectures, presentations,	xNone		
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	x None		
6	•	_xNone		
	testimony			
7	Support for attending	_xNone		
	meetings and/or travel			
8	Patents planned, issued or	xNone		
	pending			
9	Participation on a Data	x None		
	Safety Monitoring Board or			
	Advisory Board			
10		Nieus		
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,	x None		
	materials, drugs, medical			
	writing, gifts or other			
4.0	services			
13	Other financial or non-	_xNone		
	financial interests			
	Please summarize the above conflict of interest in the following box:			
N	None.			

Date: April 24, 2023

Your Name: Takayuki Fukui

Manuscript Title: Marginal calcification of thymoma: Differences in the location of calcification indicate differences in

the characteristics of thymomas

Manuscript number (if known): JTD-23-164-CL

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)	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	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		
	in item #1 above).		
3	Royalties or licenses	xNone	
4	Consulting fees	x_None	

5	Payment or honoraria for lectures, presentations,	xNone		
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	x None		
6	•	_xNone		
	testimony			
7	Support for attending	_xNone		
	meetings and/or travel			
8	Patents planned, issued or	xNone		
	pending			
9	Participation on a Data	x None		
	Safety Monitoring Board or			
	Advisory Board			
10		Nieus		
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,	x None		
	materials, drugs, medical			
	writing, gifts or other			
4.0	services			
13	Other financial or non-	_xNone		
	financial interests			
	Please summarize the above conflict of interest in the following box:			
N	None.			