| Date: | 2022 | 03.12 |
|-------|-------|-------|
| Date. | 2022. | 05.12 |

Your Name: Yurong Zhao

Manuscript Title: A network-based pharmacological study on the mechanism of action of muscone in breast cancer

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) 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 | |
| 3 | Grants or contracts from any entity (if not indicated in item #1 above). Royalties or licenses | None None | 36 months |
| 4 | Consulting fees | None | |

| 5 | Payment or honoraria for | None | |
|----|--|------|--|
| | lectures, presentations, speakers bureaus, | | |
| | manuscript writing or | | |
| | educational events | | |
| 6 | Payment for expert | None | |
| | testimony | | |
| _ | | | |
| 7 | Support for attending meetings and/or travel | None | |
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| 8 | Patents planned, issued or | None | |
| | pending | | |
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| 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 | |
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| | | | |
| 12 | Receipt of equipment, materials, drugs, medical | None | |
| | writing, gifts or other | | |
| | services | | |
| 13 | Other financial or non- | None | |
| | financial interests | | |
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Please place an "X" next to the following statement to indicate your agreement:

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|-------|----|------|-------|---|
| Date: | 20 | ZZ.U | JO. 1 | |

Your Name: Shuaixian Tao

Manuscript Title: A network-based pharmacological study on the mechanism of action of muscone in breast cancer 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: past | 36 months |
| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None None | |
| 3 | Royalties or licenses | None | |
| 4 | Consulting fees | None | |

| 6 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | None | |
|----|--|------|--|
| 7 | Support for attending meetings and/or travel | None | |
| 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 | |
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| None | | | |
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Please place an "X" next to the following statement to indicate your agreement:

| Date: | 2022 | 03.12 |
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| Date. | 2022. | 05.12 |

Your Name: Qiang Wang

Manuscript Title: A network-based pharmacological study on the mechanism of action of muscone in breast cancer 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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| 2 | Grants or contracts from any entity (if not indicated in item #1 above). | None | |
| 3 | Royalties or licenses | None | |
| 4 | Consulting fees | None | |

| 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 None | 5 | Payment or honoraria for | None | |
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| manuscript writing or educational events Payment for expert testimony None 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 None | | lectures, presentations, | | |
| educational events Payment for expert testimony None 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 None None | | | | |
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| 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 None None None None None | 6 | | 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 None None None None | | testimony | | |
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| 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 None | 7 | | None | |
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| 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 None | | | | |
| 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 | 8 | | None | |
| Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | | pending | | |
| Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | 0 | Dankisia skiana ana Daka | News | |
| Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | 9 | | None | |
| 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | | | | |
| in other board, society, committee or advocacy group, paid or unpaid | 10 | | None | |
| group, paid or unpaid | | | | |
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| | 11 | Stock or stock options | None | |
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| 12 Receipt of equipment, None | 12 | | None | |
| materials, drugs, medical writing, gifts or other | | | | |
| services | | | | |
| 13 Other financial or non- None | 13 | Other financial or non- | None | |
| financial interests | | financial interests | | |
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| None | | | |
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Please place an "X" next to the following statement to indicate your agreement:

| Date: | 2022.03.12 | <u>.</u> |
|-------|------------|----------|
| Your | Name: Yan | Liu |

Manuscript Title: A network-based pharmacological study on the mechanism of action of muscone in breast cancer 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 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 None | |
| 3 | Royalties or licenses | None | |
| 4 | Consulting fees | None | |

| 6 | Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony | None | |
|----|--|------|--|
| 7 | Support for attending meetings and/or travel | None | |
| 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 | |
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Please place an "X" next to the following statement to indicate your agreement:

| Date: | 2022 | 03.12 |
|-------|-------|-------|
| Date. | 2022. | 03.12 |

Your Name: Wenke Yang

Manuscript Title: A network-based pharmacological study on the mechanism of action of muscone in breast cancer 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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| 3 | Royalties or licenses | None | |
| 4 | Consulting fees | None | |

| 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 None | 5 | Payment or honoraria for | None | |
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| manuscript writing or educational events Payment for expert testimony None 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 None | | lectures, presentations, | | |
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| 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 None None None None | | | | |
| 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 None None None None None | 6 | | None | |
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| Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | 9 | | None | |
| 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid | | | | |
| in other board, society, committee or advocacy group, paid or unpaid | 10 | | None | |
| group, paid or unpaid | | | | |
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| | 11 | Stock or stock options | None | |
| | | | | |
| | | | | |
| 12 Receipt of equipment, None | 12 | | None | |
| materials, drugs, medical writing, gifts or other | | | | |
| services | | | | |
| 13 Other financial or non- None | 13 | Other financial or non- | None | |
| financial interests | | financial interests | | |
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| None | | | |
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Please place an "X" next to the following statement to indicate your agreement:

| Date: | 2022 | .03.12 |
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| Date. | 2022 | .03.12 |

Your Name: Shoude Zhang

Manuscript Title: A network-based pharmacological study on the mechanism of action of muscone in breast cancer 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. | 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 | None | |

| 5 | Payment or honoraria for | None | |
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| | lectures, presentations, | | |
| | speakers bureaus, | | |
| | manuscript writing or | | |
| _ | educational events | | |
| 6 | Payment for expert | None | |
| | testimony | | |
| 7 | Cuppert for attending | None | |
| / | Support for attending meetings and/or travel | None | |
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| | | | |
| 8 | Patents planned, issued or | None | |
| | pending | | |
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| 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 | Receipt of equipment, | None | |
| | materials, drugs, medical | | |
| | writing, gifts or other services | | |
| 13 | Other financial or non- | None | |
| | financial interests | | |
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Please place an "X" next to the following statement to indicate your agreement:

Your Name: Zhanhai Su

Manuscript Title: A network-based pharmacological study on the mechanism of action of muscone in breast cancer 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 | None | planning of the work |
| 1 | manuscript (e.g., funding, | None | |
| | 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 | None | |
| | | | |
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| 7 | Support for attending meetings and/or travel | None | |
| 8 | Patents planned, issued or pending | None | |
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| 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 | |
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| None | | | |
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Please place an "X" next to the following statement to indicate your agreement:

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| Date: | 2022 | Ĺ.U3. | .IZ |

Your Name: Xueman Ma

Manuscript Title: A network-based pharmacological study on the mechanism of action of muscone in breast cancer Manuscript number (if known):______

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