Date:Mar. 22 <sup>th</sup> , 2021
Your Name:Mary Zhang
Manuscript Title: Randomized Phase II Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in Patients
with Thoracic Malignancies
Manuscript number (if known): TLCR-21-1-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	XNone	

5	5 Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events	V Nana			
6	Payment for expert	XNone			
	testimony				
7	Support for attending	X None			
/	meetings and/or travel	^_NONE			
	meetings and/or traver				
8	Patents planned, issued or	X None			
0	pending	XNOTIE			
	periamg				
_	Double in this is a Dob	V None			
9	Participation on a Data Safety Monitoring Board or	XNone			
	Advisory Board				
10	Leadership or fiduciary role	X None			
10	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				
	services				
13	Other financial or non-	XNone			
	financial interests				
<b>5</b> 1.					
Plea	Please summarize the above conflict of interest in the following box:				
N.	None.				
'	ione.				

Date:Mar. 22 <sup>th</sup> , 2021
Your Name:Julie Hong
Manuscript Title: Randomized Phase II Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in Patients
with Thoracic Malignancies
Manuscript number (if known): TLCR-21-1-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	XNone	

5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
_	educational events				
6	Payment for expert	XNone			
	testimony				
7	Compare for attackling	V None			
7	Support for attending meetings and/or travel	XNone			
	-				
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			
4.0		V N			
12	Receipt of equipment,	X_None			
	materials, drugs, medical writing, gifts or other				
	services				
13	Other financial or non-	XNone			
	financial interests				
Plea	ase summarize the above co	nflict of interest in the follo	owing box:		
	lone.				

Date:3/22/2021
Your Name:Tricia F. Kunst
Manuscript Title: Randomized Phase II Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in Patien
with Thoracic Malignancies
Manuscript number (if known):_ TLCR-21-1-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	_XNone	

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

none			

	e:March 23, 2021 _			
	r Name:Colleen D. E			
	-	Phase II Evaluation of a	n First-in-Human Cancer Cell Lysate Vaccine in Pati	ents
	n Thoracic Malignancies			
Mar	uscript number (if known):	TLCR-21-1-CL		
relate part to trelate man. The to the med. In it.	ted to the content of your miles whose interests may be cansparency and does not not itionship/activity/interest, it following questions apply to uscript only.  author's relationships/activity e epidemiology of hyperterication, even if that medical	nanuscript. "Related" mean affected by the content of ecessarily indicate a bias. It is preferable that you do so the author's relationship wities/interests should be dension, you should declare a tion is not mentioned in the	s/activities/interests as they relate to the <u>current</u> <u>efined broadly</u> . For example, if your manuscript pertains all relationships with manufacturers of antihypertensive	
		Name all entities with	Specifications/Comments	
		whom you have this	(e.g., if payments were made to you or to your	
		relationship or indicate none (add rows as	institution)	
		needed)		
		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.			
	No time mint 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		
7	Consulting rees			

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	_XNone		
6	Payment for expert testimony	XNone		
7	Support for attending meetings and/or travel	XNone		
8	Patents planned, issued or pending	_XNone		
9	Participation on a Data Safety Monitoring Board or Advisory Board	_XNone		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	_XNone		
11	Stock or stock options	_XNone		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	XNone		
13	Other financial or non- financial interests	XNone		

none			

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

Date:March 22, 2021	
Your Name:Cara Kenney	
Manuscript Title: Randomized Phase	e II Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in Patients
with Thoracic Malignancies	
Manuscript number (if known):	TLCR-21-1-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	XNone	

5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events	V Nana	
6	Payment for expert	XNone	
	testimony		
7	Support for attending	X None	
/	meetings and/or travel	^_NONE	
	meetings and/or traver		
8	Patents planned, issued or	X None	
0	pending	XNOTIE	
	periamg		
_	Double in this is a Dob	V None	
9	Participation on a Data Safety Monitoring Board or	XNone	
	Advisory Board		
10	Leadership or fiduciary role	X None	
10	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		
	services		
13	Other financial or non-	XNone	
	financial interests		
<b>D</b> '		office of the control of the	
Plea	ase summarize the above co	nflict of interest in the follo	owing box:
	lono		
'	lone.		

Date:_3-29-21
Your Name: _ Cheryl Warga
Manuscript Title:_ Randomized Phase II Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in
Patients with Thoracic Malignancies
Manuscript number (if known): TLCR-21-1-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	XNone	

,		T	<u> </u>		
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	X_None			
	·				
8	Patents planned, issued or	XNone			
	pending				
9	Participation on a Data	XNone			
	Safety Monitoring Board or				
	Advisory Board				
10	Leadership or fiduciary role	X_None			
	in other board, society,				
	committee or advocacy				
	group, paid or unpaid				
11	Stock or stock options	XNone			
4.0		V N			
12	Receipt of equipment,	XNone			
	materials, drugs, medical				
	writing, gifts or other services				
13	Other financial or non-	X None			
10	financial interests				
Plea	Please summarize the above conflict of interest in the following box:				
	riease summarize the above connect of interest in the following box.				

None			

Date:\_\_Mar, 25th, 2021\_\_\_\_\_

Consulting fees

\_X\_None

You	r Name:Javier Yeray	<del></del>	
Mai	nuscript Title: Randomiz	ed Phase II Evaluation	of a First-in-Human Cancer Cell Lysate Vaccine in
	ients with Thoracic Malig		·
	nuscript number (if known):	,	
rela part to t	ted to the content of your n ties whose interests may be	nanuscript. "Related" mea affected by the content o ecessarily indicate a bias.	relationships/activities/interests listed below that are ans any relation with for-profit or not-for-profit third of the manuscript. Disclosure represents a commitment of the same in doubt about whether to list a so.
The			ps/activities/interests as they relate to the <u>current</u>
The	author's relationships/activ	•	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive
med	dication, even if that medica	ition is not mentioned in t	he manuscript.
	em #1 below, report all sup time frame for disclosure is	-	d in this manuscript without time limit. For all other items,
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	·
		needed)	
		Time frame: Since the initia	al 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.		
2	Country	Time frame: pas	t 36 months
2	Grants or contracts from	X_None	
	any entity (if not indicated in item #1 above).		
3	Royalties or licenses	X_None	
_	1.0 Juilies of ficelises		

5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X_None	
	testimony		
7	Support for attending 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	X None	
10	in other board, society,		
	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		
	services		
13	Other financial or non-	X None	
	financial interests		
	ase summarize the above co	nflict of interest in the fo	ollowing box:
1 1	NOTIC		

Date	e:	Mar. 24 <sup>th</sup> , 20	021
You	r Name	Min-Jung Lee	021
Mar	nuscript Title: Randomized	Phase II Evaluation of a Fi	rst-in-Human Cancer Cell Lysate Vaccine in Patients with
	racic Malignancies		
Mar	nuscript number (if known):	TLCR-21-1-CL	
relate to trelate man. The man to the med	ted to the content of your name ies whose interests may be cansparency and does not not interest, it is following questions apply the content only.  author's relationships/actions e epidemiology of hyperterication, even if that medicatem #1 below, report all sup	nanuscript. "Related" mea affected by the content of ecessarily indicate a bias. it is preferable that you do to the author's relationship vities/interests should be on nsion, you should declare a tion is not mentioned in the	os/activities/interests as they relate to the <u>current</u> defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive
the	time frame for disclosure is	Name all entities with whom you have this	Specifications/Comments (e.g., if payments were made to you or to your
		relationship or indicate none (add rows as	institution)
		needed)	I planning of the week
		Time frame: Since the initia	n 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 lectures, presentations,	XNone		
	speakers bureaus,			
	manuscript writing or			
-	educational events Payment for expert	V None		
6	testimony	_XNone		-
				_
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	XNone		
	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,	X None		
12	materials, drugs, medical	_XNone		_
	writing, gifts or other services			_
13	Other financial or non-	_XNone		
	financial interests			
Ple	ase summarize the above co	onflict of interest in the foll	owing box:	
r	None			
'				
			l I	

Date: 3/30/2021 Your Name: Akira Yuno

Manuscript Title: Randomized Phase II Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in Patients

with Thoracic Malignancies

Manuscript number (if known): TLCR-21-1-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
manuscript (e.g., funding, provision of study materials,	_X_None	
medical writing, article processing charges, etc.)  No time limit for this item.		
	Time frame: past	36 months
Grants or contracts from	_X_None	
in item #1 above).		
Royalties or licenses	_X_None	
Consulting fees	_X_None	
	provision of study materials, medical writing, article processing charges, etc.)  No time limit for this item.  Grants or contracts from any entity (if not indicated in item #1 above).  Royalties or licenses	whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initial  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: past  X_None  Time frame: past  X_None  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.

Sample   S				
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-    X_None				
speakers bureaus, manuscript writing or educational events  6	5	Payment or honoraria for	_X_None	
manuscript writing or educational events Payment for expert testimony  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  Paceipt of equipment, materials, drugs, medical writing, gifts or other services  Manuscript writing equipment, materials, drugs, medical writing, gifts or other services  A None  A N		lectures, presentations,		
educational events  Payment for expert testimony  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  A None  X_None		speakers bureaus,		
Farticipation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fuduciary 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-    X_None				
testimony  Support for attending meetings and/or travel  Because of the poard, society, committee or advocacy group, paid or unpaid  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Support for attending				
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-    X_None	6		_X_None	
meetings and/or travel		testimony		
meetings and/or travel				
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  A None	7		_X_None	
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  A None				
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  A 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  11 Stock or stock options  2 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  2 None	8	T	_X_None	
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-    X_None		pending		
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-    X_None				
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  Advisory Board  X_None  X_None  X_None  X_None  X_None  X_None  X_None  X_None	9	9 Participation on a Data	_X_None	
10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  2 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  2 X_None  2 X_None  3 X_None  4 X_None  5 X_None  5 X_None  6 X_None  7 X_None  7 X_None  7 X_None				
in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  X_None  X_None				
committee or advocacy group, paid or unpaid  11 Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  X_None	10		_X_None	
group, paid or unpaid  Stock or stock options  X_None  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-  X_None  X_None  X_None		=		
Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  X_None  X_None  X_None		-		
materials, drugs, medical writing, gifts or other services  13 Other financial or nonX_None	11	Stock or stock options	_X_None	
materials, drugs, medical writing, gifts or other services  13 Other financial or nonX_None				
materials, drugs, medical writing, gifts or other services  13 Other financial or nonX_None				
writing, gifts or other services  13 Other financial or nonX_None	12	Receipt of equipment,	_X_None	
services  13 Other financial or nonX_NoneX_None		_		
· · · · · · · · · · · · · · · · · ·				
financial interests	13	Other financial or non-	_X_None	
		financial interests		

None.			

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

Date:	Mar. 22 <sup>th</sup> , 2021	
Your Name:	Sunmin Lee	<del></del>
<b>Manuscript Titl</b>	e: Randomized Phase	e II Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in Patients with
	Thoracic Malignar	cies
Manuscript nur	mber (if known):	TLCR-21-1-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 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	XNone	

		1				
_						
5	Payment or honoraria for	XNone				
	lectures, presentations,					
	speakers bureaus,					
	manuscript writing or					
	educational events					
6	Payment for expert	X None				
	testimony					
	,					
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	X None				
,	Safety Monitoring Board or					
	Advisory Board					
10	Leadership or fiduciary role	X None				
10		_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-	X None				
	financial interests					
Dles	Disease summering the charge conflict of interest in the following how					
riea	Please summarize the above conflict of interest in the following box:					
N	one					

Date:	3/25/202	1	_		
Your Name:	Markku N	/liettinen			
Manuscript Title: F	Randomized Ph	ase II Evaluation of a	a First-in-Human	Cancer Cell Lysate	e Vaccine in Patients
with Thoracic Ma	alignancies				
Manuscript numbe	r (if known):	TLCR-21-1-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.	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	
5	lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
	testimony		
7	Support for attending meetings and/or travel	None	
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	in other board, society,	None	
	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		

None		

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

Date:March 23, 2021
Your Name:R. Taylor Ripley
Manuscript Title: Randomized Phase II Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in Patients
with Thoracic Malignancies
Manuscript number (if known): _TLCR-21-1-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	_XNone	

5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
_	educational events	V No.	
6	Payment for expert testimony	_XNone	
	testimony		
7	Support for attending	X None	
,	meetings and/or travel		
	G ,		
8	Patents planned, issued or	XNone	
	pending		
9	Participation on a Data	_XNone	
	Safety Monitoring Board or		
40	Advisory Board	V N	
10	Leadership or fiduciary role in other board, society,	_XNone	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
	трен и		
12	Receipt of equipment,	_XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	_XNone	
	financial interests		

None			

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

Date:	March 23, 2021	
Your Name:	Chuong D. Hoang	
Manuscript Title:	Randomized Phase I	I Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in
Patients with Tho	racic Malignancies	
Manuscript number	r (if known):	TLCR-21-1-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 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	
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	
4.0			
12	Receipt of equipment,	XNone	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

Nothing to Declare			

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

Date: March 24, 2021

Your Name: Sacha Gnjatic, PhD

Manuscript Title Phase II Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in Patients with Thoracic

Malignancies

Manuscript number (if known): TLCR-21-1-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)  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.	NCI, NIDDK	Dr. Gnjatic is supported by grants U24 CA224319 and U01 DK124165.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	Bristol-Myers Squibb, Genentech, Immune Design, Agenus, Janssen R&D, Pfizer, Takeda, and Regeneron	S.G. reports research funding from Bristol-Myers Squibb, Genentech, Immune Design, Agenus, Janssen R&D, Pfizer, Takeda, and Regeneron, unrelated to current work.
3	Royalties or licenses	None	
3	novalues of ficerises	IVOIIC	

4	Consulting fees	Merck, Neon Therapeutics and OncoMed	S.G. reports past consultancy and/or advisory roles for Merck, Neon Therapeutics and OncoMed.
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	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	

Dr. Gnjatic is supported by grants U24 CA224319 and U01 DK124165. S.G. reports past consultancy and/or advisory roles for Merck, Neon Therapeutics and OncoMed. S.G. reports research funding from Bristol-Myers Squibb, Genentech, Immune Design, Agenus, Janssen R&D, Pfizer, Takeda, and Regeneron, unrelated to current work.

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

Date:3.24.21	
<b>/our Name:</b> Jane B. Trepel	
<b>Manuscript Title:</b> Randomized Phas	se II Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in Patients with Thoracic
Malignancies	
Manuscript number (if known):	TLCR-21-1-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	vNone	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article processing charges, etc.)		
	No time limit for this item.		
	ivo time illinit for this item.		
		Time frame, nect	26 months
2		Time frame: past	56 MONUNS
2	Grants or contracts from	vNone	
	any entity (if not indicated		
2	in item #1 above).	d Name	
3	Royalties or licenses	VNone	
4	Consulting food	y None	
4	Consulting fees	VNone	

5	Payment or honoraria for	√ aNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	v_None	
	testimony		
7	Support for attending	v_None	
	meetings and/or travel		
8	Patents planned, issued or	vNone	
	pending		
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		
12	services	al Name	
13	Other financial or non-	VNone	
	financial interests		

None			

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

Date:Mar. 22 <sup>th</sup> , 2021
Your Name:David S.Schrump
Manuscript Title: Randomized Phase II Evaluation of a First-in-Human Cancer Cell Lysate Vaccine in Patients
with Thoracic Malignancies
Manuscript number (if known): TLCR-21-1-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	XNone			

5	Payment or honoraria for	XNone			
	lectures, presentations,				
	speakers bureaus,				
	manuscript writing or				
	educational events				
6	Payment for expert	XNone			
	testimony				
7	Cupport for attending	X None			
7	Support for attending meetings and/or travel	xnone			
	meetings unayor travel				
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		V N			
11	Stock or stock options	XNone			
12	Receipt of equipment,	X_None			
12	materials, drugs, medical				
	writing, gifts or other				
	services				
13	Other financial or non-	XNone			
	financial interests				
Plea	Please summarize the above conflict of interest in the following box:				
	lone.				