## ICMJE DISCLOSURE FORM

Date:3/4/2023	
Your Name:Misako Nagasaka	
Manuscript Title: Penetrating the CNS sanctuary of KRAS, a target once thought "undruggable"	
Manuscript number (if known): TLCR-23-71	

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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)  No time limit for this item.		
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		<b>-</b> : .	25 1
		Time frame: past	36 months
2	Grants or contracts from	Tempus	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	AstraZeneca, Caris	
		Life Sciences, Daiichi-	

5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	Sankyo, Novartis, EMD Serono, Pfizer, Lilly and Genentech Takeda, Janssen, Mirati, Blueprint Medicines	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	AnHeart Therapeutics	
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	

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

Dr. Nagasaka has received consulting fees from AstraZeneca, Caris Life Sciences, Daiichi Sankyo, Novartis, EMD Serono, Pfizer, Lilly and Genentech, has received travel support from AnHeart Therapeutics and is a speaker for Takeda, Janssen, Mirati and Blueprint Medicines.

Please place an "X" next to the following statement to indicate your agreement: x_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.		

## ICMJE DISCLOSURE FORM

Date:3/4/2023	
Your Name:Asfar S Azmi	
Manuscript Title: Penetrating the CNS	sanctuary of KRAS, a target once thought "undruggable"
Manuscript number (if known):TLCR	

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.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		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).	Karyopharm, EISAI, Janssen	
3	Royalties or licenses	None	
4	Consulting fees	GLG , Guidepoint	

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5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	None	
J	testimony	None	
	testimony		
7	Support for attending	None	
/		None	
	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
,	Safety Monitoring Board or Advisory Board	None	
10	2	Nama	
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		
			•

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

Dr. Azmi has received funding fro GLG and Guidepoint.	om Karyopharm, EISAI,	Janssen and serves as	a consultant for

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

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