Table S1 The clinical and specimen information of patients in this study

| Patient_number	Sample_number	Age, year	Gender	Smoking history	Tumor size (cm)	Histology	pTNM stages
Patient 1	006	72	Male	No	1.6×1.2×1.2	IAC	pT1bN0M0
Patient 2	007	64	Female	No	3.5×2.5×2	IAC	pT2abN0M0
Patient 3	009	63	Female	No	2.2×1.5×1.5	IAC	pT1cN0M0
Patient 4	011	54	Female	No	1.7×1.2×0.6	IAC	pT1bN0M0
Patient 5	013	71	Female	Yes	2.7×2.2×2	IAC	pT1cN0M0
Patient 6	017	79	Female	No	2.2×1.5×1	IAC	pT1cN0M0
Patient 7	018	67	Male	Yes	1.8×1.5×0.9	IAC	pT1bN0M0

IAC, invasive adenocarcinoma.
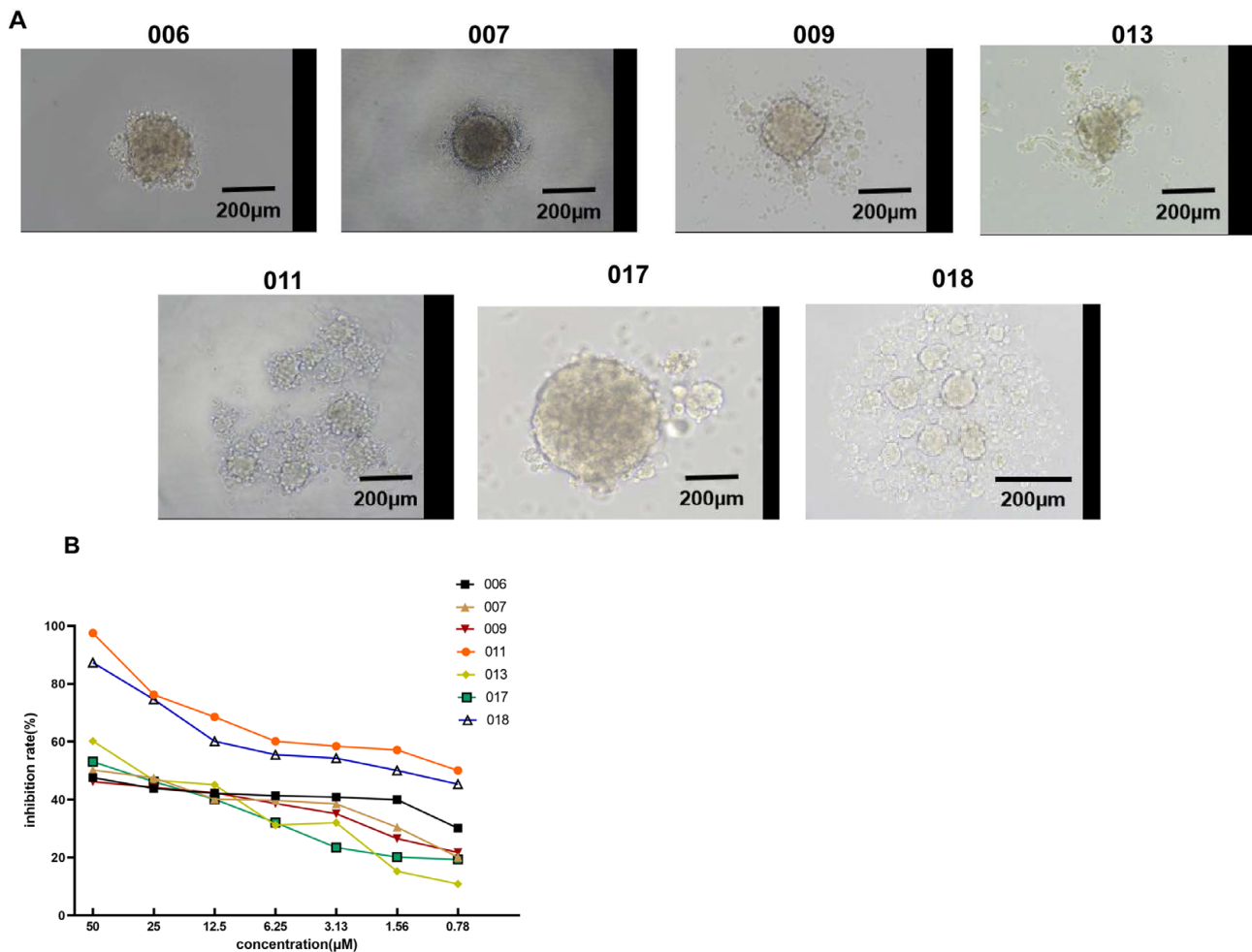
Figure S1 *In vitro* drug sensitivity screening of patient-derived organoid models. (A) Tumor-like organoid models were constructed using samples taken from patients undergoing surgery for lung cancer. Observed using an inverted light microscope and photographed (×10). (B) Organoid models were subjected to treatment with varying concentrations of CDDP, and the resultant inhibition was measured using a dedicated kit. Of these, 006, 007, 009, 013, and 017 exhibited resistance to CDDP. CDDP, cisplatin.
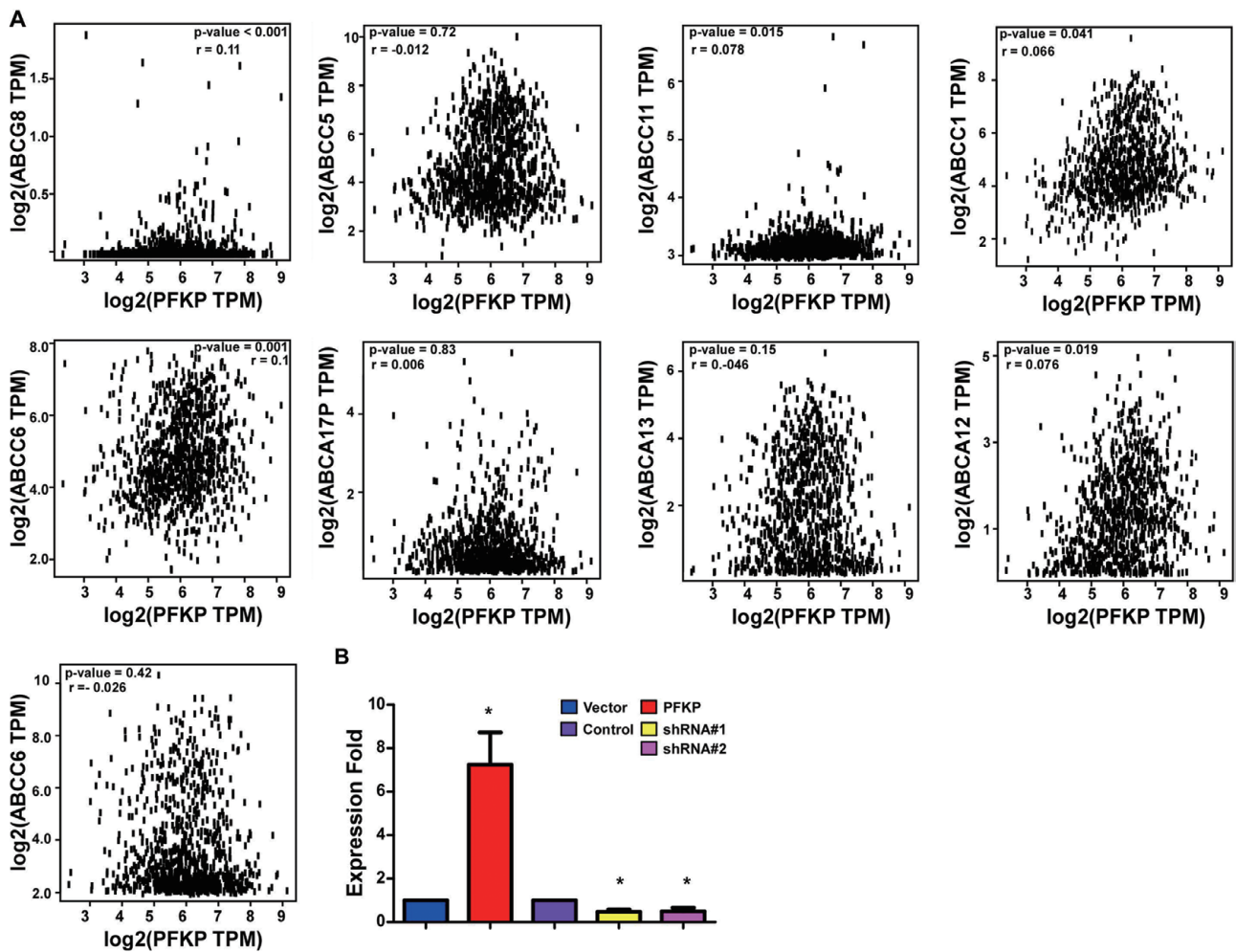
Figure S2 Correlation analysis of 9 ABC transporters with PFKP. (A) 10 ABC transporters with fold change >2.0 were analyzed for correlation with PFKP using GEPIA correlation, with ABCC2 showing the strongest correlation with PFKP (*Figure 5C*). (B) After transfecting A549 cells with the corresponding vector and PFKP plasmids, shRNA#1, shRNA#2, and sh-control transfected A549/CDDP cells, PFKP expression was analyzed using qRT-PCR. *, P<0.05.