ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

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**Royalties:** Funds are coming in to you or your institution due to your patent

Smith
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Corey
2. Surname (Last Name)  Smith
3. Date  16-July-2019
4. Are you the corresponding author?  Yes  No

5. Manuscript Title
T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response

6. Manuscript Identifying Number (if you know it)
128323-JCI-CMED-RV-3

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

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<tr>
<td>Atara Biotherapeutics</td>
<td>✔</td>
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<td></td>
<td></td>
<td>I am currently appointed as consultant for Atara Biotherapeutics and also receive funding for research and development.</td>
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Section 4. Intellectual Property -- Patents & Copyrights

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<tr>
<td>CMV epitopes</td>
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Dr. Smith reports grants and personal fees from Atara Biotherapeutics, during the conduct of the study; In addition, Dr. Smith has a patent CMV epitopes pending to Atara Biotherapeutics.
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
   Rajiv

2. Surname (Last Name)
   Khanna

3. Date
   16-July-2019

4. Are you the corresponding author? ☑ Yes ☐ No
   Corresponding Author’s Name
   Corey Smith

5. Manuscript Title
   T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response

6. Manuscript Identifying Number (if you know it)
   128323-JCI-CMED-RV-3

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Are there any relevant conflicts of interest? ☑ Yes ☐ No

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<td>International patent on CMV epitopes</td>
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Dr. Khanna reports grants and personal fees from Atara Bitherapeutics, during the conduct of the study; In addition, Dr. Khanna has a patent International patent on CMV epitopes with royalties paid to Atara Biotherapeutics.
Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Michelle
2. Surname (Last Name)  Neller
3. Date  16-July-2019
4. Are you the corresponding author?  ☑ No
   Corresponding Author’s Name  Corey Smith
5. Manuscript Title  T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response
6. Manuscript Identifying Number (if you know it)  128323-JCI-CMED-RV-3

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Dr. Neller has nothing to disclose.

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

1. **Given Name (First Name):** Matthew  
   **Surname (Last Name):** Solomon  
   **Date:** 16-July-2019  

4. **Are you the corresponding author?**  
   - [ ] Yes  
   - [x] No  
   **Corresponding Author’s Name:** Corey Smith

5. **Manuscript Title:**  
   T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response

6. **Manuscript Identifying Number (if you know it):**  
   128323-JCI-CMED-RV-3

## Section 2. The Work Under Consideration for Publication

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- [ ] Yes  
- [x] No

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  

- [ ] Yes  
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Mr Solomon has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  Dillon
2. Surname (Last Name)  Corvino
3. Date  16-July-2019

4. Are you the corresponding author?  ☑ No

Corresponding Author’s Name  Corey Smith

5. Manuscript Title  T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):

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Section 6. Disclosure Statement

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Dr. Corvino has nothing to disclose.

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4. **Intellectual Property.**

   This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Leone

2. Surname (Last Name)  
   Beagley

3. Date  
   17-July-2019

4. Are you the corresponding author?  
   ☐ Yes  ☑ No

   Corresponding Author’s Name  
   Dr. Corey Smith

5. Manuscript Title  
   T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response

6. Manuscript Identifying Number (if you know it)  
   128323-JCI-CMED-RV-3

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
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Ms. Beagley has nothing to disclose.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Pauline

2. Surname (Last Name)  
   Crooks

3. Date  
   17-July-2019

4. Are you the corresponding author?  
   □ Yes  ✔ No  
   Corresponding Author’s Name  
   Corey Smith

5. Manuscript Title  
   T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response

6. Manuscript Identifying Number (if you know it)  
   128323-JCI-CMED-RV-3

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Are there any relevant conflicts of interest?  
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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Section 1. Identifying Information

1. Given Name (First Name)  
   Ross

2. Surname (Last Name)  
   Francis

3. Date  
   16-July-2019

4. Are you the corresponding author?  
   □ Yes  □ No  
   Corresponding Author’s Name

5. Manuscript Title  
   T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response

6. Manuscript Identifying Number (if you know it)  
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Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  □ Yes  □ No

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Are there any relevant conflicts of interest?  □ Yes  □ No

If yes, please fill out the appropriate information below.

<table>
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<th>Name of Entity</th>
<th>Grant?</th>
<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
<th>Other?</th>
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</table>

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  □ Yes  □ No
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Dr. Francis reports non-financial support from Amgen, non-financial support from Novartis, outside the submitted work.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Laetitia

2. Surname (Last Name)  
Le Texier

3. Date  
17-July-2019

4. Are you the corresponding author?  
☑️ No

Corresponding Author’s Name  
Corey Smith

5. Manuscript Title  
T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response

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Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Le Texier has nothing to disclose.

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Section 1. Identifying Information

1. Given Name (First Name)  
   SWEERA

2. Surname (Last Name)  
   REHAN

3. Date  
   17-July-2019

4. Are you the corresponding author?  
   ☐ Yes  ☑ No

   Corresponding Author's Name  
   COREY SMITH

5. Manuscript Title  
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Are there any relevant conflicts of interest?  
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Ms. REHAN has nothing to disclose.

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Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party—that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work’s sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

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This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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- **Entity**: government agency, foundation, commercial sponsor, academic institution, etc.
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- **Royalties**: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Scott
2. Surname (Last Name)  Campbell
3. Date  17-July-2019

4. Are you the corresponding author?  [ ] Yes  [ ] No
   Corresponding Author’s Name  Corey Smith

5. Manuscript Title
   T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response

6. Manuscript Identifying Number (if you know it)
   128323-JCI-CMED-RV-3

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  [ ] Yes  [ ] No

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Are there any relevant conflicts of interest?  [ ] Yes  [ ] No

If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
<th>Grant?</th>
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  [ ] Yes  [ ] No
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☐ Yes, the following relationships/conditions/circumstances are present (explain below):
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Section 6. Disclosure Statement

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Dr. Campbell reports other from Takeda Pharmaceuticals, other from Merck Sharp & Dohme, outside the submitted work.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Daniel
2. Surname (Last Name) Chambers
3. Date  17-July-2019

4. Are you the corresponding author?  Yes  No

Corresponding Author's Name

5. Manuscript Title
T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response

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Are there any relevant conflicts of interest?  Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

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Dr. Chambers reports grants from NHMRC, during the conduct of the study.

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## Section 1. Identifying Information

1. **Given Name (First Name)**  
   Katherine  

2. **Surname (Last Name)**  
   Matthews  

3. **Date**  
   17-July-2019  

4. Are you the corresponding author?  
   [ ] Yes  
   [x] No  
   **Corresponding Author’s Name**  
   Corey Smith  

5. **Manuscript Title**  
   T cell repertoire remodelling following post-transplant T cell therapy coincides with clinical response  

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Dr. Matthews has nothing to disclose.

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