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1. **Identifying information.**

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   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".

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4. **Intellectual Property.**

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

5. **Relationships not covered above.**

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**Definitions.**

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- **Other:** Anything not covered under the previous three boxes
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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)  Pamela
2. Surname (Last Name)  Abdayem
3. Date  12-April-2020
4. Are you the corresponding author?  Yes  ✔  No
   Corresponding Author’s Name  David Planchard
5. Manuscript Title  Oncogene Addiction and Immune Escape: Friends or Foes?
6. Manuscript Identifying Number (if you know it)  ATM-20-3036(E2020040291-31605792-ZKP)

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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Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the “Add +” box. You should report relationships that were present during the 36 months prior to publication. Are there any relevant conflicts of interest?  ✔ Yes  No
If yes, please fill out the appropriate information below.

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Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  ✔  No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Dr. Abdayem reports non-financial support from Pierre Fabre, non-financial support from Roche, 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)  
David

2. Surname (Last Name)  
Planchard

3. Date  
12-April-2020

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

5. Manuscript Title  
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