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.

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.

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

5. Relationships not covered above.

Use this section to report 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.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Kara
2. Surname (Last Name)  Kelly
3. Date  06-April-2020
4. Are you the corresponding author?  ✔ Yes  No
5. Manuscript Title
Report from the Lymphoma Research Foundation Adolescent and Young Adult (AYA) Lymphoma Scientific Workshop, May 2019
6. Manuscript Identifying Number (if you know it)

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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<thead>
<tr>
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<th>Non-Financial Support?</th>
<th>Other?</th>
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<tbody>
<tr>
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<td></td>
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<td>My institution receives funding for my role on a study scientific advisory committee</td>
</tr>
</tbody>
</table>

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  ✔ No
Section 5. Relationships not covered above

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. Kelly reports grants from Merck, outside the submitted work; .

Evaluation and Feedback

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Bollard
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Catherine

2. Surname (Last Name)  
   Bollard

3. Date  
   23-March-2020

4. Are you the corresponding author?  
   No

   ✔ Yes

   Corresponding Author’s Name
   Kara Kelly

5. Manuscript Title  
   Report from the Lymphoma Research Foundation Adolescent and Young Adult (AYA) Lymphoma Scientific Workshop, May 2019

6. Manuscript Identifying Number (if you know it)

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?  
   No

   ✔ Yes

Section 3. Relevant financial activities outside the submitted work.

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?  
   No

   ✔ Yes

If yes, please fill out the appropriate information below.

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<tr>
<th>Name of Entity</th>
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<th>Non-Financial Support?</th>
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</tbody>
</table>
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

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

<table>
<thead>
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</table>

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Board Member, Cabaletta Bio

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Dr. Bollard reports other from Mana Therapeutics, other from Neximmune, other from Torque, other from Cellectis, outside the submitted work; In addition, Dr. Bollard has a patent Planned pending and Board Member, Cabaletta Bio.
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Section 1. Identifying Information

1. Given Name (First Name) Kieron
2. Surname (Last Name) Dunleavy
3. Date 31-March-2020
4. Are you the corresponding author? Yes ☑
Corresponding Author’s Name Kara Kelly
5. Manuscript Title
Report from the Lymphoma Research Foundation Adolescent and Young Adult (AYA) Lymphoma Scientific Workshop, May 2019
6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest? Yes ☑

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Are there any relevant conflicts of interest? Yes ☑

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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?  
☐ Yes  ✓ No

### Section 5. Relationships not covered above

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Dr. Dunleavy reports personal fees from Abbvie, personal fees from Astra Zeneca, personal fees from Amgen, personal fees from Adaptive, personal fees from Celgene, personal fees from Kite, personal fees from Pharmacyclics, personal fees from Seattle Genetics, personal fees from Morphosys, personal fees from Atara Biotherapeutics, personal fees from Karyopharm, personal fees from Kymera, outside the submitted work;.
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## Section 1. Identifying Information

1. Given Name (First Name)  
   Thomas

2. Surname (Last Name)  
   Gross

3. Date  
   23-March-2020

4. Are you the corresponding author?  
   ✔ No

5. Manuscript Title  
   Report from the Lymphoma Research Foundation Adolescent and Young Adult (AYA) Lymphoma Scientific Workshop, May 2019

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
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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.**

   Use this section to report 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.

**Definitions.**

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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) Thomas
2. Surname (Last Name) Habermann, MD
3. Date 22-March-2020

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

5. Manuscript Title
Report from the Lymphoma Research Foundation Adolescent and Young Adult (AYA) Lymphoma Scientific Workshop, May 2019

6. Manuscript Identifying Number (if you know it)

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

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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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

Section 4. Intellectual Property -- Patents & Copyrights

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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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Habermann, MD reports grants from NCI, during the conduct of the study;

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Instructions**

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Ann

2. Surname (Last Name)  
   LaCasce

3. Date  
   25-March-2020

4. Are you the corresponding author?  
   ✔ No

5. Manuscript Title  
   Report from the Lymphoma Research Foundation Adolescent and Young Adult (AYA) Lymphoma Scientific Workshop, May 2019

6. Manuscript Identifying Number (if you know it)

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

Section 3. Relevant financial activities outside the submitted work.

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   ✔ Yes  
   ✔ No

If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
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Dr. LaCasce reports other from BMS, personal fees from Research to Practice, personal fees from Seattle Genetics, personal fees from Humanignen, 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)  Christian
2. Surname (Last Name)  Steidl
3. Date  04-September-2020
4. Are you the corresponding author?  Yes  No
5. Manuscript Title  Report from the Lymphoma Research Foundation Adolescent and Young Adult (AYA) Lymphoma Scientific Workshop, May 2019
6. Manuscript Identifying Number (if you know it)

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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?  ✔ Yes    □ No

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| Dr. Steidl reports personal fees from Curis Inc, personal fees from Seattle Genetics, personal fees from Roche, personal fees from Bayer, personal fees from AbbVie, personal fees from AstraZeneca, non-financial support from Bristol Myers Squibb, non-financial support from Trillium Therapeutics, non-financial support from Epizyme, outside the submitted work; In addition, Dr. Steidl has a patent Method for determining lymphoma type issued, and a patent CD47 blockade therapy with TMEM30A detection and inhibition issued. |

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