PUBLIC DECLARATION OF INTEREST

Based on the template annexed to the French order provided under article R. 1451-1 of the Public Health Code

I, the undersigned **Naomi Taylor**.....

Acknowledge that I am aware of my obligation to declare all interests, whether direct or indirect, that I have now or have had in the past five years, with any business, establishment or body whose work, technology or products fall within scope of the public health and health safety activities of the French National Cancer Institute at which I currently hold positions or exercise duties, or any collegial body (or bodies), commission(s), board(s), or working group(s) to which I belong or have been asked to provide my expertise, or with the companies or consulting firms operating in the same sectors.

Article L. 1454-2 of the French Public Health Code "A fine of €30,000 per occurrence shall be imposed on the persons described in items I and II of Article L. 1451-1 and in Article L. 1452-3 who, acting under the conditions provided in said article, wilfully neglect to establish or amend a declaration of interest in order to update the data contained therein or provide false information that undermines the truthfulness of the declaration."

I am completing this form in my capacity as (multiple responses possible):

☐ an officer of the French National Cancer Institute: (specify positions held) .....
.....

☒ a member of or advisor to a board, a commission, a committee, or a working group within the French National Cancer Institute: (specify the name) .....
INTERNATIONAL SCIENTIFIC ADVISORY BOARD

☐ a person asked to provide expertise to the French National Cancer Institute: (specify the theme/name of the consultancy assignment): .....
.....

☐ other: (specify) .....

The following is my number in the RPPS (Directory of Healthcare Professionals), if I am a healthcare professional:

I undertake to update my public declaration of interest [PDoI] whenever these interests change. I am required to verify my PDoI at minimum once per year even if there have been no changes.

It is my responsibility, upon my receipt of the agenda for each meeting in which I am invited to participate, or for such provision of expert advice as the French National Cancer Institute may wish to entrust to me, to ascertain whether the interests that I have declared or may arise are compatible with my attendance at all or part of such meeting, or my participation in such provision of expert advice. In the event of any incompatibility, it is my responsibility to advise the designated contact person at the French National Cancer Institute and, if appropriate, the chairperson of the meeting prior its starting. In the event of a conflict of interest, my presence may cause the decisions made or recommendations, references or opinions issued to be tainted, and render them null and void.

Date: October 14th 2026

Under the provisions of law no. 78-17 of 6 January 1978 as amended on data processing, electronic information and civil liberties, you have the right to access and amend your personal data. You may exercise this right by sending an email to: servicejuridique@institutcancer.fr

The information collected above will be processed electronically, and your declaration (except for any statements not made public) will be published on the INCa website. INCa is responsible for processing it for the purpose of preventing conflicts of interest, by comparing any declared connections with the objectives of the proposed tasks to be performed within INCa or on its behalf.

1. Main Occupation(s), remunerated or voluntary, exercised currently and over the past 5 years, full time or part time

☒ **Employment**

Main Employer(s)	Employer's address and place of practice, if different	Position in the organisation	Specialty or discipline, if applicable	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*
National Institutes of Health		Deputy Director/ Senior Investigator	Pediatric Oncology Branch	9/2018 (Deputy Director as of 2024)	
Institut de Génétique Moleculaire de Montpellier, UMR5535		DR1, Deputy Directeur		9/96	9/18
Institut de Génétique Moleculaire de Montpellier, UMR5535		Professeur Adjoint		9/18	

☐ **Liberal profession**

Activity	Place of work	Specialty or discipline, if applicable	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*

☐ **Other** (volunteer work, work during retirement, etc.)

Activity	Place of work, if applicable	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*

2. Secondary occupation(s)

2.1. Participation in a decision-making body of a public or private organisation whose work, technology or products fall within the scope of the public health and health safety activities of the French National Cancer Institute or collegial body (or bodies) to which the declaration relates

This relates, in particular, to healthcare establishments, consultancy businesses and advisory board, professional bodies (learned societies, health networks, health workers' association) and associations, including patients' associations.

☐ **I have nothing to declare in this section**

Currently or in the last 5 years:

Organisation *(company, establishment, association)*	Position in the organisation	Compensation	Amount of indemnity (specify frequency if applicable)	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*
AFM-Telethon	Vice President, Scientific Council	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) ……			
Regensburg Cancer Center, Germany	Scientific Advisory Board	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) ……			
Hopital San Raffaele, Italy	Scientific Advisory Board	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) ……			
IARC, Italy	Scientific Advisory Board	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) ……			

2.2. Consultant, advisor or expert activity (or activities) performed for an organisation that falls within the scope of the public health and health safety activities of the French National Cancer Institute or collegial body (or bodies) to which the declaration relates

This section includes, in particular, activities as an advisor or representative, participation in an advisory board, a working group, audits or the drafting of articles or expert reports.

☐ **I have nothing to declare in this section-**

Currently and in the last 5 years: Please note that the activities in 2.1 could be here as well

Organisation *(company, establishment, association)*	Mission	Subject (name of study, product, technology or therapeutic indication)	Compensation	Amount of indemnity (specify frequency if applicable)	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*
FRM	Medical Research in France	Grant support	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify)			
American Society of Hematology		Scientific Board	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify)			
AIRC Foundation for Cancer Research in Italy (Fondazione AIRC per la Ricerca sul Cancro)			X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify)			

2.3. Participation in scientific work and studies for public and/or private organisations that fall within the scope of the public health and health safety activities of the French National Cancer Institute or collegial body (or bodies) to which the declaration relates

2.3.1 Involvement in clinical or preclinical trials or epidemiological studies

This section should include mention of any involvement in the execution of non-clinical and preclinical trials or studies (methodological studies, analytical tests, chemical, pharmaceutical, biological, pharmacological or toxicological testing, etc.), or clinical studies, epidemiological studies, medico-economic studies and observational studies on clinical and prescribing practices (in the latter case, indicate the subject).

Membership in monitoring and follow-up committees for clinical trials must be declared in this section.

Persons acting as principal investigators in single-centre studies or as coordinators in national or international multicentre studies are considered "principal investigators." This definition does not include investigators in multicentre studies not acting in a coordinating role - even if they may be referred to elsewhere as "principals." For the purposes hereof they shall be referred to as "investigators."

☐ **I have nothing to declare in this section**

Currently and in the last 5 years:

Sponsoring organisation (*company, establishment, association*)	Funding organisation(s) (if other than the sponsor, and to the best of your knowledge)	Subject (name of study, product, technology or therapeutic indication)	For clinical or preclinical trials or studies, specify:	Compensation	Amount of indemnity (specify frequency if applicable)	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*
NCI, NIH		A Phase II Study of Allogeneic Hematopoietic Stem Cell Transplant for Patients with Inborn Errors of Immunity	Type of study: XSingle-centre study ☐ Multicentre study Your role: ☐ Principal Investigator ☐ Principal Experimenter X Investigator ☐ Non-Principal Experimenter ☐ Member of a monitoring and follow-up committee	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… …… ……			
NCI, NIH		LTFU Gene Therapy	Type of study: X Single-centre study ☐ Multicentre study Your role: ☐ Principal Investigator ☐ Principal Experimenter X Investigator ☐ Non-Principal Experimenter ☐ Member of a monitoring and follow-up committee	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… …… ……			

NCI, NIH		P205422 Phase 1/2 Dose Escalation Study of CD19/CD22 Bicistronic Chimeric Antigen Receptor (CAR) T Cells in Children and Young Adults with Recurrent or Refractory CD19/CD22-expressing B Cell Malignancies	Type of study: X Single-centre study ☐ Multicentre study Your role: ☐ Principal Investigator ☐ Principal Experimenter x Investigator ☐ Non-Principal Experimenter ☐ Member of a monitoring and follow-up committee	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… …… ……			
NCI, NIH		Phase 1/2 Dose Escalation Study of TSLPR CAR for patients with TSLPR-expressing relapsed/refractor expressing B Cell Malignancies	**Type of study:** **X Single-centre study** **☐ Multicentre study** **Your role:** **☐ Principal Investigator** **☐ Principal Experimenter x Investigator** **☐ Non-Principal Experimenter** **☐ Member of a monitoring and follow-up committee**	**X None** **☐ To the declarant** **☐ To an organisation of which you are a member or employee (specify)** **……** **……** **……**			

2.3.2 Other scientific work

X **I have nothing to declare in this section**

Currently and in the last 5 years:

Organisation (*company, establishment, association*)	Subject (name of study, product, technology or therapeutic indication)	Compensation	Amount of indemnity (specify frequency if applicable)	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*
		☐ None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… ……			
		☐ None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… ……			

		☐ None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… ……			

2.4. Drafting of article(s) and presentation(s) at congresses, conferences, symposia, various public meetings or training activities organised or financially supported by private companies or organisations that fall within the scope of the public health and health safety activities of the French National Cancer Institute or collegial body (or bodies) to which the declaration relates

Such drafting of article(s) and presentations must be declared when they have been compensated or have been provided coverage of expenses.

2.4.1 Drafting of article(s)

☒ **I have nothing to declare in this section**

Currently and in the last 5 years:

Private company or organisation *(society, association)*	Subject of article	Compensation	Amount of indemnity (specify frequency if applicable)	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*
		☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… ……			
		☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… ……			
		☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… ……			

2.4.2 Oral presentation(s)

☐ **I have nothing to declare in this section**

Currently and in the last 5 years:

Inviting private company or organisation (*society, association*)	Location and name of the meeting	Subject of presentation, name of concerned product	Coverage of expenses	Compensation	Amount of indemnity (specify frequency if applicable)	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*
Oncode	Amsterdam	Oncode Annual Conference 2022	X Yes ○ No	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… ……			
Agilent	Virtual 2022	HSC and metabolism	○ Yes X No	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… ……			
Clinical Immunology Society	virtual	Annual Meeting 2021	○ Yes XNo	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… ……			
NCI, NIH	virtual	Clinical Cancer Research Young Investigator Meeting 2021	○ No	None			

American Society for Virology (ASV) Meeting	virtual	Annual Meeting 2021	○ No	None			

6/2025	Gordon Red Cell Meeting	Newport, RI	Expenses-Yes	No Compensation
6/2025	FASEB Meeting-Immune Signaling	Phoenix, AZ	Expenses-Yes	No Compensation
6/2025	FOCIS Immunology Meeting	Boston, MA	Expenses-Yes	No Compensation
5/2025	Keynote-NCI Tenure Track Investigator Meeting	Frederick, MD	Expenses-Yes	No Compensation
5/2025	Applied Immunological Research Symposium	Newark, NJ	Expenses-Yes	No Compensation
3/2025	Guru-IIG meeting	Washington DC	No expenses	No compensation
12/2024	ASH Presidential Symposium	San Diego, CA	Expenses-Yes	No Compensation
11/2024	Keynote-Cancer Immunotherapy Network PRECINCT Meeting	DC	No expenses	No Compensation
11/2024	Latin American and Caribbean Immunology Meeting (ALACI)	Buenos Aires, AR	Expenses-Yes	No Compensation
10/2024	France CAR T-cell Day	Strasbourg, FR	Expenses-Yes	No Compensation
7/2024	France MD/PhD Symposium (ANDCS)	Paris, FR	Expenses-Yes	No Compensation
6/2024	Leibniz Institute for Immunotherapy	Regensburg, DE	Expenses-Yes	No Compensation
5/2024	European Thymus Meeting (ThymE)	Porto, PT	No Expenses	No Compensation
3/2024	ASH/EHA Training Program (TRTH)	Élincourt, FR	Expenses-Yes	No Compensation
11/2023	University of Zurich	Zurich, CZ	Expenses-Yes	No Compensation
11/2023	ASTCT-EBMT Relapse Meeting (HSCT²)	Los Angeles, CA	Expenses-Yes	No Compensation
11/2023	French Embassy	Wash DC	Expenses-Yes	No Compensation
10/2023	DBA International Conference	Atlanta, GA	Expenses-Yes	No Compensation
10/2023	Emory University	Atlanta, GA	Expenses-Yes	No Compensation
9/2023	Frontiers in Immunology Symposium	Bethesda, MD	No Expenses	No Compensation
6/2023	Gordon Conference-Red Cells (Chair)	Newport, RI	No Expenses	No Compensation
6/2023	Pasteur Immunology Day	Paris, FR	Expenses-Yes	No Compensation
5/2023	CCR Grand Rounds	Bethesda, MD	No Expenses	No Compensation
4/2023	San Raffaele-Women in Science	Milano, IT	Expenses-Yes	No Compensation

Recent meetings; no compensation
Myeloid2026, Cincinatti, Ohio, May 2026; Midwinter Immunology Conference, Seefeld, Austria; CAR T Meeting, Lille, France, September 2025; FASEB Immune Signaling Meeting, Phoenix, AZ, June 2025; FOCIS Meeting, Boston, MA, June 2025; Gordon Red Cell Meeting, Newport, RI, June 2025; Clinical Immunology Society, Philadelphia, PA, May 2025; Keynote Speaker-Cancer Immunotherapy Network PRECINCT Meeting, DC, Nov, 2024; Latin American and Caribbean Immunology Meeting (ALACI), Buenos Aires, Argentina, Nov 2024; ALACI Immunometabolism Workshop, Buenos Aires; France CAR-T Day, Strasbourg, FR, Oct, 2024; 2024 International LIT Symposium in"Synthetic Immunology and Synthetic Biology, Regensburg, GER, July 2024; French MD-PhD Training Program Annual Meeting (ANDCS, Association Nationale des Doubles Cursus en Santé), Paris, FR, July, 2024; International Thymus Meeting (ThyME), Porto, PT, June, 2024; ASH-EHA Translational Research Training in Hematology (TRTH) Meeting, FR, March, 2024; ASTCT-EBMT RELAPSE Meeting, Los Angeles, CA, Nov, 2023; Frontiers in Basic Immunology Meeting, Bethesda, MD, Sep, 2023; Women in Science-Pasteur Institute, Paris, FR, June, 2023;

2.5. Invention or possession of a patent or a product, process or other form of non-patented intellectual property related to the scope of the public health and health safety activities of the French National Cancer Institute or collegial body (or bodies) to which the declaration relates

☐ **I have nothing to declare in this section**

Currently and in the last 5 years:

Nature of the work and name of the patent, product, etc.	Organisation issuing the patent or marketing the product, etc.	Share of profits	Compensation	Amount of indemnity (specify frequency if applicable)	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*
Patent on generation of CAR T cells	Metafora BioSystems	○ Yes X No	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… …… ……			
Patent on the generation of CAR T cells against the HERV-K antigen (for treatment of glioblastoma)	NIH	○ Yes XNo	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… …… ……			
Patent on amino acid transporter armored CAR T cells	NIH	○ Yes X No	X None ☐ To the declarant ☐ To an organisation of which you are a member or employee (specify) …… …… ……			

3. Management of activities which have received funding from a profit-making organisation whose business activities fall within the scope of the public health and health safety activities of the French National Cancer Institute or collegial body (or bodies) to which the declaration relates

The type of funding may be in the form of subsidies or agreements for studies or research, grants or sponsorship, payments in kind, in cash, equipment.
This relates in particular to chairpersons, treasurers and members of management boards and executive committees, including for associations and learned societies.

X **I have nothing to declare in this section**

Currently and in the last 5 years:

Body and activity for which the funding was provided	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*	Profit-making organisation providing the funding and amount contributed by each for the funder(s) with optional indication of the corresponding percentage of the body's budget

4. Financial holdings in the capital of a company whose business activities falls within the scope of the public health and health safety activities of the French National Cancer Institute or collegial body (or bodies) to which the declaration relates

In this section, declare any listed or non-listed securities, including shares, bonds or other equity instruments, owned in any relevant sector or company or any subsidiary or part-owned company thereof, to the best of your immediate and reasonable knowledge. Please state the name of the establishment, company or organisation, the type of securities held, and their amount in absolute values and in percentages of capital owned.

Mutual funds, unit trusts such as SICAV or open-end funds, for which the individual has no control of the management or composition of the fund, are excluded from the declaration.

X **I have nothing to declare in this section**

Currently:

Organisation concerned	Type of investment	Amount held in absolute value	Percentage of the organisation's capital

5.

6. Elected positions and mandates currently held

☐ **I have no elected positions or mandates to declare**

Elected office or term (specify constituency)	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*
American Society of Hematology (ASH)-Scientific Board		

7. Other connections likely to give rise to situations of conflict of interest

Declare only the indemnity received by the declarant.

Example: Invitation to a conference, with no presentation required, with travel/accommodation fees covered or indemnity paid

X **I have nothing to declare in this section**

Element or fact concerned	Comments	Start date *(day (optional) / month / year)*	End date *(day (optional) / month / year)*

8.