

ICMJE DISCLOSURE FORM

Date: 10/6/2023

Your Name: Helen A Owens

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

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Your Name: Lauren E Thorburn

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

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Your Name: Elisabeth Walsby

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

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ICMJE DISCLOSURE FORM

Date: 10/6/2023

Your Name: Pierre Rizkallah

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 10/6/2023

Your Name: Subuhi Sherwani

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 10/6/2023

Your Name: Caroline L Tinsley

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

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ICMJE DISCLOSURE FORM

Date: 10/6/2023

Your Name: Louise Rogers

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

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I certify that I have answered every question and have not altered the wording of any of the questions on this form.

ICMJE DISCLOSURE FORM

Date: 10/6/2023

Your Name: Camilla Cerutti

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 10/6/2023

Your Name: Anne J Ridley

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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ICMJE DISCLOSURE FORM

Date: 10/6/2023

Your Name: Julie Williams

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

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ICMJE DISCLOSURE FORM

Date: 10/6/2023

Your Name: Vera Knauper

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

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ICMJE DISCLOSURE FORM

Date: 10/6/2023

Your Name: Ann Ager

Manuscript Title: Alzheimer's disease associated P460L variant of EphA1 dysregulates receptor activity and blood brain barrier function

Manuscript Number (if known): ADJ-D-23-00763

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)						
Time frame: Since the initial planning of the work									
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>							Click the tab key to add additional rows.
Time frame: past 36 months									
2	Grants or contracts from any entity (if not indicated in item #1 above).	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>							
3	Royalties or licenses	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; height: 40px; margin-top: 5px;"> <tr><td style="width: 60%;"></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>							

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