Date:			4/18/2024		
Your Name: Manuscript Title:			Alex Bartlett  Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle-aged Adults		
Ма	nuscript Number (if k	nown):	ADJ-D-24-00186		
con affe indi	tent of your manuscri ected by the content of icate a bias. If you are author's relationship	ipt. "Rela of the man e in doubt os/activitions osion, you	nted" means any relation with for-profit or no nuscript. Disclosure represents a commitme about whether to list a relationship/activity es/interests should be defined broadly. For each should declare all relationships with manuf	/interest, it is preferable that you do so.	
	tem #1 below, report and the for disclosure is the		· · · · · · · · · · · · · · · · · · ·	vithout time limit. For all other items, the time	
			entities with whom you have this thip 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	[□] No	one		
	present manuscript (e.g., funding, provision of study materials, medical writing, article processing	<b>Institut</b> Alzheim	roject was supported by the National e on Aging R01AG066203.  ner's Association Part the Cloud mechanism rton: Mechanistic Potential of		
	charges, etc.)	Antihyp	ertensives in		
	No time limit for this item.		cal Alzheimer's BAG061660-01	Click the tab key to add additional rows.	
			Time frame: past 36 month		
2	Grants or contracts from any entity (if not indicated in item #1 above).	This pr Institut Alzheim Pl Whai	roject was supported by the National e on Aging R01AG066203.  her's Association Part the Cloud mechanism rton: Mechanistic Potential of hertensives in		

		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)
3	Royalties or licenses	None	
4	Consulting fees	None None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[⊠] None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	[⊠] None	
10	Leadership or fiduciary role in other board,		

		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)
	society, committee or advocacy group, paid or unpaid		
11	Stock or stock options	[⊠] None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None	
13	Other financial or non-financial interests	[⊠] None	
Plea 🖂		t to the following statement to indicate your agreeme answered every question and have not altered the wo	

Date:		_	4/18/2024		_
You	ır Name:	_	Adam M Brickman		
Manuscript Title:		_	Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle- aged Adults		
Ma	nuscript Number (if kn	own):	ADJ-D-24-00186		_
content of your manuscript. "Rela affected by the content of the ma indicate a bias. If you are in doub The author's relationships/activiti		the mar in doubt	ted" means any relation with for-profit or no nuscript. Disclosure represents a commitme about whether to list a relationship/activity es/interests should be defined broadly. For e	/interest, it is preferable that you do so.	
	t medication is not me			acturers of antinypertensive medication, even in	
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			entities with whom you have this hip 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				
	All support for the	[□] No	one		
	present				
	present manuscript (e.g.,	This pr	oject was supported by the National		
	present manuscript (e.g., funding, provision of study materials,	This pro	oject was supported by the National e on Aging R01AG066203.		
	present manuscript (e.g., funding, provision of study materials, medical writing,	This pro	oject was supported by the National e on Aging R01AG066203.  Her's Association Part the Cloud mechanism		
	present manuscript (e.g., funding, provision of study materials, medical writing, article processing	This pro Institute	oject was supported by the National e on Aging R01AG066203.  Her's Association Part the Cloud mechanism rton: Mechanistic Potential of		
	present manuscript (e.g., funding, provision of study materials, medical writing,	This pro Institute Alzheim PI Whar Antihyp	oject was supported by the National e on Aging R01AG066203.  Her's Association Part the Cloud mechanism		
	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.)	This pro Institute Alzheim PI Whar Antihyp Preclinic	oject was supported by the National e on Aging R01AG066203.  Her's Association Part the Cloud mechanism ton: Mechanistic Potential of ertensives in	Click the tab key to add additional rows.	
	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for	This pro Institute Alzheim PI Whar Antihyp Preclinic	oject was supported by the National e on Aging R01AG066203.  Her's Association Part the Cloud mechanism rton: Mechanistic Potential of ertensives in cal Alzheimer's		
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	This pro Institute Alzheim PI Whar Antihyp Preclinic NIA R03	oject was supported by the National e on Aging R01AG066203.  eer's Association Part the Cloud mechanism ton: Mechanistic Potential of ertensives in cal Alzheimer's GAG061660-01  Time frame: past 36 monthone		
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.  Grants or contracts from any entity (if not	This pro Institute Alzheim PI Whar Antihyp Preclinic NIA RO3	oject was supported by the National e on Aging R01AG066203.  eer's Association Part the Cloud mechanism ton: Mechanistic Potential of ertensives in cal Alzheimer's GAG061660-01  Time frame: past 36 monthone  oject was supported by the National		
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	This pro Institute Alzheim PI Whar Antihyp Preclinic NIA RO3	oject was supported by the National e on Aging R01AG066203.  eer's Association Part the Cloud mechanism ton: Mechanistic Potential of ertensives in cal Alzheimer's GAG061660-01  Time frame: past 36 monthone		
2	present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.  Grants or contracts from any entity (if not indicated in item	This pro Institute Alzheim PI Whar Antihyp Preclinic NIA RO3  This pro Institute Alzheim PI Whar PI Whar	oject was supported by the National e on Aging R01AG066203.  ser's Association Part the Cloud mechanism ton: Mechanistic Potential of ertensives in cal Alzheimer's AG061660-01  Time frame: past 36 month one oject was supported by the National e on Aging R01AG066203.		

		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)
3	Royalties or licenses	None	
4	Consulting fees	None None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	AMB holds is an inventor a patent for white matter hyperintensity quantification (US patent# 9867566).	
9	Participation on a Data Safety Monitoring	[⊠] None	

		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)		
	Board or Advisory Board				
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	AMB is a scientific advisor for Cognition Therapeutics, Inc; CogState; and Cognito Therapeutics, Inc.			
11	Stock or stock options	[⊠] None			
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None			
13	Other financial or non-financial interests	[⊠] None			
Plea	Please place an "X" next to the following statement to indicate your agreement:				
$[\boxtimes]$	☑ I certify that I have answered every question and have not altered the wording of any of the questions on this form.				

3 12/13/2021 ICMJE Disclosure Form

Date	e:		4/18/2024		
You	r Name:		Chinkuli Munkombwe		
Manuscript Title:			Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle- aged Adults		
Manuscript Number (if known):		nown):	ADJ-D-24-00186		
content of your manuscript. "Rela affected by the content of the ma indicate a bias. If you are in doub The author's relationships/activiti		ipt. "Rela of the man e in doubt s/activition	ted" means any relation with for-profit or no nuscript. Disclosure represents a commitme about whether to list a relationship/activity es/interests should be defined broadly. For e	/interest, it is preferable that you do so.	
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			·	vithout time limit. For all other items, the time	
			entities with whom you have this hip 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	[□] No	one		
	present manuscript (e.g.,	This pr	oject was supported by the National		
	funding, provision of study materials,		e on Aging R01AG066203.		
	medical writing,		ner's Association Part the Cloud mechanism		
	article processing charges, etc.)		ton: Mechanistic Potential of ertensives in		
	No time limit for	Preclini	cal Alzheimer's		
	this item.	NIA ROS	3AG061660-01	Click the tab key to add additional rows.	
			Time frame: past 36 month	ns	
2	Grants or contracts from		one		
	any entity (if not indicated in item		oject was supported by the National e on Aging R01AG066203.		
	#1 above).	Alzheim	ner's Association Part the Cloud mechanism		
			ton: Mechanistic Potential of ertensives in		

		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)
3	Royalties or licenses	None	
4	Consulting fees	None None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[⊠] None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	[⊠] None	
10	Leadership or fiduciary role in other board,		

		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)
	society, committee or advocacy group, paid or unpaid		
11	Stock or stock options	[⊠] None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None	
13	Other financial or non-financial interests	[⊠] None	
Plea 🖂		t to the following statement to indicate your agreeme answered every question and have not altered the wo	

Date:		4/18/2024			
Your Name:		Danielle Verble	Danielle Verble		
Manuscript Title:		, , , , , , , , , , , , , , , , , , , ,	Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle- aged Adults		
Mai	nuscript Number (if kno	wn): ADJ-D-24-00186			
content of your manuscript. "Rela affected by the content of the mar indicate a bias. If you are in doubt		cy, we ask you to disclose all relationships/activities/into "Related" means any relation with for-profit or not-for- ne manuscript. Disclosure represents a commitment to doubt about whether to list a relationship/activity/inter- ctivities/interests should be defined broadly. For examp	-profit third parties whose interests may be transparency and does not necessarily rest, it is preferable that you do so.  ple, if your manuscript pertains to the		
-		on, you should declare all relationships with manufactur ioned in the manuscript.	ers of antihypertensive medication, even if		
		support for the work reported in this manuscript withou	at time limit. For all other items, the time		
			ecifications/Comments (e.g., if payments were de to you or to your institution)		
		Time frame: Since the initial planning of th	ne work		
1		None			
		his project was supported by the National nstitute on Aging R01AG066203.			
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	charges, etc.)	ntihypertensives in			
		reclinical Alzheimer's  IIA R03AG061660-01  Click	the tab key to add additional rows.		
			,		
		Time frame: past 36 months			
2	Grants or contracts from	None			
	any entity (if not	his project was supported by the National nstitute on Aging R01AG066203.			
	#1 above).	Izheimer's Association Part the Cloud mechanism I Wharton: Mechanistic Potential of			

		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)
3	Royalties or licenses	None	
4	Consulting fees	None None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[⊠] None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	[⊠] None	
10	Leadership or fiduciary role in other board,		

		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)
	society, committee or advocacy group, paid or unpaid		
11	Stock or stock options	[⊠] None	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None	
13	Other financial or non-financial interests	[⊠] None	
Plea 🖂		t to the following statement to indicate your agreeme answered every question and have not altered the wo	

Date:			4/18/2024		
Your Name:			Henrik Zetterberg		
Manuscript Title:			Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle- aged Adults		
Mai	nuscript Number (if k	known):	ADJ-D-24-00186		
content of your manuscript. "Rel affected by the content of the ma		ript. "Rela of the mar	e ask you to disclose all relationships/activities/interests listed below that are related to the ated" means any relation with for-profit or not-for-profit third parties whose interests may be nuscript. Disclosure represents a commitment to transparency and does not necessarily t about whether to list a relationship/activity/interest, it is preferable that you do so.		
epi		nsion, you		example, if your manuscript pertains to the acturers of antihypertensive medication, even if	
In item #1 below, report all support frame for disclosure is the past 30			·	vithout time limit. For all other items, the time	
			entities with whom you have this hip 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	[□] No	one		
	manuscript (e.g., funding, provision of study materials,		oject was supported by the National e on Aging R01AG066203.		
	medical writing, article processing charges, etc.)	PI Whar	er's Association Part the Cloud mechanism ton: Mechanistic Potential of ertensives in		
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	this item.	NIA RUS	AG061660-01	Click the tab key to add additional rows.	
			Time frame: past 36 montl	ns	
2	Grants or contracts from any entity (if not indicated in item #1 above).	This pr Institute Alzheim PI Whan	oject was supported by the National e on Aging R01AG066203.  Her's Association Part the Cloud mechanism ton: Mechanistic Potential of ertensives in cal Alzheimer's		

		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)
3	Royalties or licenses	None None □	
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	□ None  HZ has given lectures in symposia sponsored by Cellectricon, Fujirebio, Alzecure, Biogen, and Roche,	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[⊠] None	
	Participation on a Data Safety Monitoring Board or Advisory Board	HZ has served at scientific advisory boards and/or as a consultant for Abbvie, Acumen, Alector, Alzinova, ALZPath, Annexon, Apellis, Artery Therapeutics, AZTherapies, CogRx, Denali, Eisai, Nervgen, Novo Nordisk, Optoceutics, Passage Bio, Pinteon Therapeutics, Prothena, Red Abbey Labs,	

		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)			
		reMYND, Roche, Samumed, Siemens Healthineers, Triplet Therapeutics, and Wave,	-		
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	[X] None			
11	Stock or stock options	□ □	-		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None			
13	Other financial or non-financial interests	□ None    HZ is co-founder of Brain Biomarker Solutions in Gothenburg AB (BBS), which is a part of the GU Ventures Incubator Program (outside submitted work).    HZ is co-founder of Brain Biomarker Solutions in Gothenburg AB (BBS), which is a part of the GU Ventures Incubator Program (outside submitted work).			
Plea	Please place an "X" next to the following statement to indicate your agreement:				
	I certify that I have answered every question and have not altered the wording of any of the questions on this form.				

Date:		4/18/2024	4/18/2024			
Your Name:		Jessica Ann Turner	Jessica Ann Turner			
Manuscript Title:		, ,	Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle- aged Adults			
Mai	nuscript Number (if kr	own): ADJ-D-24-00186				
content of your manuscript. "Rela affected by the content of the mai indicate a bias. If you are in doubt The author's relationships/activitie epidemiology of hypertension, you		the manuscript. Disclosure represents a commitn in doubt about whether to list a relationship/activi activities/interests should be defined broadly. Fo	not-for-profit third parties whose interests may be nent to transparency and does not necessarily ty/interest, it is preferable that you do so.			
		support for the work reported in this manuscript	without time limit. For all other items, the time			
ľ		ame all entities with whom you have this elationship 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 planni	ng of the work			
1	All support for the	□] None				
	present manuscript (e.g., funding, provision of study materials,	This project was supported by the National Institute on Aging R01AG066203.				
	medical writing, article processing	Alzheimer's Association Part the Cloud mechanism PI Wharton: Mechanistic Potential of				
	charges, etc.)	Antihypertensives in				
	No time limit for this item.	Preclinical Alzheimer's NIA R03AG061660-01	Click the tab key to add additional rows.			
		Time frame: past 36 mor				
2	Grants or contracts from	□] None				
	any entity (if not indicated in item	This project was supported by the National Institute on Aging R01AG066203.				
	#1 above).	Alzheimer's Association Part the Cloud mechanism PI Wharton: Mechanistic Potential of				

		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)
3	Royalties or licenses	None None	
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[⊠] None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	[⊠] None	
10	Leadership or fiduciary role in other board,	[⊠] None	

		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)	
	society, committee or advocacy group, paid or unpaid			
11	Stock or stock options	[⊠] None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None		
13	Other financial or non-financial interests	[⊠] None		
Plea 🖂	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.			

Date:		4/18/2024	4/18/2024		
Your Name:		Kay Igwe	Kay Igwe		
Manuscript Title:			Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle- aged Adults		
Mar	nuscript Number (if k	nown): ADJ-D-24-00186			
content of your manuscript. "Rela affected by the content of the man		ipt. "Related" means any relation with for-profit or of the manuscript. Disclosure represents a commitm	e ask you to disclose all relationships/activities/interests listed below that are related to the ated" means any relation with for-profit or not-for-profit third parties whose interests may be nuscript. Disclosure represents a commitment to transparency and does not necessarily t about whether to list a relationship/activity/interest, it is preferable that you do so.		
		os/activities/interests should be defined broadly. For nsion, you should declare all relationships with man entioned in the manuscript.			
	em #1 below, report ne for disclosure is th	all support for the work reported in this manuscript e past 36 months.	without time limit. For all other items, the time		
		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 planni	ng of the work		
1	All support for the	[ None			
	manuscript (e.g., funding, provision of study materials,	This project was supported by the National Institute on Aging R01AG066203.			
	medical writing,	Alzheimer's Association Part the Cloud mechanism			
	article processing charges, etc.)	PI Wharton: Mechanistic Potential of Antihypertensives in			
	No time limit for	Preclinical Alzheimer's			
	this item.	NIA R03AG061660-01	Click the tab key to add additional rows.		
		Time frame: past 36 mor	nths		
2	Grants or contracts from	□ None			
	any entity (if not	This project was supported by the National			
	indicated in item #1 above).	Institute on Aging R01AG066203.  Alzheimer's Association Part the Cloud mechanism			
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		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)
3	Royalties or licenses	None None	
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[⊠] None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	[⊠] None	
10	Leadership or fiduciary role in other board,	[⊠] None	

		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)	
	society, committee or advocacy group, paid or unpaid			
11	Stock or stock options	[⊠] None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None		
13	Other financial or non-financial interests	[⊠] None		
Plea 🖂	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.			

Date:		_	4/18/2024		
Your Name:		-	Kelly D. Likos		
Manuscript Title:			Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle- aged Adults		
Mar	nuscript Number (if kı	nown):	ADJ-D-24-00186		
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epic		nsion, you		example, if your manuscript pertains to the facturers of antihypertensive medication, even if	
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	manuscript (e.g., funding, provision of study materials,		oject was supported by the National e on Aging R01AG066203.		
	medical writing, article processing charges, etc.)	PI Whar	er's Association Part the Cloud mechanism ton: Mechanistic Potential of ertensives in		
	No time limit for this item.	Preclini	cal Alzheimer's AG061660-01	Click the tab key to add additional rows.	
		NIA NOS	Time frame: past 36 month	·	
2	Grants or contracts from any entity (if not indicated in item	This pr	one oject was supported by the National e on Aging R01AG066203.		
	#1 above).	PI Whar	er's Association Part the Cloud mechanism ton: Mechanistic Potential of ertensives in		

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3	Royalties or licenses	None None	
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[⊠] None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	[⊠] None	
10	Leadership or fiduciary role in other board,	[⊠] None	

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	society, committee or advocacy group, paid or unpaid			
11	Stock or stock options	[⊠] None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None		
13	Other financial or non-financial interests	[⊠] None		
Plea 🖂	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.			

Date: Your Name: Manuscript Title:		4/18/2024			
		Lex Minto	Lex Minto  Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle-aged Adults		
		Concentrations in a Racially D			
Ma	nuscript Number (if kn	own): ADJ-D-24-00186			
cor aff inc	ntent of your manuscrip ected by the content of licate a bias. If you are i e author's relationships, idemiology of hypertens	ency, we ask you to disclose all relationships/activit ot. "Related" means any relation with for-profit or in the manuscript. Disclosure represents a commitme in doubt about whether to list a relationship/activite /activities/interests should be defined broadly. For sion, you should declare all relationships with manu- nationed in the manuscript.	not-for-profit third parties whose interests may be ent to transparency and does not necessarily cy/interest, it is preferable that you do so.		
		Il support for the work reported in this manuscript	without time limit. For all other items, the time		
		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 plannir	g of the work		
1	All support for the present manuscript (e.g., funding, provision	This project was supported by the National Institute on Aging R01AG066203.			
	of study materials, medical writing, article processing charges, etc.)  No time limit for this item.	Alzheimer's Association Part the Cloud mechanism PI Wharton: Mechanistic Potential of Antihypertensives in Preclinical Alzheimer's NIA R03AG061660-01	Click the tab key to add additional rows.		
		Time frame: past 36 mon	ths		
2	contracts from any entity (if not	□ None This project was supported by the National			
1	indicated in item #1 above).	Institute on Aging R01AG066203.  Alzheimer's Association Part the Cloud mechanism			

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		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)
3	Royalties or licenses	None None	
4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	[⊠] None	
7	Support for attending meetings and/or travel	[⊠] None	
8	Patents planned, issued or pending	[⊠] None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	[⊠] None	
10	Leadership or fiduciary role in other board,	[⊠] None	

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	society, committee or advocacy group, paid or unpaid			
11	Stock or stock options	[⊠] None		
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	[⊠] None		
13	Other financial or non-financial interests	[⊠] None		
Plea 🖂	Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.			

Date:		_	4/18/2024		
You	r Name:		Maria Misiura		
Manuscript Title:			Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle- aged Adults		
Mar	nuscript Number (if kı	nown):	ADJ-D-24-00186		
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		nsion, you		example, if your manuscript pertains to the facturers of antihypertensive medication, even if	
In item #1 below, report all suppo frame for disclosure is the past 36				vithout time limit. For all other items, the time	
			entities with whom you have this hip or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)	
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	No time limit for this item.	Preclini	cal Alzheimer's	Click the tab key to add additional rows.	
	cina itemi.	INIA NUS	Time frame: past 36 month		
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Please place an "X" next to the following statement to indicate your agreement:    I certify that I have answered every question and have not altered the wording of any of the questions on this form.			

Date:		4/18/2024
Your Name:		Vonetta Dotson
Manuscript Title:		Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middleaged Adults
Ma	nuscript Number (if kr	own): ADJ-D-24-00186
content of your manuscript. "Rela affected by the content of the ma indicate a bias. If you are in doub The author's relationships/activiti epidemiology of hypertension, yo that medication is not mentioned		support for the work reported in this manuscript without time limit. For all other items, the time
		ame all entities with whom you have this Specifications/Comments (e.g., if payments were lationship or indicate none (add rows as needed) made to you or to your institution)
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		Time frame: past 36 months
2	Grants or contracts from any entity (if not indicated in item	None  This project was supported by the National Institute on Aging R01AG066203.

Alzheimer's Association Part the Cloud mechanism

PI Wharton: Mechanistic Potential of

Antihypertensives in Preclinical Alzheimer's

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Date:		4/18/2024			
Your Name:		William T. Hu	William T. Hu		
Manuscript Title:			Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle- aged Adults		
Ma	nuscript Number (if kn	own): ADJ-D-24-00186			
con affe indi	tent of your manuscrip ected by the content of cate a bias. If you are author's relationships	ency, we ask you to disclose all relationships/activitit. "Related" means any relation with for-profit or rethe manuscript. Disclosure represents a commitment doubt about whether to list a relationship/activities/interests should be defined broadly. For	not-for-profit third parties whose interests may be ent to transparency and does not necessarily y/interest, it is preferable that you do so.  example, if your manuscript pertains to the		
-		sion, you should declare all relationships with manu ntioned in the manuscript.	facturers of antihypertensive medication, even if		
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		lame all entities with whom you have this elationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)		
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	charges, etc.)  No time limit for	Antihypertensives in Preclinical Alzheimer's			
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Date:		4/1	4/18/2024			
Your Name:		Wh	Whitney Wharton			
Manuscript Title:		Co	Neuroimaging Correlates of Alzheimer's Disease Biomarker Concentrations in a Racially Diverse High-risk Cohort of Middle- aged Adults			
Manuscript Number (if known):		nown): AD	ADJ-D-24-00186			
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	t medication is not me			acturers of antinypertensive medication, even if		
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