

ICMJE DISCLOSURE FORM

Date: 5/29/2024

Your Name: Andrea Weinstein

Manuscript Title: Everyday Functioning as a Predictor of Cognitive Status in a Group of Community-Dwelling, Predominantly Black Adults

Manuscript Number (if known): DADM-D-23-00164

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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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.

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Date: 5/29/2024

Your Name: Ashlyn Runk

Manuscript Title: Everyday Functioning as a Predictor of Cognitive Status in a Group of Community-Dwelling, Predominantly Black Adults

Manuscript Number (if known): DADM-D-23-00164

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Your Name: Ann Haas

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13	Other financial or non-financial interests	<input checked="" type="checkbox"/> None	

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.

ICMJE DISCLOSURE FORM

Date: 5/29/2024

Your Name: Meryl A Butters

Manuscript Title: Everyday Functioning as a Predictor of Cognitive Status in a Group of Community-Dwelling, Predominantly Black Adults

Manuscript Number (if known): DADM-D-23-00164

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.

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5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	<input checked="" type="checkbox"/> None	
6	Payment for expert testimony	<input checked="" type="checkbox"/> None	
7	Support for attending meetings and/or travel	<input type="checkbox"/> None	
		NIH funding for other research projects	
8	Patents planned, issued or pending	<input checked="" type="checkbox"/> None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	<input type="checkbox"/> None	
		External Advisory Committee, Geriatric Psychiatry Training Program (NIMH-Funded T-32), Columbia University.	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	

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ICMJE DISCLOSURE FORM

Date: 5/29/2024

Your Name: Juleen Rodakowski

Manuscript Title: Everyday Functioning as a Predictor of Cognitive Status in a Group of Community-Dwelling, Predominantly Black Adults

Manuscript Number (if known): DADM-D-23-00164

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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10	Leadership or fiduciary role in other board,	<input checked="" type="checkbox"/> None <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%;"></td></tr> </table>									

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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: 5/29/2024

Your Name: Bonnie Ghosh-Dastidar

Manuscript Title: Everyday Functioning as a Predictor of Cognitive Status in a Group of Community-Dwelling, Predominantly Black Adults

Manuscript Number (if known): DADM-D-23-00164

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: 5/29/2024

Your Name: Tiffany Gary-Webb, PhD, MHS

Manuscript Title: Everyday Functioning as a Predictor of Cognitive Status in a Group of Community-Dwelling, Predominantly Black Adults

Manuscript Number (if known): DADM-D-23-00164

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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: 5/29/2024

Your Name: Wendy Troxel

Manuscript Title: Everyday Functioning as a Predictor of Cognitive Status in a Group of Community-Dwelling, Predominantly Black Adults

Manuscript Number (if known): DADM-D-23-00164

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.

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ICMJE DISCLOSURE FORM

Date: 5/29/2024

Your Name: Tamara Dubowitz

Manuscript Title: Everyday Functioning as a Predictor of Cognitive Status in a Group of Community-Dwelling, Predominantly Black Adults

Manuscript Number (if known): DADM-D-23-00164

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