

Instructions

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ormation						
2. Surname (Last Name) Farnham	3. Date 24-May-2018					
 4. Are you the corresponding author? ✓ Yes No 5. Manuscript Title Alternative oxidase attenuates cigarette smoke-induced lung dysfunction and tissue damage 						
	Farnham ✓ Yes No					

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?	\checkmark	Yes		No
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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.

Name of Institution/Company	Grant?	Personal Fees	Non-Financial Support <mark>?</mark>	Other?	Comments	
Erasmus Paul Sabatier University	\checkmark					

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? 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



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Section 1.	Identifying Infor	mation		
1. Given Name (Fi Robert	rst Name)	2. Surname (Last Name) Bals	3. Date 25-May-2018	
4. Are you the corresponding author?		Yes 🖌 No	Corresponding Author's Name Marten Szibor	
5. Manuscript Title Alternative oxida		te smoke-induced lung dy	vsfunction and tissue damage	
6. Manuscript Ider not yet known	ntifying Number (if you	know it)		

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🖌 No

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

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AstraZeneca	\checkmark	\checkmark				
Boehringer Ingelheim	\checkmark	\checkmark				
GlaxoSmithKline		\checkmark				
Grifols		\checkmark				
Novartis	\checkmark	\checkmark				
CSL Behring		\checkmark				
German Federal Ministry of Education and Research (BMBF) Competence Network Asthma and COPD (ASCONET)	\checkmark					



Name of Entity	Grant?	Personal Fees?	Non-Financial Support	Other?	Comments	
Sander Stiftung	\checkmark					
Schwiete Stiftung	\checkmark					
Krebshilfe	\checkmark					
Mukoviszidose eV						

Section 4.

Intellectual Property -- Patents & Copyrights

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

Section 5. Relationships not covered above

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Dr. Bals reports grants and personal fees from AstraZeneca, grants and personal fees from Boehringer Ingelheim, personal fees from GlaxoSmithKline, personal fees from Grifols, grants and personal fees from Novartis, personal fees from CSL Behring, grants from German Federal Ministry of Education and Research (BMBF) Competence Network Asthma and COPD (ASCONET), grants from Sander Stiftung, grants from Schwiete Stiftung, grants from Krebshilfe, from Mukoviszidose eV, outside the submitted work; .

🖌 No



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1. Given Name (First Name) Christoph	2. Surname (Last Name) Beisswenger		3. Date 24-May-2018
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Na	me
5. Manuscript Title Alternative oxidase attenuates cigarette	e smoke-induced lung dy	sfunction and tissue damage	e
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Section 2. The Work Under C	onsideration for Publi	ication	
Did you or your institution at any time rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, d		
Section 3. Relevant financial	activities outside the	submitted work.	
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should re Are there any relevant conflicts of intere	ibed in the instructions. U port relationships that we	Ise one line for each entity; a	idd as many lines as you need by

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?		Yes	V No	c
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Dr. Beisswenger has nothing to disclose.

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1. Given Name (First Name) Christian		2. Surname (Last Name) Herr		3. Date 24-May-2018		
4. Are you the cor	responding author?	Yes 🖌 No	Corresponding Author's Na Marten Szibor	me		
5. Manuscript Title Alternative oxida		e smoke-induced lung dy	sfunction and tissue damag	e		
6. Manuscript Ide	ntifying Number (if you kr	now it)				
Contion 2						
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Patent?	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments	
US 7572616		\checkmark	\checkmark	\checkmark	University of Tampere	will be licensed on	



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Dr. Jacobs reports In addition, Dr. Jacobs has a patent US 7572616 with royalties paid to University of Tampere.

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Other: Anything not covered under the previous three boxes Pending: The patent has been filed but not issued Issued: The patent has been issued by the agency Licensed: The patent has been licensed to an entity, whether earning royalties or not Povalties: Funds are coming in to you or your institution due to you



Section 1. Identifying Inform	ation		
1. Given Name (First Name) Jahnavi	2. Surname (Last Name) Bhaskaran		3. Date 24-May-2018
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Na Dr. Marten Szibor	me
5. Manuscript Title Alternative oxidase attenuates cigarette	e smoke-induced lung dy	sfunction and tissue damag	e
6. Manuscript Identifying Number (if you kr	now it)		
Section 2. The Work Under Co	onsideration for Publi	cation	
Did you or your institution at any time recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, d		
Section 3. Delevent financial			
Relevant financial	activities outside the	submitted work.	
Place a check in the appropriate boxes i of compensation) with entities as descri clicking the "Add +" box. You should rep Are there any relevant conflicts of intere	bed in the instructions. U port relationships that we	se one line for each entity; a	add as many lines as you need by

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? [Ye	s 🖌 No
bo you have any patents, whether plainted, penaing of issued, broadly relevant to the work.	10.	



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):

✓ No other relationships/conditions/circumstances that present a potential conflict of interest

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. Bhaskaran has nothing to disclose.

Evaluation and Feedback



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.

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4. Intellectual Property.

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

Relationships not covered above.

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Section 1. Identifying Inform	ation		
1. Given Name (First Name) Laura	2. Surname (Last Name) Salminen		3. Date 25-May-2018
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Na Marten Szibor	me
5. Manuscript Title Alternative oxidase attenuates cigarette	smoke-induced lung dy	sfunction and tissue damage	2
6. Manuscript Identifying Number (if you kno	ow it)		
Section 2. The Work Under Co	onsideration for Publi	ication	
Did you or your institution at any time receiv any aspect of the submitted work (including statistical analysis, etc.)?			-
Are there any relevant conflicts of intere	st? Yes 🖌 No		
Section 3. Relevant financial a	activities outside the	submitted work.	
Place a check in the appropriate boxes ir of compensation) with entities as descril			ationships (regardless of amount

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

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?

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Dr. Salminen has nothing to disclose.

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1. Given Name (First Name) Luca	2. Surname (Last Name) Giordano	3. Date 25-May-20
I. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Marten Szibor
Manuscript Title rernative oxidase attenuates cigare	tte smoke-induced lung d	ysfunction and tissue damage
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.)?

🖌 No

Are there any relevant conflicts of interest?	Yes
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Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
European Respiratory Society (ERS)				\checkmark	ERS Short-Term Fellowship	

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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Yes, the following relationships/conditions/circumstances are present (explain below):

✓ No other relationships/conditions/circumstances that present a potential conflict of interest

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Dr. Giordano reports other from European Respiratory Society (ERS), outside the submitted work; .

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Relationships not covered above.

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Section 1.			
	Identifying Inform	nation	
1. Given Name (Fi Marten	rst Name)	2. Surname (Last Name) Szibor	3. Date 24-May-2018
4. Are you the cor	responding author?	✓ Yes No	
5. Manuscript Title Alternative oxide		te smoke-induced lung dysfunction and	tissue damage
6. Manuscript Ide not yet assigned	ntifying Number (if you k I	now it)	
Section 2.	The Work Under C	Consideration for Publication	
any aspect of the s statistical analysis,	submitted work (includin etc.)?	g but not limited to grants, data monitoring	government, commercial, private foundation, etc.) for board, study design, manuscript preparation,
Are there any rel	evant conflicts of inter	rest? Yes 🖌 No	

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Are there any relevant conflicts of interest?	Yes	\checkmark	No
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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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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?

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No other relationships/conditions/circumstances that present a potential conflict of interest

MSz declares himself as a shareholder in a start-up company to develop therapeutics based on AOX.

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. Szibor declares himself as a shareholder in a start-up company to develop therapeutics based on AOX.

Evaluation and Feedback



Instructions

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Section 1. Identifying Info	rmation		
1. Given Name (First Name) Natascha	2. Surname (Last Name) Sommer		3. Date 24-May-2018
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Nam Marten Szibor	ie
5. Manuscript Title Alternative oxidase attenuates cigare	ette smoke-induced lung d	ysfunction and tissue damage	
6. Manuscript Identifying Number (if you	know it)		

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🖌 No

Are there any relevant conflicts of interest?		Yes
---	--	-----

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments	
Actelion		\checkmark				
Bayer		\checkmark				

Section 4.

Intellectual Property -- Patents & Copyrights

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

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Dr. Sommer reports personal fees from Actelion, personal fees from Bayer, outside the submitted work; .

Evaluation and Feedback



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1. Given Name (First Name) Norbert	2. Surname (Last Name) Weissmann	3. Date 25-May-2018				
4. Are you the corresponding author?						
5. Manuscript Title Alternative oxidase attenuates cigarette smoke-induced lung dysfunction and tissue damage						
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Are there any relevant conflicts of interest? \checkmark Yes \square 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.

Name of Institution/Company	Grant?	Personal Fees	Non-Financial Support <mark>?</mark>	Other?	Comments	
German Research Foundation (DFG) German Center for Lung Research (DZL)	\checkmark					

Section 3. Relevant financial activities outside the submitted work.

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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



Section 5. Relationships not covered above

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Dr. Weissmann reports grants from German Research Foundation (DFG) German Center for Lung Research (DZL) , during the conduct of the study; .

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Section 1. Identifying Inform	nation					
1. Given Name (First Name) Peter	2. Surname (Last Name) Rauschkolb	3. Date 18-January-1980				
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Name Marten Szibor				
5. Manuscript Title Alternative oxidase attenuates cigarette smoke-induced lung dysfunction and tissue damage						
6. Manuscript Identifying Number (if you ki	now it)					
Section 2. The Work Under C	onsideration for Public	cation				
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Section 3. Relevant financial	activities outside the s	ubmitted work.				
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Section 4. Intellectual Property -- Patents & Copyrights

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1. Given Name (First Name) Praveen Kumar	2. Surname (Last Name) Dhandapani		3. Date 24-May-2018	
4. Are you the corresponding author?	Yes 🖌 No	Corresponding Author's Na Marten Szibor	me	
5. Manuscript Title Alternative oxidase attenuates cigaret	te smoke-induced lung dy	sfunction and tissue damag	e	
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3. Date 24-May-2018				
Corresponding Author's Name Marten Szibor, University of Tampere				
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