

#### **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.

## Identifying information.

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

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earning royalties or not

**Royalties:** Funds are coming in to you or your institution due to your patent

Alonso 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fii Alvaro	rst Name)	2. Surname (Last Name) Alonso		3. Date 27-Septe	ember-2018
4. Are you the cor	4. Are you the corresponding author?		✓ No Corresponding Author's N Pamela L. Lutsey		
5. Manuscript Title Impaired lung fu		nd risk of incident deme	ntia		
6. Manuscript Ider Blue-201807-122	ntifying Number (if you kn 200C	now it)			
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Section 2.	The Work Under Co	onsideration for Pub	lication		
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National Institutes of	Health	$\checkmark$			
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Section 3.	Relevant financial	activities outside the	e submitted v	vork.	
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Section 4.	Intellectual Proper	ty Patents & Copy	rights		
Do you have any	patents, whether plant	ned, pending or issued,	broadly relevar	nt to the work? Yes	✓ No

Alonso 2



Section 5. Polationships not severed above
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Dr. Alonso reports grants from National Institutes of Health, during the conduct of the study; .

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Alonso 3



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Chen 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Nemin	rst Name)	2. Surname (Last Name) Chen		3. Date 27-September-2018
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Nam	ne
5. Manuscript Title Impaired lung fu		nd risk of incident dementi	a	
6. Manuscript Ider Blue-201807-122	ntifying Number (if you kr 200C	now it)		
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Section 2.	The Work Under Co	onsideration for Public	ation	
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Section 4.	Intellectual Proper	rty Patents & Copyric	ıhts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes ✓ No

Chen 2



Section 5. Relationships not covered above
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Dr. Chen has nothing to disclose.

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Gottesman 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Rebecca	rst Name)	2. Surname (Last Name) Gottesman		3. Date 01-October-2018
4. Are you the cor	responding author?	☐ Yes ✓ No	Corresponding Autho Pamela L. Lutsey	r's Name
5. Manuscript Title Impaired lung fu		nd risk of incident dement	ia	
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Section 2.	The Work Under Co	onsideration for Publi	cation	
any aspect of the s statistical analysis, Are there any rel	ubmitted work (including	g but not limited to grants, d		ent, commercial, private foundation, etc.) for udy design, manuscript preparation,
Section 3.	Relevant financial	activities outside the	submitted work.	
of compensation clicking the "Add Are there any rele	) with entities as descri	ibed in the instructions. U port relationships that we est?	se one line for each en	ial relationships (regardless of amount tity; add as many lines as you need by 36 months prior to publication.
Name of Entity		Granic	n-Financial Other?	Comments
American Academy o	f Neurology			Associate Editor, Neurology
Section 4.	Intellectual Proper	rty Patents & Copyri	ghts	
Do you have any	patents, whether plan	ned, pending or issued, b	roadly relevant to the v	work? Yes Vo

Gottesman 2



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Dr. Gottesman reports other from American Academy of Neurology, outside the submitted work; .

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Knopman 1



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4. Are you the cor	responding author?	Yes ✓ No		Corresponding Author's Name Pamela L. Lutsey		
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of compensation clicking the "Add Are there any rel	) with entities as descr	ibed in the instruction port relationships tha est?  Yes	ns. Use one line for e	financial relationships (regardles each entity; add as many lines as y ing the 36 months prior to publ	you need by	
Name of Entity		Grant? Personal Fees?	Non-Financial Support?	ther? Comments		
DIAN Study				member DSMB		
Biogen Alzheimer dru	ıg			site investigator, no personal compensation	1	
illy Alzheimer drug		<b>✓</b>		site investigator, no personal	I	

Knopman 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
Section 5.  Relationships not covered above
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Dr. Knopman reports personal fees from DIAN Study, grants from Biogen Alzheimer drug, grants from Lilly Alzheimer drug, outside the submitted work; .

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Knopman 3



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patent

Lakshminarayan 1



Section 1.	lentifying Informa	ation						
1. Given Name (First N Kamakshi	lame)	2. Surnam Lakshmir	ne (Last Name) narayan			3. Date 28-Septen	nber-2018	
4. Are you the corresp	oonding author?	Yes	✓ No	Corresponding Author's Name Pamela L. Lutsey				
5. Manuscript Title Impaired lung funct	ion, lung disease and	d risk of in	cident demen	tia				
6. Manuscript Identify Blue-201807-12200	ring Number (if you kno C	ow it)						
Section 2. TI	ne Work Under Co	nsiderat	ion for Publ	ication				
any aspect of the subr statistical analysis, etc Are there any releva If yes, please fill out	tion <b>at any time</b> receivenitted work (including land)?  ont conflicts of interest the appropriate inforcemoved by pressing	out not lim st?	ited to grants, of the control of th	lata monitoring	g board, stu	udy design, manus	cript preparation,	
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Section 3. Ro	elevant financial a	ctivities	outside the	submitted	work.			
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Section 4. In	tellectual Propert	y Pate	nts & Copyr	ights				
Do you have any pa	tents, whether plann	ed, pendii	ng or issued, b	oroadly releva	ant to the	work? Yes	✓ No	

Lakshminarayan 2



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Dr. Lakshminarayan reports grants from NIH, during the conduct of the study; .

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Lutsey 1



Section 1.	Identifying Inform	ation			
1. Given Name (Fii Pamela	rst Name)	2. Surname (Last Na Lutsey	me)		3. Date 27-September-2018
4. Are you the cor	responding author?	✓ Yes No			
5. Manuscript Title Impaired lung fu	e nction, lung disease an	d risk of incident de	mentia		
6. Manuscript Ider Blue-201807-122	ntifying Number (if you kn 200C	ow it)			
Section 2.					
Section 2.	The Work Under Co	onsideration for F	ublication		
any aspect of the s statistical analysis, Are there any rel- If yes, please fill c	ubmitted work (including etc.)? evant conflicts of intere	but not limited to gradst? Yes crmation below. If you	nts, data monitorin No ou have more tha	ng board, study n one entity p	commercial, private foundation, etc.) for design, manuscript preparation, press the "ADD" button to add a row.
Name of Institut	ion/Company	Grant? Persona Fees?	Non-Financial Support?	Other? Co	omments
National Institutes of	Health	<b>✓</b>			
Section 3.	Relevant financial	activities outside	the submitted	work.	
of compensation clicking the "Add Are there any rel	) with entities as descri	bed in the instruction ort relationships the	ns. Use one line f	for each entity	relationships (regardless of amount v; add as many lines as you need by is months prior to publication.
Section 4.	Intellectual Proper	ty Patents & Co	pyrights		
Do you have any	patents, whether planr	ned, pending or issu	ed, broadly relev	ant to the wor	rk? Yes 🗸 No

Lutsey 2



Section 5. Relationships not covered above
Relationships not covered above
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Section 6. Disclosure Statement
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Dr. Lutsey reports grants from NIH , during the conduct of the study; .

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**Royalties:** Funds are coming in to you or your institution due to your patent

Mirabelli 1



Section 1.	Identifying Inform	nation		
1. Given Name (First Name) Maria		2. Surname (Last Name) Mirabelli		3. Date 28-September-2018
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Pamela L. Lutsey	
5. Manuscript Title Impaired lung function, lung disease and risk of incident do		nd risk of incident dementi	a	
6. Manuscript Ider Blue-201807-122	ntifying Number (if you kr 200C	now it)	_	
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Section 2.	The Work Under C	onsideration for Public	ation	
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, comr ta monitoring board, study desig	mercial, private foundation, etc.) for gn, manuscript preparation,
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
of compensation clicking the "Add	) with entities as descri	ibed in the instructions. Us port relationships that wer		ionships (regardless of amount d as many lines as you need by onths prior to publication.
Section 4.	Intellectual Prope	rty Patents & Copyri <u>c</u>	ıhts	
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes 🗸 No

Mirabelli 2



Section 5. Relationships not severed above			
Relationships not covered above			
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Mosley 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Tom	rst Name)	2. Surname (Last Name) Mosley	3. Date 27-September-2018		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Pamela L. Lutsey		
5. Manuscript Title Impaired lung function, lung disease an		nd risk of incident dementi	a		
6. Manuscript Ide Blue-201807-122	ntifying Number (if you kr 200C	now it)			
			-		
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Did you or your institution <b>at any time</b> 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?  Yes  Volume  Yes					
Section 3.	Relevant financial	activities outside the s	submitted work.		
of compensation clicking the "Add	n) with entities as descr	ibed in the instructions. Us port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by the present during the 36 months prior to publication.		
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ✓ No					

Mosley 2



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Vossel 1



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