Date: 08/01/2021

Your Name: Farsad Afshinnia

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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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		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.	None	Farsad Afshinnia was funded by K08DK106523, R03DK121941 grants from NIDDK, and is supported by the JDRF Center for Excellence grant 5-COE-2019-861-S-B.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X None	
3	Royalties or licenses	<b>X</b> None	

4	Consulting fees	X None	
7	Consulting rees	_ ^ _ None	
_	Decomposit on homeomic for		
5	Payment or honoraria for	X None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	V None	
0	testimony	X None	
	testimony		
-	Company for a state of	V	
7	Support for attending meetings and/or travel	X None	
	meetings and/or travel		
8	Patents planned, issued or	<b>X</b> None	
	pending		
9	Participation on a Data	<b>X</b> None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	<b>X</b> None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<b>X</b> None	
12	Receipt of equipment,	<b>X</b> None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	<b>X</b> None	
	financial interests		
	3000		

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

**Date:** 08/01/2021

Your Name: Subramaniam Pennathur

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid  $\beta$ -oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	X None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X None	
3	Royalties or licenses	X None	

4	Consulting fees	<b>X</b> None	
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or	X None	
6	educational events	V Nove	
O	Payment for expert testimony	<b>X</b> None	
7	Support for attending meetings and/or travel	<b>X</b> None	
8	Patents planned, issued or pending	<b>X</b> None	
9	Participation on a Data Safety Monitoring Board or	X None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	X None	
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment, materials, drugs, medical	X None	
	writing, gifts or other services		
13	Other financial or non- financial interests	X None	

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

Date: 08/01/2021

Your Name: Patrice E. Fort

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)  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.	Thomas Beatson Foundation The Juvenile Diabetes Research Foundation	Research grant  Research grant
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	X None	
3	Royalties or licenses	<b>X</b> None	

4	Consulting fees	X None	
5	Payment or honoraria for lectures, presentations,	X None	
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert testimony	X None	
7	Support for attending meetings and/or travel	X None	
8	Patents planned, issued or pending	X None	
9	Participation on a Data Safety Monitoring Board or	X None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	<b>X</b> None	
	committee or advocacy		
- 11	group, paid or unpaid		
11	Stock or stock options	<b>X</b> None	
40			
12	Receipt of equipment, materials, drugs, medical	<b>X</b> None	
	writing, gifts or other services		
12		V Non-	
13	Other financial or non- financial interests	X None	

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

**Date:** August 1, 2021

Your Name: Robert G Nelson

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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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)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding,	None NIDDK	Intramural support.
	provision of study materials,	ADA	Grant support to institution.
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	X None	
	in item #1 above).		
3	Royalties or licenses	X None	

4	Consulting fees	X None	
5	Payment or honoraria for lectures, presentations,	X None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert testimony	X None	
_			
7	Support for attending meetings and/or travel	X None	
8	Patents planned, issued or pending	X None	
9	Participation on a Data Safety Monitoring Board or	X None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	X None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	X None	
12	Receipt of equipment, materials, drugs, medical	X None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	X None	

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

**Date:** 08/01/21

Your Name: Steven F. Abcouwer, Ph.D.

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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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		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,	X None	
	provision of study materials, medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	X None	
	in item #1 above).		
3	Royalties or licenses	<b>X</b> None	

4	Consulting fees	X None	
5	Payment or honoraria for lectures, presentations, speakers bureaus,	X None	
	manuscript writing or educational events		
6	Payment for expert testimony	X None	
_	6		
7	Support for attending meetings and/or travel	X None	
8	Patents planned, issued or pending	<b>X</b> None	
9	Participation on a Data Safety Monitoring Board or	<b>X</b> None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	<b>X</b> None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<b>X</b> None	
12	Receipt of equipment, materials, drugs, medical	<b>X</b> None	
	writing, gifts or other		
4.2	services		
13	Other financial or non- financial interests	<b>X</b> None	

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

**Date:** 08/01/21

Your Name: Jaeman Byun

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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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)
		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding,	<b>X</b> None	
	provision of study materials,		
	medical writing, article processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	26 months
2	Cuanta au acutuanta fuana		50 months
2	Grants or contracts from any entity (if not indicated	<b>X</b> None	
	in item #1 above).		
3	Royalties or licenses	<b>X</b> None	

4	Consulting fees	X None	
5	Payment or honoraria for lectures, presentations, speakers bureaus,	X None	
	manuscript writing or educational events		
6	Payment for expert testimony	<b>X</b> None	
7	Support for attending meetings and/or travel	<b>X</b> None	
8	Patents planned, issued or pending	<b>X</b> None	
9	Participation on a Data Safety Monitoring Board or	<b>X</b> None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	<b>X</b> None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	<b>X</b> None	
12	Receipt of equipment, materials, drugs, medical	<b>X</b> None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	<b>X</b> None	

<u>x</u> I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date: 8/2/2021

Your Name: Thekkelnaycke Rajendiran

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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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.	_x None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	x None	
3	Royalties or licenses	x None	

4	Consulting fees	x None	
_	Consulting rees		
5	Payment or honoraria for lectures, presentations,	x None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert testimony	_x None	
7	Cuppert for attending	y None	
/	Support for attending meetings and/or travel	_x None	
8	Patents planned, issued or pending	x None	
9	Participation on a Data	x None	
9	Safety Monitoring Board or	X None	
	Advisory Board		
10	Leadership or fiduciary role	_x None	
10	in other board, society,	_x None	
	committee or advocacy		
44	group, paid or unpaid	None	
11	Stock or stock options	_x None	
42	D	N.	
12	Receipt of equipment, materials, drugs, medical	x None	
	writing, gifts or other		
12	services Other financial or non-	y None	
13	financial interests	x None	

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

**Date:** 8/2/2021

Your Name: Yang Shan

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding,	x_ None	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	_x None	
	in item #1 above).		
3	Royalties or licenses	x_ None	

4	Consulting fees	x_ None	
5	Payment or honoraria for lectures, presentations,	x_ None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert testimony	x_ None	
_			
7	Support for attending meetings and/or travel	x_ None	
8	Patents planned, issued or pending	x_ None	
9	Participation on a Data Safety Monitoring Board or	_x None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	x_ None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	x_ None	
12	Receipt of equipment, materials, drugs, medical	x_ None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	x_ None	

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

Date: 08/02/2021

Your Name: Jerome E Roger

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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			planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials,	X None	
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	<b>X</b> None	
	in item #1 above).		
3	Royalties or licenses	<b>X</b> None	
4	Consulting fees	<b>X</b> None	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	X None	
	manuscript writing or educational events		
6	Payment for expert testimony	<b>X</b> None	
7	Support for attending meetings and/or travel	<b>X</b> None	
	meetings and of traver		
8	Patents planned, issued or pending	<b>X</b> None	
9	Participation on a Data Safety Monitoring Board or	X None	
	Advisory Board		
10	Leadership or fiduciary role in other board, society,	<b>X</b> None	
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	X None	
	·		
12	Receipt of equipment, materials, drugs, medical	<b>X</b> None	
	writing, gifts or other services		
13	Other financial or non-	<b>X</b> None	
	financial interests		

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

**Date:** August 2<sup>nd</sup> 2021 **Your Name:** Helen C Looker

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding,	_x None	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	x None	
	in item #1 above).		
3	Royalties or licenses	_x None	

4	Consulting fees	_x_ None	
5	Payment or honoraria for lectures, presentations,	_x None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert testimony	_x None	
_			
7	Support for attending meetings and/or travel	_x None	
8	Patents planned, issued or pending	_x None	
9	Participation on a Data Safety Monitoring Board or	_x None	
	Advisory Board		
10	Landauskin au Educieus vala	Nava	
10	Leadership or fiduciary role in other board, society,	_x None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_x None	
12	Receipt of equipment, materials, drugs, medical	_x None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	_x None	

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

Date: 08/02/2021 Your Name: Tanu Soni

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding,	_x None	
	provision of study materials,		
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	x None	
	in item #1 above).		
3	Royalties or licenses	_x None	

4	Consulting fees	_x_ None	
5	Payment or honoraria for lectures, presentations,	_x None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert testimony	_x None	
_			
7	Support for attending meetings and/or travel	_x None	
8	Patents planned, issued or pending	_x None	
9	Participation on a Data Safety Monitoring Board or	_x None	
	Advisory Board		
10	Landauskin au Educieus vala	Nava	
10	Leadership or fiduciary role in other board, society,	_x None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_x None	
12	Receipt of equipment, materials, drugs, medical	_x None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	_x None	

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

**Date:** 8/3/21

Your Name: Thomas W. Gardner

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid  $\beta$ -oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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		Name all entities with whom you have this relationship or indicate none (add rows as needed)  Time frame: Since the initial	Specifications/Comments (e.g., if payments were made to you or to your institution)
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.	JDRF Center of Excellence (5-COE-2019-861-S-B)	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	Taubman Medical Research Institute R01EY20852 - R01 EY013961 - R24 DK082841 - ORA, Inc. A Randomized, Double-Masked, 48-Week, Parallel-Group, Placebo-	

		Controlled, Proof-of-Concept Study to Investigate the Efficacy and Safety of RG7774 in Patients with Diabetes Mellitus Type 1 or Type 2 with Treatment-Naive Diabetic Retinopathy  - Coulter Translational Research Program  - JDRF (1-RSC-2021-1051-A-N) - Novo Nordisk Foundation	
3	Royalties or licenses	x None	
4	Consulting fees	National Medical Research Council, Singapore, 2021	To me
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events	None	
6	Payment for expert testimony	x None	
7	Support for attending meetings and/or travel	None Lions Eye Institute for Transplant and Research	To me
8	Patents planned, issued or pending	None Ojeda, LV, Sundstrom JM, Holmer JT, Cruz A, Bhamni A, Demirci H, Gardner TW. Devices, Systems and Methods for Biological Sample Collection. PCT/US20/33995 submitted 5.21.20	n/a

9	Participation on a Data Safety Monitoring Board or Advisory Board	None Ophthalmology Working Group of DCCT/EDIC	
10	Leadership or fiduciary role in other board, society,	x None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	x None	
12	Receipt of equipment, materials, drugs, medical	x None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	None	

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form.

**Date:** 08/02/2021

Your Name: George Michailidis

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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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)
		Time frame: Since the initial	planning of the work
	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.	_x None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated	x None	
	in item #1 above).		
3	Royalties or licenses	_x None	

4	Consulting fees	_x_ None	
5	Payment or honoraria for lectures, presentations,	_x None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert testimony	_x None	
_			
7	Support for attending meetings and/or travel	_x None	
8	Patents planned, issued or pending	_x None	
9	Participation on a Data Safety Monitoring Board or	_x None	
	Advisory Board		
10	Landauskin au Educieus vala	Nava	
10	Leadership or fiduciary role in other board, society,	_x None	
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	_x None	
12	Receipt of equipment, materials, drugs, medical	_x None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	_x None	

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**Date:** 08/02<sup>/</sup>2021

Your Name: Matthias Kretzler

Manuscript Title: Diminished retinal complex lipid synthesis and impaired fatty acid β-oxidation associated with human

diabetic retinopathy

Manuscript number (if known): 152109-INS-CMED-RV-2

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3	Royalties or licenses	_x None		

4	Consulting fees	_x_ None	
5	Payment or honoraria for lectures, presentations,	_x None	
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert testimony	_x None	
_			
7	Support for attending meetings and/or travel	_x None	
8	Patents planned, issued or pending	_x None	
9	Participation on a Data Safety Monitoring Board or	_x None	
	Advisory Board		
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10	Leadership or fiduciary role in other board, society,	_x None	
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	group, paid or unpaid		
11	Stock or stock options	_x None	
12	Receipt of equipment, materials, drugs, medical	_x None	
	writing, gifts or other		
	services		
13	Other financial or non- financial interests	_x None	

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