Date: 05.13.2021 Your Name: Aaron Winkler Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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.	Pfizer	I am an employee of Pfizer, which funded the research and has an interest in the commercial development of PF-06650833.
		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	

5	Payment or honoraria for	_XNone	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	V. Nono	
6	testimony	X_None	
	testimony		
7	Support for attending	Pfizer	As an employee of Pfizer, they fund my travel to
,	meetings and/or travel		conferences.
8	Patents planned, issued or pending	X_None	
9	Participation on a Data	X_None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	X_None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	Pfizer	I hold Pfizer stock and stock options
	·····		
12	Receipt of equipment,	_X_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	_X_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: ___5/11/2021_____ Your Name: _____Weiyong Sun_____ Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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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.	Pfizer	I am an employee of Pfizer where the work was conceived and performed
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	None	
	manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	Pfizer	As a current employee of Pfizer, Pfizer has paid for my travel to conferences.
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, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	Pfizer	As a current employee of Pfizer I have received stock and stock options.
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	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:
 May 13th, 2021

 Your Name:
 Saurav De

 Manuscript Title:
 The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial

 Manuscript number (if known):
 ar-20-2144.R1

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3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	None	
	manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	Pfizer	As a current employee of Pfizer, Pfizer has paid for my travel to conferences
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, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	Pfizer	As a current employee of Pfizer I have received stock and stock options
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	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:05/12/2021		

Your Name: _____Aiping Jiao___

Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial **Manuscript number (if known):** ar-20-2144.R1

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

4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
6	educational events Payment for expert	None	
0	testimony		
	testimony		
7	Support for attending	None	
<i>'</i>	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or	_	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	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: 5/14/2021 Your Name: M. Nusrat Sharif Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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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)	
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		Time frame: past	36 months	
2	Grants or contracts from any entity (if not indicated in item #1 above).	None		
3	Royalties or licenses	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	Pfizer	Being an employee of Pfizer, they fund my travel to meetings and conferences
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, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	Pfizer	I hold Pfizer stock and stock options
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	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: ____5/14/21_____ Your Name: _____Peter Symanowicz _____ Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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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	Pfizer I am an employee of Pfizer where the work was	I was an employee of Pfizer where the work was conceived and performed
processing charge	processing charges, etc.) No time limit for this item.	conceived and performed	
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	None	
0	testimony		
	testimony		
7	Support for attending	None	
ŕ	meetings and/or travel		
8	Patents planned, issued or	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	None	
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	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: 05/13/2021 Your Name: Shruti Athale Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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		Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	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	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	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, society, committee or advocacy group, paid or unpaid	None	
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	

<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: May 12, 2021______ Your Name: Julia H. Shin______ Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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

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		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	xNone	
3	Royalties or licenses	_xNone	
4	Consulting fees	_xNone	

5 6 7	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel	xNone xNone Pfizer	As a current employee of Pfizer, Pfizer has paid for my travel to conferences.
8	Patents planned, issued or pending	x_None	
9	Participation on a Data Safety Monitoring Board or Advisory Board	x_None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	_xNone	
11	Stock or stock options	Pfizer	As a current employee of Pfizer I have received stock and stock options.
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	_xNone	
13	Other financial or non- financial interests	_xNone	

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

Date:_____May 12, 2021 Your Name:_____Bruce A. Jacobson Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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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.	Pfizer	I am an employee of Pfizer where the work was conceived and performed
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	None	

4	Consulting fees	None	
5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	Pfizer	As a current employee of Pfizer, Pfizer has paid for my travel to conferences.
8	Patents planned, issued or pending	None	
9	Participation on a Data	None	
	Safety Monitoring Board or Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	Pfizer	As a current employee of Pfizer I have received stock and stock options.
12	Receipt of equipment,	None	
12	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	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: 05/12/2021______ Your Name:__Simeon Ramsey______ Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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

5 6 7	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events Payment for expert testimony Support for attending meetings and/or travel	NoneNoneNoneNone	As a current employee of Pfizer, they have funded my attendance at external conferences.
	meetings and/or traver		
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, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	Pfizer	As a current employee of Pfizer I have received and own stock in Pfizer.
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

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

5	Payment or honoraria for lectures, presentations, speakers bureaus,	None	
	manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	Pfizer	As a current (or former) employee of Pfizer, Pfizer has paid for my travel to conferences.
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, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	Pfizer	As a current (or former) employee of Pfizer I have received stock and stock options.
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	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: 05.13.2021 Your Name: Tatyana Andreyeva Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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.	Pfizer	I am an employee of Pfizer, which funded the research and has an interest in the commercial development of PF-06650833.
2	Grants or contracts from any entity (if not indicated	Time frame: past _None	36 months
3	in item #1 above). Royalties or licenses	_None	
4	Consulting fees	_None	

5	Payment or honoraria for lectures, presentations,	None	
	speakers bureaus, manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	Pfizer	As an employee of Pfizer, they fund my travel to conferences.
8	Patents planned, issued or	_None	
	pending		
0	Denticia etiene en e Dete	News	
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
10	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	Pfizer	I hold Pfizer stock and stock options
12	Receipt of equipment,	None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	_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: 05.13.2021 Your Name: Heng Liu Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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) 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.	Pfizer	I am an employee of Pfizer, which funded the research and has an interest in the commercial development of PF-06650833.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	_None	
3	Royalties or licenses	_None	
4	Consulting fees	_None	

5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or educational events		
6	Payment for expert	None	
0	testimony	None	
7	Support for attending meetings and/or travel	Pfizer	As an employee of Pfizer, they fund my travel to conferences.
8	Patents planned, issued or	_None	
	pending		
•			
9	Participation on a Data Safety Monitoring Board or	None	
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	Pfizer	I hold Pfizer stock and stock options
12	Dessint of any view out	Neze	
12	Receipt of equipment, materials, drugs, medical	None	
	writing, gifts or other		
	services		
13	Other financial or non-	_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.

ICMJE DISCLOSURE FORM

Date:__5-11-2021__

Your Name: Martin Hegen, Ph.D._

Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial

Manuscript number (if known): ar-20-2144.R1

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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The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		Name all entities with whom you have this relationship or indicate none (add rows as	Specifications/Comments (e.g., if payments were made to you or to your institution)
		needed)	
		Time frame: Since the initial	
1	All support for the present	Pfizer	I am an employee of Pfizer where the work was
	manuscript (e.g., funding,		conceived and performed.
	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	None	
-	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	
5	Payment or honoraria for	None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		

6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	Pfizer	As a current employee of Pfizer, Pfizer has paid for my travel to conferences.
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, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	Pfizer	As a current employee of Pfizer, I have received stock and stock options
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

_X__ 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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The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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.	Pfizer	I was employed at Pfizer when this work was performed.
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	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	Pfizer	During my tenure at Pfizer, they paid for my travel but not related to this project.
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, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	Pfizer	As a former employee of Pfizer, I have received stock and stock options but not as compensation for this project.
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	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: May 12, 2021______ Your Name:_Joanne Brodfuehrer______ Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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.	Pfizer Inc	I am an employee of Pfizer where the work was conceived and performed
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	_XNone	
4	Consulting fees	XNone	

5	Payment or honoraria for	X_None	
	lectures, presentations,		
	speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	XNone	
	testimony		
7	Support for attending	Pfizer Inc	As a current employee of Pfizer, Pfizer has paid for my
/	meetings and/or travel	Plizer Inc	travel to conferences.
	meetings and/or traver		
8	Patents planned, issued or	XNone	
	pending		
0	Participation on a Data	V. Nono	
9	Participation on a Data Safety Monitoring Board or	X_None	
	Advisory Board		
10	Leadership or fiduciary role	X None	
10	in other board, society,		
	committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	Pfizer Inc	As a current employee of Pfizer I have received stock and
			stock options.
10			
12	Receipt of equipment,	XNone	
	materials, drugs, medical writing, gifts or other		
	services		
13	Other financial or non-	X 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:__05/13/2021_

Your Name: ___Mera Tilley_

Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in

preclinical models of rheumatologic disease and in humans in a randomized clinical trial

Manuscript number (if known): ar-20-2144.R1

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 notfor-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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u>

manuscript only.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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	Pfizer	Funding of research and full salary/benefits/stock options/restricted stock units

	processing charges, etc.) No time limit for this item.	Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	Pfizer and Foresite Labs	
3	Royalties or licenses	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	Pfizer	Patent #: WO2016110806A3

9	Safety Monitoring Board or Advisory	None	
	Board		
10	Leadership or fiduciary role in other board,	None	
	society, committee or		
	advocacy group, paid or unpaid		
11	Stock or stock options	Pfizer, Goldfinch Bio, Foresite Labs	Pfizer: Until Sept 2012- Sept 2018, Goldfinch Bio: September 2018- April 2019. Foresite Labs April 2019- Present. Companies have provided funding of full salary/benefits/stock options/restricted stock units. Research for this manuscript funded only by Pfizer.
12	Receipt of equipment,	None	
	materials, drugs, medical writing, gifts or		
	other services		
13	Other financial or non- financial interests	None	

 \underline{X} I certify that I have answered every question and have not altered the wording of any of the questions on this

form.

 Date:
 12May2021

 Your Name:
 Steven A. Gilbert

 Manuscript Title:
 The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial

 Manuscript number (if known):
 ar-20-2144.R1

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,	Pfizer	I am an employee of Pfizer where the work was conceived and performed
	medical writing, article		
	processing charges, etc.)		
	No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	
4	Consulting fees	None	

5	Payment or honoraria for lectures, presentations, speakers bureaus,	None	
	manuscript writing or educational events		
6	Payment for expert testimony	None	
7	Support for attending meetings and/or travel	Pfizer	As a current employee of Pfizer, Pfizer ahs paid for my travel to conferences.
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, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	Pfizer	As a current employee of Pfizer I have received stock and stock options
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

Date:____11 May 2021______ Your Name:______Spencer I. Danto______ Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic diseas e and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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The following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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.	Pfizer, Inc.	The author is an employee of the Sponsor
		Time frame: past	36 months
2	Grants or contracts from	None	
	any entity (if not indicated in item #1 above).	Pfizer, Inc.	The author is an employee of the Sponsor
3	Royalties or licenses	None	
		Pfizer, Inc.	The author is an employee of the Sponsor
_			
4	Consulting fees	None	
		Pfizer, Inc.	The author is an employee of the Sponsor

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

Date:_____12May2021_____

Your Name: Jean Beebe

Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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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.	Pfizer	I am an employee of Pfizer where the work was conceived and performed
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	None	
3	Royalties or licenses	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	X	Pfizer pays for my travel/attendance at meetings
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, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	X	I am a shareholder of Pfizer stock
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

Date: ___05/11/2021_____ Your Name: ___Betsy J. Barnes_____ Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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.	XNone	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	XNone	
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

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

Date: ____May 17th 2021_____ Your Name: ____Virginia Pascual_ Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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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The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	Sanofi Astra Zeneca	
3	Royalties or licenses	None	
4	Consulting fees	Sanofi Moderna	

		Astra Zeneca
5	Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or	None
	educational events	
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	Astra Zeneca
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	None
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

Date:__5/14/2021__

Your Name:___Lih-Ling Lin Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

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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,	Pfizer	I was an employee of Pfizer where the work was conceived and performed
	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	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	None	

4	Consulting fees	None	
5	Payment or honoraria for	Nono	
5	lectures, presentations,	None	
	speakers bureaus,		
	manuscript writing or		
6	educational events		
6	Payment for expert testimony	None	
	testimony		
7	Support for attending	Pfizer	As a former employee of Pfizer, Pfizer has paid for my
	meetings and/or travel		travel to conferences.
8	Patents planned, issued or pending	None	
	pending		
9	Participation on a Data	None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	None	
	in other board, society, committee or advocacy		
	group, paid or unpaid		
11	Stock or stock options	Pfizer	As a former employee of Pfizer I have received stock and
			stock options.
12	Receipt of equipment,	None	
12	materials, drugs, medical		
	writing, gifts or other		
	services		
13		None	
13		None	

 Date:
 May 11th 2021

 Your Name:
 Iain C. Kilty

 Manuscript Title:
 The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial

 Manuscript number (if known):
 ar-20-2144.R1

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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)
	1 	Time frame: Since the initial	planning of the work
1	All support for the present	None	
	manuscript (e.g., funding,		
	provision of study materials,		
	medical writing, article processing charges, etc.)		
	No time limit for this item.		
	No time mint for this item.		
		Time frame: past	36 months
2	Grants or contracts from	None	
2	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	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 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, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	_Hold Pfizer stock	
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

Date:__5/14/2021__

Your Name: ____ Margaret Fleming

Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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	Pfizer	I was an employee of Pfizer where the work was
	manuscript (e.g., funding,		conceived and performed
	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	None	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	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	Pfizer	As a former employee of Pfizer, Pfizer has paid for my travel to conferences.
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, society, committee or advocacy group, paid or unpaid	None	
11	Stock or stock options	Pfizer	As a former employee of Pfizer I have received stock and stock options.
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	None	
13	Other financial or non- financial interests	None	

Date: _____5-12-2021______ Your Name: _____Vikram R. Rao______ Manuscript Title: The IRAK4 inhibitor PF-06650833 blocks inflammation in preclinical models of rheumatologic disease and in humans in a randomized clinical trial Manuscript number (if known): ar-20-2144.R1

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 following questions apply to the author's relationships/activities/interests as they relate to the <u>current</u> <u>manuscript only</u>.

The author's relationships/activities/interests should be <u>defined broadly</u>. 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.

		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,	Pfizer	I am an employee of Pfizer where the work was conceived and performed
	medical writing, article		
	processing charges, etc.) No time limit for this item.		
		Time frame: past	36 months
2	Grants or contracts from	XNone	
	any entity (if not indicated		
	in item #1 above).		
3	Royalties or licenses	XNone	
4	Consulting fees	XNone	

5			
5			
5			
	Payment or honoraria for lectures, presentations, speakers bureaus,	XNone	
	manuscript writing or educational events		
6	Payment for expert testimony	XNone	
7	Support for attending meetings and/or travel	_XNone	
8	Patents planned, issued or pending	XNone	
9	Participation on a Data Safety Monitoring Board or Advisory Board	XNone	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	XNone	
11	Stock or stock options	Pfizer	Employer (Pfizer) distributed stocks and options
12	Receipt of equipment, materials, drugs, medical writing, gifts or other services	X_None	
13	Other financial or non- financial interests	XNone	