Date	e:May 18 <sup>th</sup> 2021		
You	r Name:Ningning Ca	<u> </u>	
Mar	iuscript Title: <u>Characteriza</u>	tion of the dynamic cha	nges in comprehensive epigenetic regulation during
<u>hun</u>	nan primary Sjögren's sy	ndrome progression	
Mar	uscript number (if known):_	ATM-21-1754	
			elationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third
	•	•	the manuscript. Disclosure represents a commitment
•	•		If you are in doubt about whether to list a
	ionship/activity/interest, it is	·	-
TCIA	ionship/activity/interest, it is	s preferable that you do se	•
The	following guestions apply to	o the author's relationshi	ps/activities/interests as they relate to the current
	uscript only.		· <u> </u>
The	author's relationships/act	ivities/interests should be o	defined broadly. For example, if your manuscript pertains
to th	ne epidemiology of hyperte	nsion, you should declare a	all relationships with manufacturers of antihypertensive
med	lication, even if that medica	tion is not mentioned in th	e manuscript.
	·	•	in this manuscript without time limit. For all other items,
the	time frame for disclosure is	the past 36 months.	
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	
		Time frame: Since the initial	planning of the work
1	All support for the present	X_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

Grants or contracts from

in item #1 above).

Royalties or licenses

any entity (if not indicated

\_X\_None

4	Consulting fees	XNone	
_			
5	Payment or honoraria for	X_None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_X_None	
	testimony		
7	Support for attending meetings and/or travel	_X_None	
	9		
8	Patents planned, issued or	X_None	
	pending		
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	X_None	
	·		
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:
_X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date	e:	_May 18 <sup>th</sup> 2021		
You	r Name	:Huan Shi		
Man	uscript	Title: Characteriza	tion of the dynamic ch	anges in comprehensive epigenetic regulation during
			ndrome progression	
Man	uscript	number (if known):_	<u>ATM-21-1754</u>	
relat part to tr	ed to the ies who anspare	he content of your r use interests may be ency and does not n	nanuscript. "Related" maffected by the content o	relationships/activities/interests listed below that are neans any relation with for-profit or not-for-profit third f the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a o.
	followii uscript	• • • • • • • • • • • • • • • • • • • •	o the author's relationsh	nips/activities/interests as they relate to the current
to the	ne epido lication em #1 l	emiology of hyperte , even if that medica pelow, report all sup	nsion, you should declare tion is not mentioned in t	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive he manuscript.  d in this manuscript without time limit. For all other items,
			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 initia	al planning of the work
1	manus provision materia article etc.)	port for the present cript (e.g., funding, on of study als, medical writing, processing charges, e limit for this item.	_X_None	
2		or contracts from tity (if not indicated	Time frame: pas	t 36 months

in item #1 above).

Royalties or licenses

4	Consulting fees	XNone	
_			
5	Payment or honoraria for	X_None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_X_None	
	testimony		
7	Support for attending meetings and/or travel	_X_None	
	9		
8	Patents planned, issued or	X_None	
	pending		
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	X_None	
	·		
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:
_X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date	e:	_May 18 <sup>th</sup> 2021		
You	r Name	:Chan Chen_		
Mar	nuscript	Title: Characteriza	tion of the dynamic cha	anges in comprehensive epigenetic regulation during
<u>hun</u>	nan pri	imary Sjögren's sy	ndrome progression	
Mar	nuscript	number (if known):_	<u>ATM-21-1754</u>	
relat part to tr	ted to the ies who anspare	ne content of your r se interests may be ency and does not n	nanuscript. "Related" maffected by the content of	relationships/activities/interests listed below that are leans any relation with for-profit or not-for-profit third if the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a poor.
	followir nuscript		o the author's relationsh	ips/activities/interests as they relate to the current
to the med	ne epide lication, em #1 k	emiology of hyperte even if that medica pelow, report all sup	nsion, you should declare tion is not mentioned in th	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive ne manuscript.  d in this manuscript without time limit. For all other items,
			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 initia	l planning of the work
1	manusci provision materia article p etc.)	coort for the present cript (e.g., funding, on of study als, medical writing, processing charges, e limit for this item.	_X_None	
2		or contracts from tity (if not indicated	Time frame: pastX_None	36 months

in item #1 above).

Royalties or licenses

4	Consulting fees	XNone	
_			
5	Payment or honoraria for	X_None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_X_None	
	testimony		
7	Support for attending meetings and/or travel	_X_None	
	9		
8	Patents planned, issued or	X_None	
	pending		
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	X_None	
	·		
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:
_X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date	e:May 18" 2021		
You	<sup>r</sup> Name: <u>Lisong Xie</u> _		
Mar	uscript Title: Characteriza	ntion of the dynamic cha	anges in comprehensive epigenetic regulation during
<u>hun</u>	nan primary Sjögren's s	yndrome progression	
Mar	uscript number (if known):	<u>ATM-21-1754</u>	
relat part to tr	ed to the content of your r les whose interests may be	nanuscript. "Related" m affected by the content of necessarily indicate a bias.	relationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third the manuscript. Disclosure represents a commitment of list a solution.
	following questions apply t uscript only.	o the author's relationsh	ips/activities/interests as they relate to the current
to the med	ne epidemiology of hyperte lication, even if that medica	nsion, you should declare at the interest in the interest for the work reported	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive ne manuscript.  In this manuscript without time limit. For all other items,
		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 initia	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.	_X_None	
2	Grants or contracts from	Time frame: pastX_None	36 months

any entity (if not indicated

\_X\_\_None

in item #1 above).

Royalties or licenses

4	Consulting fees	XNone	
_			
5	Payment or honoraria for	X_None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_X_None	
	testimony		
7	Support for attending meetings and/or travel	_X_None	
	9		
8	Patents planned, issued or	X_None	
	pending		
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	X_None	
	·		
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:
_X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date	e:May 18 <sup>th</sup> 2021		
You	r Name: Zhijun Wan	<u>g</u>	
Mar	nuscript Title: <u>Characteriza</u>	tion of the dynamic cha	nges in comprehensive epigenetic regulation during
<u>hun</u>	nan primary Sjögren's sy	yndrome progression	
Mar	nuscript number (if known):_	<u>ATM-21-1754</u>	
relat part to tr	ted to the content of your ries whose interests may be	nanuscript. "Related" manuscript. affected by the content of ecessarily indicate a bias.	elationships/activities/interests listed below that are eans any relation with for-profit or not-for-profit third the manuscript. Disclosure represents a commitment If you are in doubt about whether to list a
	following questions apply touscript only.	o the author's relationshi	ips/activities/interests as they relate to the <u>current</u>
to the med	ne epidemiology of hyperte lication, even if that medica	nsion, you should declare tion is not mentioned in the	defined broadly. For example, if your manuscript pertains all relationships with manufacturers of antihypertensive the manuscript.  In this manuscript without time limit. For all other items,
		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	X 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

Grants or contracts from

in item #1 above).

Royalties or licenses

any entity (if not indicated

\_X\_None

4	Consulting fees	XNone	
_			
5	Payment or honoraria for	X_None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_X_None	
	testimony		
7	Support for attending meetings and/or travel	_X_None	
	9		
8	Patents planned, issued or	X_None	
	pending		
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	X_None	
	·		
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:
_X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date	e:May 18 <sup>th</sup> 2021		
You	r Name: Lingyan Zhe	eng	
Mar	uscript Title: <u>Characteriza</u>	tion of the dynamic cha	nges in comprehensive epigenetic regulation during
<u>hun</u>	nan primary Sjögren's sy	ndrome progression	
Mar	uscript number (if known):_	<u>ATM-21-1754</u>	
In th	e interest of transparency,	we ask you to disclose all r	elationships/activities/interests listed below that are
relat	ed to the content of your n	nanuscript. "Related" m	eans any relation with for-profit or not-for-profit third
•		•	the manuscript. Disclosure represents a commitment
to tr	ansparency and does not n	ecessarily indicate a bias.	If you are in doubt about whether to list a
relat	ionship/activity/interest, it is	s preferable that you do so	D.
		o the author's relationsh	ips/activities/interests as they relate to the <u>current</u>
mar	uscript only.		
The	authari a ralatianahina/aat	i vikina (inka raaka aha vulal ha a	defined breedly. For everyla if your many portion remains
	·		defined broadly. For example, if your manuscript pertains
		·	all relationships with manufacturers of antihypertensive
mec	lication, even if that medica	uon is not mentioned in tr	ie manuscript.
In it	om #1 below report all sup	nort for the work reported	I in this manuscript without time limit. For all other items,
	time frame for disclosure is	•	in this mandscript without time limit. To all other items,
uic	diffic frame for disclosure is	the past of months.	
		Name all entities with	Specifications/Comments
		whom you have this	(e.g., if payments were made to you or to your
		relationship or indicate	institution)
		none (add rows as	
		needed)	planning of the work
		Time frame: Since the initial	planning of the work
1	All support for the present	X_None	
	manuscript (e.g., funding,		
	provision of study		
	materials, medical writing,		
	article processing charges, etc.)		
	No time limit for this item.		
	. to armo mineror this term.		
		Time frame: past	26 months
		nine iranie. pasi	30 MORUS

Grants or contracts from

in item #1 above).

Royalties or licenses

any entity (if not indicated

\_X\_None

4	Consulting fees	XNone	
_			
5	Payment or honoraria for	X_None	
	lectures, presentations, speakers bureaus,		
	manuscript writing or		
	educational events		
6	Payment for expert	_X_None	
	testimony		
7	Support for attending meetings and/or travel	_X_None	
	9		
8	Patents planned, issued or	X_None	
	pending		
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	X_None	
	·		
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:
_X_ I certify that I have answered every question and have not altered the wording of any of the questions on this form.

Date	e:May 18 <sup>th</sup> :	2021			
You	r Name: Ch	uangqi Yu			
Man	uscript Title: <u>Char</u>	acterization of t	the dynamic ch	anges in comprehensive epigenetic regulation during	_
<u>hun</u>	<u>ıan primary Sjö</u>	gren's syndrome	e progression		
Man	uscript number (if	known): <u>ATM-21-</u>	<u>1754</u>		
	•			relationships/activities/interests listed below that are	
				neans any relation with for-profit or not-for-profit third	
•		-	-	f the manuscript. Disclosure represents a commitment  If you are in doubt about whether to list a	
	ionship/activity/int	•		•	
TCIAL	ionship/activity/int	crest, it is preferai	ole that you do s	0.	
The	following guestion	s apply to the aut	hor's relationsh	nips/activities/interests as they relate to the current	
	uscript only.	11.3		·	
The	author's relation	ships/activities/int	erests should be	defined broadly. For example, if your manuscript pertains	
				all relationships with manufacturers of antihypertensive	
med	lication, even if tha	t medication is no	t mentioned in t	ne manuscript.	
	ua I I			rear en	
			•	d in this manuscript without time limit. For all other items	,
uiei	time frame for disc	losure is the past	30 MONUS.		
		Name a	ll entities with	Specifications/Comments	
		•	ou have this	(e.g., if payments were made to you or to your	
			ship or indicate	institution)	
		needed)	dd rows as		
		·		I planning of the work	
1	All support for the				
1	manuscript (e.g., fu		WIC .		
	provision of study				
	materials, medical v	vriting,			
	article processing c	harges,			
	etc.)				
	No time limit for th	s item.			
			<del>-</del>		
2	Grants or contracts	from _X_No	Time frame: pas	as months	
_	any entity (if not inc		л по		

in item #1 above).

Royalties or licenses

4	Consulting fees	X_None	
5	Payment or honoraria for	XNone	
	lectures, presentations,		
	speakers bureaus, manuscript writing or		
	educational events		
6	Payment for expert	X_None	
	testimony		
7	Support for attending meetings and/or travel	_X_None	
	mootings and of traver		
8	Patents planned, issued or	X_None	
	pending		
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	XNone	
12	Receipt of equipment,	X_None	
	materials, drugs, medical		
	writing, gifts or other services		
13	Other financial or non-	XNone	
	financial interests		

None.			

Please place an "X" next to the following statement to indicate your agreement:					
_X_ I certify that I have answered every question and have not altered the wording of any of the questions on thi form.					