Dat	te:Nov. 12th, 2021							
Υοι	ır Name: Ting War							
Ma	Manuscript Title: Vitamin D deficiency inhibits microRNA-196b-5p which regulates ovarian granulosa cell hormone synthesis, proliferation, and apoptosis by targeting RDX and LRRC17							
syn	thesis, proliferation, and ap	ooptosis by targeting RDX a	and LRRC17					
Ma	nuscript number (if known)	·						
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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).	X None						
3	Royalties or licenses	XNone						
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	X _	_None	
	testimony			
7	Support for attending meetings and/or travel	x_	_None	
8	Patents planned, issued or	x _	_None	
	pending			
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9	Participation on a Data	x_	_None	
	Safety Monitoring Board or Advisory Board			
10	Leadership or fiduciary role		Nana	
10	in other board, society,	X_	None	
	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-	Х	None	
13	financial interests	^_	_None	
	Tillaricial life ests			
Г	ease summarize the above o	onflict (of interest in the fo	ollowing box:
Ple	ease place an "X" next to the	e follow	ing statement to in	ndicate your agreement:

Date: Nov. 12th, 2021

Your Name: Huiting Sun Manuscript Title: Vitamin D deficiency inhibits microRNA-196b-5p which regulates ovarian granule synthesis, proliferation, and apoptosis by targeting RDX and LRRC17 Manuscript number (if known): In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below	osa cell hormone
synthesis, proliferation, and apoptosis by targeting RDX and LRRC17 Manuscript number (if known):	
Manuscript number (if known):	
related to the content of your manuscript. "Related" means any relation with for-profit or not-for-properties whose interests may be affected by the content of the manuscript. Disclosure represents a content 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 granuscript only. The author's relationships/activities/interests should be defined broadly. For example, if your manuscript to the epidemiology of hypertension, you should declare all relationships with manufacturers of antimedication, 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 the time frame for disclosure is the past 36 months.	rofit third commitment current script pertains ihypertensive
the time frame for disclosure is the past 30 months.	
Name all entities with Specifications/Comments	
whom you have this (e.g., if payments were made to you or to you	r
relationship or indicate institution)	
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needed) Time frame: Since the initial planning of the work	
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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 Z Grants or contracts from any entity (if not indicated in item #1 above).	

5	Payment or honoraria for lectures, presentations,	X_	None	
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	X _	_None	
	testimony			
7	Support for attending meetings and/or travel	x_	_None	
8	Patents planned, issued or	x _	_None	
	pending			
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9	Participation on a Data	x_	_None	
	Safety Monitoring Board or Advisory Board			
10	Leadership or fiduciary role		Nana	
10	in other board, society,	X_	None	
	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-	Х	None	
13	financial interests	^_	_None	
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Г	ease summarize the above o	onflict (of interest in the fo	ollowing box:
Ple	ease place an "X" next to the	e follow	ing statement to in	ndicate your agreement:

Dat	e: <u>Nov. 12th, 2021</u>							
You	ır Name: Zhilei Ma	10						
Ma	Wanuscript Title: Vitamin D deficiency inhibits microRNA-196b-5p which regulates ovarian granulosa cell hormone synthesis, proliferation, and apoptosis by targeting RDX and LRRC17							
syn	thesis, proliferation, and ap	ooptosis by targeting RDX a	and LRRC17					
Ma	nuscript number (if known)	:						
rela parrela to t rela The man	ited to the content of your ties whose interests may be ransparency and does not entionship/activity/interest, of following questions apply nuscript only. author's relationships/act he epidemiology of hypertodication, even if that medication.	manuscript. "Related" mede affected by the content of necessarily indicate a bias. It is preferable that you do to the author's relationshi ivities/interests should be ension, you should declare eation is not mentioned in the poort for the work reported.	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertainally relationships with manufacturers of antihypertensives.	ins ve				
		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					
	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					
	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 lectures, presentations,	X_	None	
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	X _	_None	
	testimony			
7	Support for attending meetings and/or travel	x_	_None	
8	Patents planned, issued or	x _	_None	
	pending			
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9	Participation on a Data	x_	_None	
	Safety Monitoring Board or Advisory Board			
10	Leadership or fiduciary role		Nana	
10	in other board, society,	X_	None	
	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-	Х	None	
13	financial interests	^_	_None	
	Tillaricial interests			
Г	ease summarize the above o	onflict (of interest in the fo	ollowing box:
Ple	ease place an "X" next to the	e follow	ing statement to in	ndicate your agreement:

Dat	e:Nov. 12th, 2021			
<u>You</u>	r Name: Lina Zhar	ng		
Mai	nuscript Title: Vitamin D	deficiency inhibits microR	NA-196b-5p which regulates ovarian granulosa cell hor	mone
synt	thesis, proliferation, and ap	ooptosis by targeting RDX a	and LRRC17	
Mai	nuscript number (if known)	:		
rela part to t rela The man	ted to the content of your ties whose interests may be ransparency and does not a tionship/activity/interest, following questions apply nuscript only. author's relationships/act he epidemiology of hypertodication, even if that medication.	manuscript. "Related" means affected by the content of the author's relationship in the content of the content	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertainally relationships with manufacturers of antihypertensives.	ins ve
		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	nlanning of the work	
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	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	
	Grants or contracts from any entity (if not indicated in item #1 above).	X None		
	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	X _	_None	
	testimony			
7	Support for attending meetings and/or travel	x_	_None	
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		Nana	
10	in other board, society,	X_	None	
	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-	Х	None	
13	financial interests	^_	_None	
	Tillaricial interests			
Г	ease summarize the above o	onflict (of interest in the fo	ollowing box:
Ple	ease place an "X" next to the	e follow	ing statement to in	ndicate your agreement:

Dat	e:Nov. 12th, 2021			
<u> Υοι</u>	ır Name: Xia Chen			
Ma	nuscript Title: Vitamin D	deficiency inhibits microR	NA-196b-5p which regulates ovarian granulosa cell hor	mone
syn	thesis, proliferation, and ap	ooptosis by targeting RDX a	and LRRC17	
Ma	nuscript number (if known)	:		
rela par to	ated to the content of your ties whose interests may be transparency and does not entionship/activity/interest, of following questions apply nuscript only. I author's relationships/active epidemiology of hypertodication, even if that medication.	manuscript. "Related" means affected by the content of the author's relationship in the content of the content	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript perta all relationships with manufacturers of antihypertensi	nins ve
		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).	X None		
3	Royalties or licenses	XNone		
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	X _	_None	
	testimony			
7	Support for attending meetings and/or travel	x_	_None	
8	Patents planned, issued or	x _	_None	
	pending			
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9	Participation on a Data	x_	_None	
	Safety Monitoring Board or Advisory Board			
10	Leadership or fiduciary role		Nana	
10	in other board, society,	X_	None	
	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-	Х	None	
13	financial interests	^_	_None	
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Г	ease summarize the above o	onflict (of interest in the fo	ollowing box:
Ple	ease place an "X" next to the	e follow	ing statement to in	ndicate your agreement:

Da	te: <u>Nov. 12th, 2021</u>			
Yo	ur Name: Yichao Sl	<u>ni</u>		
Ma	anuscript Title: Vitamin D	deficiency inhibits microf	RNA-196b-5p which regulates ovarian granulosa cell horm	ıone
syı	nthesis, proliferation, and a	poptosis by targeting RDX	and LRRC17	
Ma	anuscript number (if known):		
rel pa to rel Th ma	ated to the content of your rties whose interests may b transparency and does not ationship/activity/interest, e following questions apply anuscript only. e author's relationships/act	manuscript. "Related" mee affected by the content of the author's relationsh divities/interests should be ension, you should declare	ips/activities/interests as they relate to the <u>current</u> e <u>defined broadly</u> . For example, if your manuscript pertain e all relationships with manufacturers of antihypertensive	
	item #1 below, report all su e time frame for disclosure i		ed in this manuscript without time limit. For all other iter	ns,
		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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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		
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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 lectures, presentations,	X_	None	
	speakers bureaus,			
	manuscript writing or			
	educational events			
6	Payment for expert	X _	_None	
	testimony			
7	Support for attending meetings and/or travel	x_	_None	
8	Patents planned, issued or	x _	_None	
	pending			
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9	Participation on a Data	x_	_None	
	Safety Monitoring Board or Advisory Board			
10	Leadership or fiduciary role		Nana	
10	in other board, society,	X_	None	
	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-	Х	None	
13	financial interests	^_	_None	
	Tillaricial interests			
Г	ease summarize the above o	onflict (of interest in the fo	ollowing box:
Ple	ease place an "X" next to the	e follow	ing statement to in	ndicate your agreement:

Date: Nov. 12th, 2021

Yo	ur Name: Yuwei Sh	ang		
Ma	anuscript Title: Vitamin D	deficiency inhibits microR	NA-196b-5p which regulates ovarian granulosa cell horm	one
			and LRRC17	
Ma	anuscript number (if known)):		
rel pa to rel Th ma	ated to the content of your rties whose interests may be transparency and does not ationship/activity/interest, e following questions apply anuscript only. e author's relationships/act the epidemiology of hypertedication, even if that medications	manuscript. "Related" me e affected by the content on necessarily indicate a bias. it is preferable that you do to the author's relationship ivities/interests should be ension, you should declare cation is not mentioned in apport for the work reported.	ps/activities/interests as they relate to the <u>current</u> <u>defined broadly</u> . For example, if your manuscript pertain all relationships with manufacturers of antihypertensive	
		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	,	
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		Time frame: Since the initia	I 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	X None		
_	any entity (if not indicated 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	x _	_None	
	testimony			
7	Support for attending meetings and/or travel	x_	_None	
8	Patents planned, issued or	X _	_None	
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9	Participation on a Data	X_	None	
	Safety Monitoring Board or Advisory Board			
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10	Leadership or fiduciary role in other board, society,	X_	None	
	committee or advocacy			
	group, paid or unpaid			
11	Stock or stock options	Х	None	
				
12	Receipt of equipment,	X _	_None	
	materials, drugs, medical			
	writing, gifts or other			
	services			
13	Other financial or non-	X_	None	
	financial interests			
	ease summarize the above co	onflict (of interest in the fo	llowing box:
Ple	ease place an "X" next to the	follow	ing statement to ir	ndicate your agreement: