

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

Identifying information.

The work under consideration for publication.

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Intellectual Property.

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

Relationships not covered above.

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

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

patent

Papademetriou 1



Section 1.	Identifying Inform	nation							
Given Name (First Name) Vasilios		2. Surname (Last Name) Papademetriou	3. Date 08-May-2017						
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Srinivasan Beddhu						
Effects of intensi	5. Manuscript Title Effects of intensive systolic blood pressure control on kidney and cardiovascular outcomes in those without kidney disease; a secondary analysis of a randomized trial								
•	ntifying Number (if you kr								
			_						
Section 2.	The Work Under Co	onsideration for Public	cation						
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes Yes									
Section 3.									
Section 5.	Relevant financial	activities outside the s	ubmitted work.						
of compensation) with entities as descri	bed in the instructions. Us	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.						
Are there any rel	evant conflicts of intere	est? Yes ✓ No							
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Section 4.	Intellectual Proper	ty Patents & Copyric	ghts						
Do you have any	Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo								

Papademetriou 2



Section 5. Relationships not covered above
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Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. has nothing to disclose.

Evaluation and Feedback

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Papademetriou 3



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Craven 1



Section 1.	Identifying Inform	ation						
1. Given Name (Fii Timothy	rst Name)	2. Surnar Craven	ne (Last Nam	e)		3. Date 20-April-2017	7	
4. Are you the cor	responding author?	Yes	√ No	-	Corresponding Author's Name Srinivasan Beddhu			
5. Manuscript Title Effects of intensive systolic blood pressure control on kidney and cardiovascular outcomes in those without kidney disease; a secondary analysis of a randomized trial								;
6. Manuscript Ider Annals M16-296	ntifying Number (if you kn б	ow it)						
Section 2.								
Section 2.	The Work Under Co	onsidera	tion for Pu	blication				
	ctitution at any time recei ubmitted work (including etc.)?) for
Are there any rel	evant conflicts of intere	st? ✓ `	res N	lo				
	out the appropriate info be removed by pressing			have more thar	one entity	y press the "ADD" b	outton to add a re	ow.
Name of Institut	ion/Company	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments		
National Institutes of Blood Institute (NIH/N	Health - Heart, Lung, and NHLBI)	✓						
	Health - Institute of nd Kidney Diseases (NIH/	✓						
Section 3.	Relevant financial	activities	outside tl	he submitted	work.			
of compensation clicking the "Add	the appropriate boxes in a) with entities as descri I +" box. You should rep evant conflicts of intere	bed in the ort relatio	instructions	s. Use one line fo were present d	or each ent	ity; add as many lir	nes as you need l	
Soction 4								
Section 4.	Intellectual Proper	ty Pate	nts & Cop	yrights				
Do you have any	patents, whether planr	ned, pendi	ng or issued	d, broadly releva	nt to the w	vork? Yes	✓ No	

Craven 2



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	rts grants from National Institutes of Health - Heart, Lung, and Blood Institute (NIH/NHLBI), grants from es of Health - Institute of Diabetes, Digestive and Kidney Diseases (NIH/NIDDK), during the conduct of the							

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Cheung 1



Section 1.	Identifying Inform	nation						
1. Given Name (Fi Alfred	rst Name)	2. Surname (Last Nam Cheung	e)	3. Date 12-July-20)17			
4. Are you the cor	responding author?	Yes ✓ No	Corresponding	g Author's Name				
5. Manuscript Title Effects of intensive systolic blood pressure control on kidney and cardiovascular outcomes in those without kidney disease								
6. Manuscript Idei	ntifying Number (if you kr	now it)						
Section 2.	The Work Under C	onsideration for Pu	hlisation					
any aspect of the s statistical analysis, Are there any rel If yes, please fill o Excess rows can Name of Institut	ubmitted work (including etc.)? evant conflicts of intereptate information the appropriate information pressing the conflict of the conflict o	g but not limited to grant est? Yes Normation below. If you g the "X" button.	s, data monitoring books	overnment, commercial, pripard, study design, manusciane entity press the "ADE ther Comments	cript preparation,			
Section 3.	Relevant financial	activities outside t	he submitted wo	ork.				
of compensation clicking the "Adc Are there any rel) with entities as descr	ibed in the instruction port relationships that	s. Use one line for e were present dur	financial relationships (each entity; add as many ing the 36 months prio	y lines as you need by			
Section 4.	Intellectual Prope	rty Patents & Cop	yrights					
Do you have any	patents, whether plan	ned, pending or issue	d, broadly relevant	to the work? Yes	√ No			

Cheung 2



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Dr. Cheung repo	orts grants from National Institutes of Health, during the conduct of the study; .							

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Cheung 3



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Rocco 1



Section 1. Identifying Inform	mation							
1. Given Name (First Name) Michael	2. Surname (Last Name) Rocco	3. Date 17-July-2017						
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name						
5. Manuscript Title Effects of intensive systolic blood press	sure control on kidney and	cardiovascular outcomes in those without kidney disease						
6. Manuscript Identifying Number (if you k M16-2966	now it)							
Section 2. The Work Under C	Consideration for Public	cation						
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Section 3. Relevant financia	activities outside the s	submitted work.						
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo								
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Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo								

Rocco 2



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Dr. Rocco has nothing to disclose.

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Townsend 1



Section 1.	Identifying Inform	ation						
1. Given Name (Fi Raymond	rst Name)	2. Surname (Last Name Townsend	2)	3. Date 05-July-2017				
4. Are you the corresponding author?		☐ Yes ✓ No	Corresponding Srinivasan Be	g Author's Name ddhu				
5. Manuscript Title Effects of intensive systolic blood pressure control on kidney and cardiovascular outcomes in those without kidney disease								
6. Manuscript Identifying Number (if you know it) M16-2966								
	ı							
Section 2.	The Work Under Co	onsideration for Pu	blication					
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	ubmitted work (including etc.)? evant conflicts of intere	but not limited to grants est? Yes Normation below. If you	s, data monitoring bo	vernment, commercial, private foundation, etc.) for lard, study design, manuscript preparation, see entity press the "ADD" button to add a row.				
Name of Institut	ion/Company	Grant? Personal Fees?	Non-Financial Ot	ther? Comments				
NIH		✓		Parent grant of the reported study				
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Section 3.	Relevant financial	activities outside th	e submitted wo	rk.				
of compensation clicking the "Add Are there any rel) with entities as descril +" box. You should rep evant conflicts of intere	bed in the instructions port relationships that v est? Yes √ N	. Use one line for ea were present duri i o	financial relationships (regardless of amount ach entity; add as many lines as you need by ng the 36 months prior to publication .				
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Royalties: Funds are coming in to you or your institution due to your patent



	l						
Section 1.	Identifying Inform	nation					
1. Given Name (Fi Anjay	rst Name)	2. Surnam Rastogi	2. Surname (Last Name) 3. Date Rastogi 05-July-2017				
4. Are you the cor	responding author?	✓ Yes	No				
5. Manuscript Title "Effects of intens		sure contro	l on kidne	y and cardiovascu	ular outco	omes in those without kidney disea	se
6. Manuscript Ider	ntifying Number (if you k	now it)					
Section 2.	The Work Under C	onsiderati	ion for P	ublication			
any aspect of the s statistical analysis,	ubmitted work (includin	g but not limi		nts, data monitoring	-	ent, commercial, private foundation, etc udy design, manuscript preparation,	c.) for
Section 3.	Relevant financial	activities	outside	the submitted	work.		
of compensation clicking the "Add) with entities as descr	ribed in the port relation	instruction nships tha	ns. Use one line fo	or each er	cial relationships (regardless of amontity; add as many lines as you need a months prior to publication.	by l
	out the appropriate inf			NO			
Name of Entity		Grant?	Personal Fees	Non-Financial Support?	Other?	Comments	
Cubist		✓	✓			Speaker, Clinical trial support	
resenius Medical car	re		✓		✓	Speaker, advisory board	
Medscape			✓				
Relypsa		✓	√	✓		Speaker, advisory board, travel expanses	
Sanofi		✓	√			Speaker, Research support/clinical trials	
Kadmon		✓			√	Advisory board/consultant, clincal trial support	



Name of Entity	Grant?	Personal Fees	Non-Financial Support?	Other?	Comments		
AMAG	✓				Research support/clinical trials		
Amgen	✓				Research support/clinical trials		
Astra Zeneca	✓		\checkmark		Research support/clinical trials		
Bayer	✓		✓		Research support/clinical trials		
Genzyme	✓				Research support/clinical trials		
GSK	✓				Research support/clinical trials		
Omerus	✓				Research support/clinical trials		
Otsuka	✓				Research support/clinical trials		
Overture	✓				Research support/clinical trials		
Quesctor	✓				Research support/clinical trials		
Sandoz	✓				Research support/clinical trials		
VPI	✓				Research support/clinical trials		
SPRINT study	✓				Research support/clinical trials		
Janssen				√	Speaker		
Section 4. Intellectual Property Patents & Copyrights Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume No							
Section 5. Relationships not c	overed	above					
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?							
Yes, the following relationships/conditions/circumstances are present (explain below): No other relationships/conditions/circumstances that present a potential conflict of interest							
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.							



Section 6.

Disclosure Statement

Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Rastogi reports grants and personal fees from Cubist, personal fees and other from Fresenius Medical care, personal fees from Medscape, grants, personal fees and non-financial support from Relypsa, grants and personal fees from Sanofi, grants and other from Kadmon, grants from AMAG, grants from Amgen, grants and non-financial support from Astra Zeneca, grants and non-financial support from Bayer, grants from Genzyme, grants from GSK, grants from Omerus, grants from Otsuka, grants from Overture, grants from Quesctor, grants from Sandoz, grants from VPI, grants from SPRINT study, other from Janssen, outside the submitted work;

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.



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Cohen 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Debbie	rst Name)	2. Surname (Last Name) Cohen	3. Date 05-July-2017	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name	
5. Manuscript Title Effects of intensi		ure control on kidney and	cardiovascular outcomes in those without kidney disease	
6. Manuscript lder M16-2966	ntifying Number (if you kr	now it)		
	ı			
Section 2.	The Work Under Co	onsideration for Public	cation	
any aspect of the s statistical analysis,	ubmitted work (including	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,	
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes Vo				
Section 4.	Intellectual Proper	rty Patents & Copyric	ghts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Cohen 2



Section 5. Polationships not sovered above	
Relationships not covered above	
Are there other relationships or activities that readers could perceive to have influenced potentially influencing, what you wrote in the submitted work?	d, or that give the appearance of
Yes, the following relationships/conditions/circumstances are present (explain belo	w):
✓ No other relationships/conditions/circumstances that present a potential conflict of	finterest
At the time of manuscript acceptance, journals will ask authors to confirm and, if neces On occasion, journals may ask authors to disclose further information about reported re	• •
Section 6. Disclosure Statement	
Based on the above disclosures, this form will automatically generate a disclosure state below.	ment, which will appear in the box
Dr. Cohen has nothing to disclose.	

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Cohen 3



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

Freedman 1



Section 1. Identifying Inform	ation			
1. Given Name (First Name) Barry	2. Surname (Last Name) Freedman		3. Date 05-July-2017	
4. Are you the corresponding author?	Yes ✓ No	Corresponding Autho		
5. Manuscript Title Effects of intensive systolic blood pressure control on kidney and cardiovascular outcomes in those without kidney disease a secondary analysis of a randomized trial				
6. Manuscript Identifying Number (if you known M16-2966	ow it)			
Section 2. The Work Under Co	nsideration for Publi	cation		
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Ves No If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row.				
Excess rows can be removed by pressing			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Name of Institution/Company	Grant	n-Financial Other?	Comments	
NIH	✓		SPRINT NIH Grant	_
Section 3. Relevant financial a	activities outside the	submitted work.		
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest?				
Name of Entity	Grant	n-Financial Support?	Comments	
Novartis Phamaceuticals	✓		Investigator-initiated research project	
onis Pharmaceuticals			Consultant	
Astra Zeneca Pharmaceuticals	✓		Consultant	

Freedman 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo
Section 5. Relationships not covered above
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Dr. Freedman reports grants from NIH, during the conduct of the study; grants from Novartis Phamaceuticals, personal fees from Ionis Pharmaceuticals, personal fees from AstraZeneca Pharmaceuticals, outside the submitted work; .

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Freedman 3



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Toto 1



Section 1. Identifying Inform	ation			
identifying inform				
1. Given Name (First Name)	2. Surname (Last Name)		3. Date	
Robert	Toto		05-July-2017	_
4. Are you the corresponding author?	Yes ✓ No	Corresponding Aut	hor's Name	
, ,		Srinivasan Beddh		
5. Manuscript Title				_
Effects of intensive systolic blood pressu	ure control on kidney and	cardiovascular outo	omes in those without kidney disease	
6. Manuscript Identifying Number (if you kn M16-2966	ow it)			
		_		
Section 2. The Work Under Co	onsideration for Public	cation		
Did you or your institution at any time recei any aspect of the submitted work (including				for
statistical analysis, etc.)? Are there any relevant conflicts of intere	est? Yes ✓ No			
The there any relevant commets of interest	165			
Sostion 2				
Section 3. Relevant financial	activities outside the	submitted work.		
Place a check in the appropriate boxes i	n the table to indicate wh	ether you have fina	ncial relationships (regardless of amour	nt
of compensation) with entities as descri	bed in the instructions. Us	se one line for each	entity; add as many lines as you need b	
clicking the "Add +" box. You should rep		re present during t	he 36 months prior to publication.	
Are there any relevant conflicts of intere				
If yes, please fill out the appropriate info	ormation below.			
Name of Bullion	Grant? Personal No	n-Financial	2	
Name of Entity	Fees? S	n-Financial upport	Comments	
Amgen			Chairman, Steering Committee	
Boehringer-Ingelheim			Consultant	
Reata Pharmaceuticals			Consultant	
Novo Nordisk			Consultant	
Bayer Pharmaceuticals			Consultant	
Astra-Zeneca			Consultant	

Toto 2



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Evaluation and Feedback

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Toto 3



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Rahman 1



Section 1. Identifying Inform	nation			
Given Name (First Name) Mahboob	2. Surname (Last Name) Rahman	3. Date 07-July-2017		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Beddhu		
5. Manuscript Title SPRINT effects on non CKD participante				
6. Manuscript Identifying Number (if you kr	now it)			
		_		
Section 2. The Work Under C				
The Work Under Co	onsideration for Public	tation		
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?				
Are there any relevant conflicts of intered If yes, please fill out the appropriate info		re more than one entity press the "ADD" button to add a row.		
Excess rows can be removed by pressin				
Name of Institution/Company Grant Personal Fees Non-Financial Support Comments				
NIH	✓			
Section 3. Relevant financial	activities outside the s	submitted work		
Relevant financial activities outside the submitted work.				
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Are there any relevant conflicts of interest? Ves No				
If yes, please fill out the appropriate information below.				
Name of Entity	Grant'	n-Financial Other? Comments		
Bayer	Fees S	upport!		

Rahman 2



Section 4	
Section 4. Intellectual Property Patents & Copyrights	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes 🗸 N	No
Section 5. Relationships not covered above	
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Dr. Rahman reports grants from NIH, during the conduct of the study; grants from Bayer, outside the submitted	ed work; .

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

Whelton 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Paul	rst Name)	2. Surname (Last Name) Whelton	3. Date 20-April-2017	
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Srinivasan Beddhu	
5. Manuscript Title Effects of intensive systolic blood pressure control on kidney and cardiovascular outcomes in those without kidney disease; a secondary analysis of a randomized trial				
	ntifying Number (if you kr			
Section 2.	The Work Under Co	onsideration for Public	ation	
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes Vo				
Section 3.	Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes You				
Section 4.	Intellectual Proper	rty Patents & Copyrig	hts	
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo				

Whelton 2



Section 5. Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below): No other relationships/conditions/circumstances that present a potential conflict of interest
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.
Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.
Dr. Whelton has nothing to disclose.

Evaluation and Feedback

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Whelton 3



Instructions

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

Greene 1



Section 1. Identifying Inf	ormation				
Given Name (First Name) Tom	2. Surname (Last Name) Greene	3. Date 27-July-2017			
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Srinivasan Beddhu			
5. Manuscript Title Effects of intensive systolic blood p	5. Manuscript Title Effects of intensive systolic blood pressure control on kidney and cardiovascular outcomes in those without kidney disease				
6. Manuscript Identifying Number (if yo M16-2966	ou know it)				
Section 2. The Work Unde	er Consideration for Public	cation			
		a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,			
Are there any relevant conflicts of in	nterest? Yes ✓ No				
Section 2					
Section 3. Relevant finan	cial activities outside the s	ubmitted work.			
of compensation) with entities as d	escribed in the instructions. Us	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.			
Are there any relevant conflicts of in					
If yes, please fill out the appropriate	e information below.				
Name of Entity	Grant? Personal Noi	n-Financial other? Comments			
anssen pharmaceuticals		consulting arrangement			
ofiszer		consulting arrangement			
Continu 4					
Section 4. Intellectual Pro	perty Patents & Copyric	yhts			
Do you have any patents, whether	planned, pending or issued, br	roadly relevant to the work? Yes V No			

Greene 2



Section 5.	
Section 3.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
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Section 6.	Disclosure Statement
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Dr. Greene repoi	rts personal fees from janssen pharmaceuticals, personal fees from pfiszer, outside the submitted work; .

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Greene 3



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

Beddhu 1



Section 1. Identifying Information	ation				
1. Given Name (First Name) Srinivasan	2. Surname (Last Name) Beddhu		3. Date 05-May-2017		
4. Are you the corresponding author? ✓ Yes					
5. Manuscript Title Effects of intensive systolic blood pressu a secondary analysis of a randomized tri	•	cardiovascular outco	mes in those without kidney disease;		
6. Manuscript Identifying Number (if you known Annals M16-2966	ow it)	_			
Section 2. The Work Under Co					
The Work Under Co	nsideration for Publi	cation			
Did you or your institution at any time received any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interest of the state of t	but not limited to grants, da	ata monitoring board, stu	udy design, manuscript preparation,		
If yes, please fill out the appropriate info Excess rows can be removed by pressing		ve more than one enti	ty press the ADD button to add a row.		
Name of Institution/Company	Grant•	n-Financial Other?	Comments		
NIH	✓				
Section 3. Polovant financial s					
Relevant financial a	ctivities outside the	submitted work.			
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should report there any relevant conflicts of interest fyes, please fill out the appropriate info	oed in the instructions. Use ort relationships that we st?	se one line for each er	ntity; add as many lines as you need by		
Name of Entity	Grant'	n-Financial Support?	Comments		
Bayer	✓				
AbbVie	✓				

Beddhu 2



Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Volume
Section 5. Relationships not covered above
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Dr. Beddhu reports grants from NIH, during the conduct of the study; grants from Bayer, grants from AbbVie, outside the submitted work; .

Evaluation and Feedback

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Section 1. Identifying information	nation
1. Given Name (First Name) Udayan	2. Sumame (Last Name) 3. Date Bhatt 23-April-2017
4. Are you the corresponding author?	☐ Yes
5. Manuscript Title Effects of intensive systolic blood pressure a secondary analysis of a randomized trial	 Manuscript Title Effects of intensive systolic blood pressure control on kidney and cardiovascular outcomes in those without kidney disease; a secondary analysis of a randomized trial
6. Manuscript Identifying Number (if you know it) Annals M16-2966	now it)
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Section 5: Relevant financial	Relevant financial activities outside the submitted work.
Place a check in the appropriate boxes in the formpensation) with entities as described clicking the "Add +" box. You should report Are there any relevant conflicts of interest?	Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication . Are there any relevant conflicts of interest? Yes No
Section 4. Intellectual Proper	Intellectual Property Patents & Copyrights
Do you have any patents, whether plann	Do you have any patents, whether planned, pending or issued, broadly relevant to the work? 🔲 Yes 📝 No



Dr. Bhatt has nothing to disclose.	D
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.	~ 다
Section 6. Disclosure Statement	LA.
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements On occasion, journals may ask authors to disclose further information about reported relationships.	o ≥
\square Yes, the following relationships/conditions/circumstances are present (explain below): $ ot \square$ No other relationships/conditions/circumstances that present a potential conflict of interest	
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Section 5. Relationships not covered above	

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patent

Hawfield 1



Section 1.	Identifying Inform	nation		
1. Given Name (Fi Amret	rst Name)	2. Surname (Last Name) Hawfield	3. Date 21-April-2017	
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Srinivasan Beddhu	
		-	cardiovascular outcomes in those without kidney disease;	
6. Manuscript Ider Annals M16-296	ntifying Number (if you kr 6	now it)		
Section 2.	The Work Under Co	onsideration for Public	ation	
any aspect of the s statistical analysis,	ubmitted work (including	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,	
Section 3.				
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Do you have any		.,	oadly relevant to the work? Yes Vo	

Hawfield 2



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Dr. Hawfield has nothing to disclose.

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

Killeen 1



Section 1. Identifying Information	ation			
Given Name (First Name) Anthony	2. Surname (Last Na Killeen	nme)		3. Date 05-July-2017
4. Are you the corresponding author?	☐ Yes ✓ No	Correspon	ding Author	's Name
5. Manuscript Title Effects of intensive systolic blood pressu	re control on kidne	y and cardiovascu	ılar outcom	nes in those without kidney disease
6. Manuscript Identifying Number (if you known M16-2966	ow it)			
Section 2. The Work Under Co	nsideration for I	Publication		
Did you or your institution at any time received any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of interest of the submitted work (including statistical analysis, etc.)? If yes, please fill out the appropriate information in the submitted work (including statistical analysis, etc.)? Name of Institution/Company	but not limited to grass st? Yes rmation below. If yo	nts, data monitoring No Du have more than	g board, stud	dy design, manuscript preparation,
Name of institution/Company	Fees?	Support?	Otner	Comments
NIH	✓		r	The laboratory measurements were performed with grants from NHLBI and NIDDK
Section 3. Relevant financial a	ctivities outside	the submitted	work.	
Place a check in the appropriate boxes in of compensation) with entities as described clicking the "Add +" box. You should report there any relevant conflicts of interests.	oed in the instruction ort relationships the st? Yes	ons. Use one line f	or each ent	ity; add as many lines as you need by
If yes, please fill out the appropriate info	rmation below.			
Name of Entity	Grant? Persona Fees?	Non-Financial Support?	Other?	Comments
Roche Diagnostics				peaker honorarium unrelated to this

Killeen 2



Soutien A
Section 4. Intellectual Property Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes V
Section 5. Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
✓ No other relationships/conditions/circumstances that present a potential conflict of interest
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Section 6. Disclosure Statement
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Dr. Killeen reports grants from NIH, during the conduct of the study; personal fees from Roche Diagnostics, outside the submitted work; .

Evaluation and Feedback

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Killeen 3



Instructions

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

Kimmel 1



Section 1.	Identifying Inform	nation			
1. Given Name (Fi Paul	rst Name)	2. Surname (Last Name) Kimmel	3. Date 28-April-2017		
4. Are you the cor	responding author?	Yes ✓ No	Corresponding Author's Name Srinivasan Beddhu		
			cardiovascular outcomes in those without kidney disease;		
6. Manuscript Ide Annals M16-296	ntifying Number (if you kr 6	now it)			
			-		
Section 2.	The Work Under Co	onsideration for Public	ation		
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No					
Section 3.	Relevant financial	activities outside the s	ubmitted work.		
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·					
Section 4.	Intellectual Proper	rty Patents & Copyrig	hts		
Do you have any	patents, whether plan	ned, pending or issued, br	oadly relevant to the work?		

Kimmel 2



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

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

Lash 1



Section 1. Identifying Inform	nation			
1. Given Name (First Name) James	2. Surname (Last Name) Lash	3. Date 11-July-2017		
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name		
5. Manuscript Title Effects of intensive systolic blood press	ure control on kidney and	cardiovascular outcomes in those without kidney disease		
6. Manuscript Identifying Number (if you kr M16-2966	now it)	_		
Section 2. The Work Under Co	onsideration for Public	ation		
Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? Yes No				
Section 3. Relevant financial	activities outside the s	ubmitted work.		
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Section 4. Intellectual Property		l.c.		
Intellectual Proper	rty Patents & Copyrig	ints ———		
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No		

Lash 2



Section 5.			
Section 5.	Relationships not covered above		
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?			
Yes, the following relationships/conditions/circumstances are present (explain below):			
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Royalties: Funds are coming in to you or your institution due to your patent

Servilla 1



Section 1.	Identifying Inform	nation			
1. Given Name (First Name) Karen		2. Surname (Last Name) Servilla	3. Date 20-April-2017		
4. Are you the corresponding author?		Yes ✓ No	Corresponding Author's Name Srinivasan Beddhu		
			cardiovascular outcomes in those without kidney disease;		
6. Manuscript Identifying Number (if you know it) Annals M16-2966					
Section 2.	The Work Under Co	onsideration for Public	ation		
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And there any let	evant connects of intere	103 y 110			
Section 4.	Intellectual Dramer	rty Patents & Copyrig	late		
	intellectual Proper	rty Patents & Copyri <u>c</u>			
Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes Vo					

Servilla 2



Section 5. Polationships not severed above			
Relationships not covered above			
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Wall 1



Section 1.	Identifying Inform	ation				
1. Given Name (First Name) Barry		2. Surname (Last Name) Wall		3. Date 05-July-201	7	
4. Are you the corresponding author?		Yes ✓ No Corresponding Author's Name S Beddhu		Name		
5. Manuscript Title Effects of intensive systolic blood pressure control on kidney and cardiovascular outcomes in those without kidney diseas					out kidney disease"	
6. Manuscript Identifying Number (if you know it) M16-2966						
Section 2.	The Work Under Co	onsideration fo	or Publication			
any aspect of the s statistical analysis, Are there any rel If yes, please fill o	etitution at any time recei ubmitted work (including etc.)? evant conflicts of intere out the appropriate info be removed by pressing	but not limited to est? Yes ormation below.	grants, data monitori	ng board, study (design, manusci	ript preparation,
Name of Institution/Company Grant Personal Fees Non-Financial Support Comments						
NIH		√				
Section 3.	Relevant financial	activities outsi	de the submitted	d work.		
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Wall 2



Section 5.			
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