

Frederick Rivara

Disclosure Purpose: Annals of Internal Medicine Disclosure

Summary of Financial Interests

Entity	Type	Interest Held By
Eunice Kennedy Shriver National Institute of Child Health and Human Development	Grant / Contract	Self
Laura and John Arnold Foundation	Grant / Contract	Self
U.S. Department of Justice	Grant / Contract	Self

Additional Information:

1. **Are you the corresponding author?**

No.

2. **What is the Manuscript Title?**

Firearm Ownership and Storage, Suicide Risk Factors, and Cognitive Decline among Older Adults: Results from a Statewide Survey

3. **What is the Manuscript Identifying Number (if you know it)?**

M18-3698

4. **For each financial interest, you must indicate whether the interest or relationship represents:**

- o Support of the submitted work at any time, from the initial conception and planning to the present;
- o A relevant financial activity outside the submitted work that was present in the past 36 months; or
- o A relationship or activity not covered above.

a. **Eunice Kennedy Shriver National Institute of Child Health and Human Development**

i. **Which of the three apply to this relationship or activity?**

Relevant financial activity outside the submitted work (present during the past 36 months)

ii. **Comments (Optional):**

b. **Laura and John Arnold Foundation**

i. **Which of the three apply to this relationship or activity?**

Relevant financial activity outside the submitted work (present during the past 36 months)

ii. **Comments (Optional):**

c. **U.S. Department of Justice**

i. **Which of the three apply to this relationship or activity?**

Relevant financial activity outside the submitted work (present during the past 36 months)

ii. **Comments (Optional):**

5. **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?**

No.

6. **Have you disclosed in the previous steps all 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.

Certification

I certify that the information provided in this disclosure is complete and accurate, and I acknowledge that this disclosure form will be published by *Annals of Internal Medicine*.



Erin Morgan

Disclosure Purpose: Annals of Internal Medicine Disclosure

Summary of Financial Interests

I do not have any financial interests to disclose at this time.

Additional Information:

1. **Are you the corresponding author?**

Yes.

2. **What is the Manuscript Title?**

Firearm Ownership and Storage, Suicide Risk Factors, and Cognitive Decline among Older Adults: Results from a Statewide Survey

3. **What is the Manuscript Identifying Number (if you know it)?**

M18-3698

4. **For each financial interest, you must indicate whether the interest or relationship represents:**

- **Support of the submitted work at any time, from the initial conception and planning to the present;**
- **A relevant financial activity outside the submitted work that was present in the past 36 months; or**
- **A relationship or activity not covered above.**

5. **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?**

No.

6. **Have you disclosed in the previous steps all 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.

Certification

I certify that the information provided in this disclosure is complete and accurate, and I acknowledge that this disclosure form will be published by *Annals of Internal Medicine*.

Disclosure Purpose: Annals of Internal Medicine Disclosure

Summary of Financial Interests

Entity	Type	Interest Held By
City of Seattle	Grant / Contract	Other - NA
Eunice Kennedy Shriver National Institute of Child Health and Human Development	Grant / Contract	Other - NA
Laura and John Arnold Foundation	Grant / Contract	Other - NA
U.S. Department of Justice	Grant / Contract	Other - NA

Additional Information:

1. **Are you the corresponding author?**

No.

2. **What is the Manuscript Title?**

Firearm Ownership and Storage, Suicide Risk Factors, and Cognitive Decline among Older Adults: Results from a Statewide Survey

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **For each financial interest, you must indicate whether the interest or relationship represents:**

- o Support of the submitted work at any time, from the initial conception and planning to the present;
- o A relevant financial activity outside the submitted work that was present in the past 36 months; or
- o A relationship or activity not covered above.

a. **City of Seattle**

i. **Which of the three apply to this relationship or activity?**

Relevant financial activity outside the submitted work (present during the past 36 months)

ii. **Comments (Optional):**

b. **Eunice Kennedy Shriver National Institute of Child Health and Human Development**

i. **Which of the three apply to this relationship or activity?**

Relevant financial activity outside the submitted work (present during the past 36 months)

ii. **Comments (Optional):**

c. **Laura and John Arnold Foundation**

i. **Which of the three apply to this relationship or activity?**

Relevant financial activity outside the submitted work (present during the past 36 months)

ii. **Comments (Optional):**

d. **U.S. Department of Justice**

i. **Which of the three apply to this relationship or activity?**

Relevant financial activity outside the submitted work (present during the past 36 months)

ii. **Comments (Optional):**

5. **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.

- a. **Please explain below.**

The University of Washington receives some philanthropic support from time to time as "Gifts" toward firearm injury research. These are typically from grassroots organizations and individual members of the community.

6. **Have you disclosed in the previous steps all 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.

Certification

I certify that the information provided in this disclosure is complete and accurate, and I acknowledge that this disclosure form will be published by *Annals of Internal Medicine*.

Tony Gomez

Disclosure Purpose: Annals of Internal Medicine Disclosure

Summary of Financial Interests

I do not have any financial interests to disclose at this time.

Additional Information:

1. **Are you the corresponding author?**

No.

2. **What is the Manuscript Title?**

Firearm Ownership and Storage, Suicide Risk Factors, and Cognitive Decline among Older Adults: Results from a Statewide Survey

3. **What is the Manuscript Identifying Number (if you know it)?**

4. **For each financial interest, you must indicate whether the interest or relationship represents:**

- Support of the submitted work at any time, from the initial conception and planning to the present;
- A relevant financial activity outside the submitted work that was present in the past 36 months; or
- A relationship or activity not covered above.

5. **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?**

No.

6. **Have you disclosed in the previous steps all 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.

Certification

I certify that the information provided in this disclosure is complete and accurate, and I acknowledge that this disclosure form will be published by *Annals of Internal Medicine*.