| Date:10/8/2021   |
|--|
| Your Name: Anne Davidson   |
| Manuscript Title:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known): ar-21-0264.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)  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. | NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2- AR067678, and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |
|   |   |  |  |

|    |   | Time frame: past 3 | 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  | Payment or honoraria for                    | X None             |           |
|    | lectures, presentations,                    | XNONE              |           |
|    | speakers bureaus,                           |                    |           |
|    | manuscript writing or                       |                    |           |
|    | educational events                          |                    |           |
| 6  | Payment for expert                          | XNone              |           |
|    | testimony                                   |                    |           |
|    | _   |                    |           |
| 7  | Support for attending                       | XNone              |           |
|    | meetings and/or travel                      |                    |           |
|    |   |                    |           |
|    |   |                    |           |
| 8  | Patents planned, issued or                  | XNone              |           |
|    | pending                                     |                    |           |
|    |   |                    |           |
| 9  | Participation on a Data                     | XNone              |           |
|    | 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                      | X None             |           |
|    | Stock of Stock options                      |                    |           |
|    |   |                    |           |
| 12 | Receipt of equipment,                       | XNone              |           |
|    | materials, drugs, medical                   |                    |           |
|    | writing, gifts or other                     |                    |           |
|    | services                                    |                    |           |
| 13 | Other financial or non-                     | XNone              |           |
|    | 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:_ | 10/4/2021                      |  |
|--------|--------------------------------|--|
| Your N | lame: Betty Diamond            |  |
| Manus  | cript Title:_ Urine Proteomics | and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manus  | script number (if known):      | ar-21-0264.R1  |

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|   |   | Name all entities with<br>whom you have this<br>relationship or indicate<br>none (add rows as<br>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                          | XNone  |  |  |  |
|    | any entity (if not indicated                      |        |  |  |  |
|    | in item #1 above).                                |        |  |  |  |
| 3  | Royalties or licenses                             | XNone  |  |  |  |
|    |   |        |  |  |  |
|    |   |        |  |  |  |
| 4  | Consulting fees                                   | None   | Ashai Kasei; Nextcure; Biogen; ISD; Glycoera; Cyxone |  |  |
|    |   |        | Asylia; Abbvie                                       |  |  |
| _  | Daywant or banagain for                           | V None |  |  |  |
| 5  | Payment or honoraria for lectures, presentations, | XNone  |  |  |  |
|    | speakers bureaus,                                 |        |  |  |  |
|    | manuscript writing or                             |        |  |  |  |
|    | educational events                                |        |  |  |  |
| 6  | Payment for expert                                | XNone  |  |  |  |
|    | testimony   |        |  |  |  |
|    |   |        |  |  |  |
| 7  | Support for attending                             | XNone  |  |  |  |
|    | meetings and/or travel                            |        |  |  |  |
|    |   |        |  |  |  |
|    |   |        |  |  |  |
|    |   |        |  |  |  |
| 8  | Patents planned, issued or                        | XNone  |  |  |  |
|    | pending   |        |  |  |  |
|    |   |        |  |  |  |
| 9  | Participation on a Data                           | None   | BMS  |  |  |
|    | 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                            | None   | Cyteir   |  |  |
|    | Stock of Stock options                            |        | Cyten  |  |  |
|    |   |        |  |  |  |
| 12 | Receipt of equipment,                             | XNone  |  |  |  |
|    | materials, drugs, medical                         |        |  |  |  |
|    | writing, gifts or other                           |        |  |  |  |
|    | services  |        |  |  |  |
| 13 | Other financial or non-                           | XNone  |  |  |  |
|    | 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:   | 10/4/2021   |
|---------|---|
| Your Na | ne:_Arnon Arazi   |
| Manusc  | ipt Title:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manusc  | ipt number (if known): ar-21-0264.R1  |

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| 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  |
|---|--|
| NIH grants:<br>UH2-AR067676,<br>UH2-AR067677,<br>UH2-AR067681,<br>UH2-AR067685,<br>UH2-AR067688,<br>UH2-AR067689,<br>UH2-AR067690,<br>UH2-AR067691,<br>UH2-AR067694,<br>UM2-AR067694,<br>UM2-AR067678, and<br>AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project.   |
|   | relationship or indicate none (add rows as needed) Time frame: Since the initial NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2-AR067678, and |

|    |  | Time frame: past 36 months |
|----|--|----------------------------|
| 2  | Grants or contracts from                     | XNone                      |
|    | any entity (if not indicated                 |                            |
| 2  | in item #1 above).                           | V. N.                      |
| 3  | Royalties or licenses                        | XNone                      |
|    |  |                            |
| 4  | Consulting fees                              | X None                     |
| 4  | Consulting rees                              | XNotie                     |
|    |  |                            |
| 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 | XNone                      |
|    |  |                            |
|    |  |                            |
| 8  | Patents planned, issued or                   | XNone                      |
|    | pending                                      |                            |
| 9  | Participation on a Data                      | X None                     |
| 9  | Safety Monitoring Board or                   |                            |
|    | Advisory Board                               |                            |
| 10 | Leadership or fiduciary role                 | X None                     |
|    | in other board, society,                     |                            |
|    | committee or advocacy                        |                            |
| 11 | group, paid or unpaid Stock or stock options | V. None                    |
| 11 | Stock of Stock options                       | XNone                      |
|    |  |                            |
| 12 | Receipt of equipment,                        | XNone                      |
|    | materials, drugs, medical                    |                            |
|    | writing, gifts or other services             |                            |
| 13 | Other financial or non-                      | XNone                      |
|    | 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:10/4/2021   |
|--|
| Your Name:Avi Z. Rosenberg   |
| Manuscript Title:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known): ar-21-0264.R1  |

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|---|--|
| NIH grants:<br>UH2-AR067676,<br>UH2-AR067677,<br>UH2-AR067681,<br>UH2-AR067685,<br>UH2-AR067688,<br>UH2-AR067689,<br>UH2-AR067690,<br>UH2-AR067691,<br>UH2-AR067694,<br>UM2-AR067694,<br>UM2-AR067678, and<br>AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project.   |
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|    |   | 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  | Payment or honoraria for                              | XNone            |           |
|    | lectures, presentations,                              |                  |           |
|    | speakers bureaus,                                     |                  |           |
|    | manuscript writing or                                 |                  |           |
| _  | educational events                                    | V None           |           |
| 6  | Payment for expert                                    | XNone            |           |
|    | testimony   |                  |           |
| 7  | Compant for attending                                 | V. None          |           |
| 7  | Support for attending meetings and/or travel          | XNone            |           |
|    | meetings and/or traver                                |                  |           |
|    |   |                  |           |
|    |   |                  |           |
|    |   |                  |           |
| 8  | Patents planned, issued or                            | XNone            |           |
|    | pending   |                  |           |
| 0  | 5 5 .   | Y N              |           |
| 9  | Participation on a Data                               | XNone            |           |
|    | Safety Monitoring Board or<br>Advisory Board          |                  |           |
| 10 | •   | V. Nava          |           |
| 10 | Leadership or fiduciary role in other board, society, | XNone            |           |
|    | committee or advocacy                                 |                  |           |
|    | group, paid or unpaid                                 |                  |           |
| 11 | Stock or stock options                                | X None           |           |
|    | Stock of Stock options                                |                  |           |
|    |   |                  |           |
| 12 | Receipt of equipment,                                 | X None           |           |
|    | materials, drugs, medical                             |                  |           |
|    | writing, gifts or other                               |                  |           |
|    | services  |                  |           |
| 13 | Other financial or non-                               | XNone            |           |
|    | 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:_ | 10/4/2021                      |  |
|--------|--------------------------------|--|
| Your N | lame: Betty Diamond            |  |
| Manus  | cript Title:_ Urine Proteomics | and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manus  | script number (if known):      | ar-21-0264.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. | NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2-AR067678, and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |

|    | 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                                   | None   | Ashai Kasei; Nextcure; Biogen; ISD; Glycoera; Cyxone |
|    |   |        | Asylia; Abbvie                                       |
| _  | Daywant or banagain for                           | V None |  |
| 5  | Payment or honoraria for lectures, presentations, | XNone  |  |
|    | speakers bureaus,                                 |        |  |
|    | manuscript writing or                             |        |  |
|    | educational events                                |        |  |
| 6  | Payment for expert                                | XNone  |  |
|    | testimony   |        |  |
|    |   |        |  |
| 7  | Support for attending                             | XNone  |  |
|    | meetings and/or travel                            |        |  |
|    |   |        |  |
|    |   |        |  |
|    |   |        |  |
| 8  | Patents planned, issued or                        | XNone  |  |
|    | pending   |        |  |
|    |   |        |  |
| 9  | Participation on a Data                           | None   | BMS  |
|    | 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                            | None   | Cyteir   |
|    | Stock of Stock options                            |        | Cyten  |
|    |   |        |  |
| 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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| Date:10/4/2021_          |  |
|--------------------------|--|
| Your Name:               | _H. Michael Belmont, MD  |
| <br>Manuscript Title:_ ∪ | ne Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number        | f known): ar-21-0264.R1  |

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|---|---|--|--|
|   |   | 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. | NIH grants:<br>UH2-AR067676,<br>UH2-AR067677,<br>UH2-AR067681,<br>UH2-AR067685,<br>UH2-AR067688,<br>UH2-AR067689,<br>UH2-AR067690,<br>UH2-AR067691,<br>UH2-AR067694,<br>UM2-AR067678, and<br>AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |

| Time frame: past 36 months    X None   |    |                                       |        |          |
|--|----|---------------------------------------|--------|----------|
| 2 Grants or contracts from any entity (if not indicated in item #1 above).  3 Royalties or licenses  4 Consulting fees   |    |                                       |        |          |
| any entity (if not indicated in item #1 above).  Royalties or licenses  X None  4 Consulting fees  X None  5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events 6 Payment for expert testimony  7 Support for attending meetings and/or travel  8 Patents planned, issued or pending  9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  X None   |    |                                       |        | 6 months |
| in item #1 above).  Royalties or licenses  X_None  A Consulting fees  X_None  A Consulting fees  X_None  A Consulting fees  X_None  A None  Ectures, presentations, speakers bureaus, manuscript writing or educational events  A Payment for expert testimony  A Support for attending meetings and/or travel  B Patents planned, issued or pending  P Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  S Stock or stock options  X_None  X_None | 2  |                                       | XNone  |          |
| A Consulting fees  X None  A Consulting fees  X None  A Consulting fees  X None  Sequence but a consulting fees  X None  A None  Electures, presentations, speakers bureaus, manuscript writing or educational events  A Payment for expert testimony  T Support for attending meetings and/or travel  A Paticipation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  X None   |    |                                       |        |          |
| 4 Consulting fees  |    |                                       |        |          |
| 5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel 8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non-  X None  | 3  | Royalties or licenses                 | xNone  |          |
| 5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel 8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non-  X None  |    |                                       |        |          |
| 5 Payment or honoraria for lectures, presentations, speakers bureaus, manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel 8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non-  X None  | Δ  | Consulting fees                       | X None |          |
| lectures, presentations, speakers bureaus, manuscript writing or educational events  6 Payment for expert testimony  7 Support for attending meetings and/or travel  8 Patents planned, issued or pending  9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  X None   | _  | consuming rees                        |        |          |
| lectures, presentations, speakers bureaus, manuscript writing or educational events  6 Payment for expert testimony  7 Support for attending meetings and/or travel  8 Patents planned, issued or pending  9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  X None   |    |                                       |        |          |
| lectures, presentations, speakers bureaus, manuscript writing or educational events  6 Payment for expert testimony  7 Support for attending meetings and/or travel  8 Patents planned, issued or pending  9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  X None   | 5  | Payment or honoraria for              | XNone  |          |
| manuscript writing or educational events 6 Payment for expert testimony 7 Support for attending meetings and/or travel  8 Patents planned, issued or pending 9 Participation on a Data Safety Monitoring Board or Advisory Board 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid 11 Stock or stock options 12 Receipt of equipment, materials, drugs, medical writing, gifts or other services 13 Other financial or non-    X None   |    |                                       |        |          |
| educational events  Payment for expert testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Paceipt of equipment, materials, drugs, medical writing, gifts or other services  A None  X None   |    |                                       |        |          |
| Support for attending meetings and/or travel   |    |                                       |        |          |
| testimony  Support for attending meetings and/or travel  Patents planned, issued or pending  Participation on a Data Safety Monitoring Board or Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  To None  X None   |    |                                       |        |          |
| 7 Support for attending meetings and/or travel  8 Patents planned, issued or pending  9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-    X_None  | 6  |                                       | XNone  |          |
| B Patents planned, issued or pending  9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or nonXNone  |    | testimony                             |        |          |
| B Patents planned, issued or pending  9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or nonXNone  | 7  | Comment for attending                 | V Nove |          |
| pending  Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  X_None  X_None  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  X_None   | /  |                                       | xnone  |          |
| pending  Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  X_None  X_None  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  X_None   |    |                                       |        |          |
| pending  Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  X_None  X_None  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-  X_None   |    |                                       |        |          |
| 9 Participation on a Data Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-    X_None  | 8  | · · · · · · · · · · · · · · · · · · · | XNone  |          |
| Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  X_None  X_None  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or nonX_None   |    | pending                               |        |          |
| Safety Monitoring Board or Advisory Board  10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  X_None  X_None  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or nonX_None   |    | 5                                     |        |          |
| Advisory Board  Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  Stock or stock options  Receipt of equipment, materials, drugs, medical writing, gifts or other services  Other financial or non-  X_None X_None X_None   | 9  | •                                     | XNone  |          |
| 10 Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or non-    X_None   |    |                                       |        |          |
| in other board, society, committee or advocacy group, paid or unpaid  11 Stock or stock options  X_None  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or nonX_None  | 10 |                                       | V None |          |
| committee or advocacy group, paid or unpaid  11 Stock or stock options XNone  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or nonXNone  | 10 |                                       | XNone  |          |
| group, paid or unpaid  11 Stock or stock options X_None  12 Receipt of equipment, materials, drugs, medical writing, gifts or other services  13 Other financial or nonX_None  |    |                                       |        |          |
| 11 Stock or stock options XNone  12 Receipt of equipment,  |    | •                                     |        |          |
| materials, drugs, medical writing, gifts or other services  13 Other financial or nonXNone   | 11 |                                       | XNone  |          |
| materials, drugs, medical writing, gifts or other services  13 Other financial or nonXNone   |    |                                       |        |          |
| materials, drugs, medical writing, gifts or other services  13 Other financial or nonXNone   |    |                                       |        |          |
| writing, gifts or other services  13 Other financial or nonX_None  | 12 |                                       | XNone  |          |
| services  13 Other financial or nonX_None  |    | _                                     |        |          |
| 13 Other financial or nonX_None  |    |                                       |        |          |
|  | 13 |                                       | X 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:10/4/2021   |  |
|--|--|
| Your Name:Celine C Berthier  |  |
| Manuscript Title:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |  |
| Manuscript number (if known): ar-21-0264.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)  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. | NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2- AR067678, and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |

|    |   | 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                      |  |
|    |   |                            |  |
|    | 0 111 6   | V N                        |  |
| 4  | Consulting fees                                       | XNone                      |  |
|    |   |                            |  |
| 5  | Payment or honoraria for                              | X None                     |  |
|    | lectures, presentations,                              | <u>X_None</u>              |  |
|    | speakers bureaus,                                     |                            |  |
|    | manuscript writing or                                 |                            |  |
|    | educational events                                    |                            |  |
| 6  | Payment for expert                                    | XNone                      |  |
|    | testimony   |                            |  |
| 7  | Comment for other disc.                               | V. Nege                    |  |
| 7  | Support for attending meetings and/or travel          | XNone                      |  |
|    | meetings and/or traver                                |                            |  |
|    |   |                            |  |
|    |   |                            |  |
| 8  | Patents planned, issued or                            | XNone                      |  |
|    | pending   |                            |  |
|    |   |                            |  |
| 9  | Participation on a Data                               | XNone                      |  |
|    | Safety Monitoring Board or                            |                            |  |
| 10 | Advisory Board  | V. Neve                    |  |
| 10 | Leadership or fiduciary role in other board, society, | XNone                      |  |
|    | 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                                   |                            |  |
|    |   |                            |  |

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

| Date:10/4/2021_      |  |  |
|----------------------|--|--|
| Your Name:           |  |  |
| Manuscript Title:_ U | rine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |  |
| Manuscript number    | (if known): ar-21-0264.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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| 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  |
|---|--|
| NIH grants:<br>UH2-AR067676,<br>UH2-AR067677,<br>UH2-AR067681,<br>UH2-AR067685,<br>UH2-AR067688,<br>UH2-AR067689,<br>UH2-AR067690,<br>UH2-AR067691,<br>UH2-AR067694,<br>UM2-AR067694,<br>UM2-AR067678, and<br>AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project.   |
|   | relationship or indicate none (add rows as needed) Time frame: Since the initial NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2-AR067678, and |

|    |   | Time frame: past 3 | 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  | Payment or honoraria for                    | X None             |           |
|    | lectures, presentations,                    | XNONE              |           |
|    | speakers bureaus,                           |                    |           |
|    | manuscript writing or                       |                    |           |
|    | educational events                          |                    |           |
| 6  | Payment for expert                          | XNone              |           |
|    | testimony                                   |                    |           |
|    | _   |                    |           |
| 7  | Support for attending                       | XNone              |           |
|    | meetings and/or travel                      |                    |           |
|    |   |                    |           |
|    |   |                    |           |
| 8  | Patents planned, issued or                  | XNone              |           |
|    | pending                                     |                    |           |
|    |   |                    |           |
| 9  | Participation on a Data                     | XNone              |           |
|    | 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                      | X None             |           |
|    | Stock of Stock options                      |                    |           |
|    |   |                    |           |
| 12 | Receipt of equipment,                       | XNone              |           |
|    | materials, drugs, medical                   |                    |           |
|    | writing, gifts or other                     |                    |           |
|    | services                                    |                    |           |
| 13 | Other financial or non-                     | XNone              |           |
|    | 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:10/4/2021                      |  |
|-------------------------------------|--|
| Your Name:Jill Buyon                |  |
| Manuscript Title:_ Urine Proteomics | and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known):       | ar-21-0264.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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| 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  |
|--|--|
| NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2- AR067678, and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project.   |
|  | relationship or indicate none (add rows as needed) Time frame: Since the initial NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2-AR067678, and |

|    |   | 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                      |  |
|    |   |                            |  |
|    | 0 111 6   | V N                        |  |
| 4  | Consulting fees                                       | XNone                      |  |
|    |   |                            |  |
| 5  | Payment or honoraria for                              | X None                     |  |
|    | lectures, presentations,                              | <u>X_None</u>              |  |
|    | speakers bureaus,                                     |                            |  |
|    | manuscript writing or                                 |                            |  |
|    | educational events                                    |                            |  |
| 6  | Payment for expert                                    | XNone                      |  |
|    | testimony   |                            |  |
| 7  | Comment for other disc.                               | V. Nege                    |  |
| 7  | Support for attending meetings and/or travel          | XNone                      |  |
|    | meetings and/or traver                                |                            |  |
|    |   |                            |  |
|    |   |                            |  |
| 8  | Patents planned, issued or                            | XNone                      |  |
|    | pending   |                            |  |
|    |   |                            |  |
| 9  | Participation on a Data                               | XNone                      |  |
|    | Safety Monitoring Board or                            |                            |  |
| 10 | Advisory Board  | V. Neve                    |  |
| 10 | Leadership or fiduciary role in other board, society, | XNone                      |  |
|    | 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                                   |                            |  |
|    |   |                            |  |

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

| Date:10/4/202      | Pate:10/4/2021   |  |  |  |
|--------------------|------------------|--|--|--|
| Your Name:         | _Chandra Mohan_  |  |  |  |
| Manuscript Title:_ | Urine Proteomics | and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |  |  |
| Manuscript number  | er (if known):   | ar-21-0264.R1  |  |  |

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|   |   | Name all entities with<br>whom you have this<br>relationship or indicate<br>none (add rows as<br>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. | NIH grants:     UH2-AR067676,     UH2-AR067677,     UH2-AR067681,     UH2-AR067685,     UH2-AR067688,     UH2-AR067689,     UH2-AR067690,     UH2-AR067691,     UH2-AR067694,     UM2-AR067678, and     AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |
|   |   |   |  |

|    |                              | Time frame: pas | 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  | Payment or honoraria for     | XNone           |           |
|    | lectures, presentations,     |                 |           |
|    | speakers bureaus,            |                 |           |
|    | manuscript writing or        |                 |           |
|    | educational events           |                 |           |
| 6  | Payment for expert           | XNone           |           |
|    | testimony                    |                 |           |
|    |                              |                 |           |
| 7  | Support for attending        | XNone           |           |
|    | meetings and/or travel       |                 |           |
|    |                              |                 |           |
|    |                              |                 |           |
|    |                              |                 |           |
| 8  | Patents planned, issued or   | XNone           |           |
|    | pending                      |                 |           |
|    |                              |                 |           |
| 9  | Participation on a Data      | XNone           |           |
|    | 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          |                 |           |
|    |                              |                 |           |

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

| Date:10/11/2021  |
|--|
| Your Name: Robert Clancy   |
| Manuscript Title:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known): ar-21-0264.R1  |

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|   |   | Name all entities with<br>whom you have this<br>relationship or indicate<br>none (add rows as<br>needed)   | 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. | NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067679, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2- AR067678, and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |

|    |   | Time frame: past 3 | 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  | Payment or honoraria for                    | X None             |           |
|    | lectures, presentations,                    | XNone              |           |
|    | speakers bureaus,                           |                    |           |
|    | manuscript writing or                       |                    |           |
|    | educational events                          |                    |           |
| 6  | Payment for expert                          | XNone              |           |
|    | testimony                                   |                    |           |
|    | _   |                    |           |
| 7  | Support for attending                       | XNone              |           |
|    | meetings and/or travel                      |                    |           |
|    |   |                    |           |
|    |   |                    |           |
| 8  | Patents planned, issued or                  | XNone              |           |
|    | pending                                     |                    |           |
|    |   |                    |           |
| 9  | Participation on a Data                     | XNone              |           |
|    | 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                      | X None             |           |
|    | Stock of Stock options                      |                    |           |
|    |   |                    |           |
| 12 | Receipt of equipment,                       | XNone              |           |
|    | materials, drugs, medical                   |                    |           |
|    | writing, gifts or other                     |                    |           |
|    | services                                    |                    |           |
| 13 | Other financial or non-                     | XNone              |           |
|    | 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:10/4/2021  |   |
|---|---|
| Your Name:Deepak Rao  |   |
| Manuscript Title:_ Urine Proteomics and Renal Single Cell Tra | nscriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known): ar-21-0264.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)  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. | NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2- AR067678, and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |

|    |                              | Time frame: pas | 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  | Payment or honoraria for     | XNone           |           |
|    | lectures, presentations,     |                 |           |
|    | speakers bureaus,            |                 |           |
|    | manuscript writing or        |                 |           |
|    | educational events           |                 |           |
| 6  | Payment for expert           | XNone           |           |
|    | testimony                    |                 |           |
|    |                              |                 |           |
| 7  | Support for attending        | XNone           |           |
|    | meetings and/or travel       |                 |           |
|    |                              |                 |           |
|    |                              |                 |           |
|    |                              |                 |           |
| 8  | Patents planned, issued or   | XNone           |           |
|    | pending                      |                 |           |
|    |                              |                 |           |
| 9  | Participation on a Data      | XNone           |           |
|    | 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          |                 |           |
|    |                              |                 |           |

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

| Date:10/4/2021   |
|--|
| Your Name: Andrea Fava, MD   |
| Manuscript Title:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known): ar-21-0264.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)   |
|--|---|---|
| All support for the present manuscript (e.g., funding, provision of study material medical writing, article processing charges, etc.)  No time limit for this item | NIH grants:<br>UH2-AR067676,<br>UH2-AR067677,<br>UH2-AR067679,  | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project.  The Hopkins Lupus Cohort is funded by NIH AR 69572. |

|    |   | The Jerome L. Greene Foundation | Dr Fava's support |
|----|---|---------------------------------|-------------------|
|    |   | The Cupid Foundation            | Dr Fava's support |
|    |   | <b>-</b>                        |                   |
| 2  | Grants or contracts from                              | Time frame: past X None         | 36 months         |
| _  | any entity (if not indicated                          |                                 |                   |
|    | in item #1 above).                                    |                                 |                   |
| 3  | Royalties or licenses                                 | XNone                           |                   |
|    |   |                                 |                   |
| 4  | Consulting fees                                       | X None                          |                   |
| 4  | Consulting rees                                       |                                 |                   |
|    |   |                                 |                   |
| 5  | Payment or honoraria for                              | XNone                           |                   |
|    | lectures, presentations,                              |                                 |                   |
|    | speakers bureaus,<br>manuscript writing or            |                                 |                   |
|    | educational events                                    |                                 |                   |
| 6  | Payment for expert                                    | XNone                           |                   |
|    | testimony   |                                 |                   |
| -  | C 15 11 1:  | V N                             |                   |
| 7  | Support for attending meetings and/or travel          | XNone                           |                   |
|    | meetings and/or traver                                |                                 |                   |
|    |   |                                 |                   |
| 8  | Patents planned, issued or                            | XNone                           |                   |
|    | pending   |                                 |                   |
|    |   |                                 |                   |
| 9  | Participation on a Data<br>Safety Monitoring Board or | XNone                           |                   |
|    | 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                           |                   |
|    |   |                                 |                   |
| 40 | 5   | V N                             |                   |
| 12 | Receipt of equipment,<br>materials, drugs, medical    | XNone                           |                   |
|    | writing, gifts or other                               |                                 |                   |
|    | services  |                                 |                   |
| 13 | Other financial or non-                               | XNone                           |                   |
|    | financial interests                                   |                                 |                   |
|    |   |                                 |                   |

| form. |  |  | tions o |
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| Date:10/11/2021  |
|--|
| Your Name: Derek Fine  |
| Manuscript Title:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known): ar-21-0264.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<br>whom you have this<br>relationship or indicate<br>none (add rows as<br>needed)   | 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. | NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067679, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2- AR067678, and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |

|    |                              | Time frame: pas | 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  | Payment or honoraria for     | XNone           |           |
|    | lectures, presentations,     |                 |           |
|    | speakers bureaus,            |                 |           |
|    | manuscript writing or        |                 |           |
|    | educational events           |                 |           |
| 6  | Payment for expert           | XNone           |           |
|    | testimony                    |                 |           |
|    |                              |                 |           |
| 7  | Support for attending        | XNone           |           |
|    | meetings and/or travel       |                 |           |
|    |                              |                 |           |
|    |                              |                 |           |
|    |                              |                 |           |
| 8  | Patents planned, issued or   | XNone           |           |
|    | pending                      |                 |           |
|    |                              |                 |           |
| 9  | Participation on a Data      | XNone           |           |
|    | 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          |                 |           |
|    |                              |                 |           |

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

| Date:   | _10/4/2021     |               |   |
|---------|----------------|---------------|---|
| Your Na | me:            | Peter Izmirly |   |
| Manusc  | ript Title:_ \ | Jrine Proteom | cs and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manusc  | ript number    | (if known):   | ar-21-0264.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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| 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  |
|--|--|
| NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2- AR067678, and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project.   |
|  | relationship or indicate none (add rows as needed) Time frame: Since the initial NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2-AR067678, and |

|    |   | Time frame: pa | st 36 months   |
|----|---|----------------|--|
| 2  | Grants or contracts from any entity (if not indicated | XNone          |  |
|    |   |                |  |
|    | in item #1 above).                                    |                |  |
| 3  | Royalties or licenses                                 | XNone          |  |
|    |   |                |  |
|    |   |                |  |
| 4  | Consulting fees                                       | _X_            | 2/2019 Scientific Advisory Board GSK embrace study         |
|    |   |                | 3/2021 Scientific Advisory Board-Momenta/Jansen- CHB study |
|    |   |                |  |
| 5  | Payment or honoraria for lectures, presentations,     | XNone          |  |
|    | speakers bureaus,                                     |                |  |
|    | manuscript writing or                                 |                |  |
|    | educational events                                    |                |  |
| 6  | Payment for expert                                    | XNone          |  |
|    | testimony   |                |  |
|    |   |                |  |
| 7  | Support for attending meetings and/or travel          | XNone          |  |
|    |   |                |  |
|    |   |                |  |
| 8  | Patents planned, issued or pending                    | X_None         |  |
|    |   |                |  |
| 0  | Participation on a Data                               | V None         |  |
| 9  | Participation on a Data<br>Safety Monitoring Board or | XNone          |  |
|    | 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,                                 | XNone          |  |
|    | materials, drugs, medical                             |                |  |
|    | writing, gifts or other services                      |                |  |
| 13 | Other financial or non-                               | XNone          |  |
|    | financial interests                                   |                |  |
|    |   |                |  |

| <br>I certify that I have answered | l every question and | have not altered | the wording of ar | ny of the questio | ns on this |
|------------------------------------|----------------------|------------------|-------------------|-------------------|------------|
| form.                              |                      |                  |                   |                   |            |

| Date:10/4/2021                     |  |  |  |  |
|------------------------------------|--|--|--|--|
| Your Name:Judith A. James, MD,     | PhD  |  |  |  |
| Manuscript Title:_ Urine Proteomic | s and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |  |  |  |
| Manuscript number (if known):      | ar-21-0264.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)  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. | NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067679, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2- AR067678, P30- AR073750 and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |

|    |  | Time frame: pas | t 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  | Payment or honoraria for                     | XNone           |             |
|    | lectures, presentations,                     |                 |             |
|    | speakers bureaus,                            |                 |             |
|    | manuscript writing or                        |                 |             |
|    | educational events                           |                 |             |
| 6  | Payment for expert                           | XNone           |             |
|    | 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                 | 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                          |                 |             |
|    |  |                 |             |
|    |  |                 |             |

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

| Date:10/11/2021  |
|--|
| Your Name: Jose Monroy-Trujillo  |
| Manuscript Title:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known): ar-21-0264.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)  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. | NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2- AR067678, and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |
|   | UH2-AR067681,<br>UH2-AR067685,<br>UH2- AR067688,<br>UH2-AR067689,<br>UH2-AR067690,<br>UH2-AR067691,<br>UH2-AR067694,<br>UM2- AR067678, and                             |  |

|    |   | Time frame: past 3 | 36 months |
|----|---|--------------------|-----------|
| 2  | any entity (if not indicated                | XNone              |           |
|    |   |                    |           |
|    | in item #1 above).                          |                    |           |
| 3  | Royalties or licenses                       | XNone              |           |
|    |   |                    |           |
|    |   |                    |           |
| 4  | Consulting fees                             | XNone              |           |
|    |   |                    |           |
| 5  | Payment or honoraria for                    | X None             |           |
|    | lectures, presentations,                    | XNone              |           |
|    | speakers bureaus,                           |                    |           |
|    | manuscript writing or                       |                    |           |
|    | educational events                          |                    |           |
| 6  | Payment for expert                          | XNone              |           |
|    | testimony                                   |                    |           |
|    | _   |                    |           |
| 7  | Support for attending                       | XNone              |           |
|    | meetings and/or travel                      |                    |           |
|    |   |                    |           |
|    |   |                    |           |
| 8  | Patents planned, issued or                  | XNone              |           |
|    | pending                                     |                    |           |
|    |   |                    |           |
| 9  | Participation on a Data                     | XNone              |           |
|    | 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                      | X None             |           |
|    | Stock of Stock options                      |                    |           |
|    |   |                    |           |
| 12 | Receipt of equipment,                       | XNone              |           |
|    | materials, drugs, medical                   |                    |           |
|    | writing, gifts or other                     |                    |           |
|    | services                                    |                    |           |
| 13 | Other financial or non-                     | XNone              |           |
|    | financial interests                         |                    |           |
|    |   |                    |           |

| Date:10/8/2021   |
|--|
| Your Name: Nir Hacohen   |
| Manuscript Title:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known): ar-21-0264.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. | NIH grants:     UH2-AR067676,     UH2-AR067677,     UH2-AR067681,     UH2-AR067685,     UH2-AR067688,     UH2-AR067689,     UH2-AR067690,     UH2-AR067691,     UH2-AR067694,     UM2-AR067678, and     AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |
|   |   |   |  |

|    |  | 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  | Payment or honoraria for                 | X_None           |            |
|    | lectures, presentations,                 |                  |            |
|    | speakers bureaus,                        |                  |            |
|    | manuscript writing or educational events |                  |            |
| 6  | Payment for expert                       | X None           |            |
| ١  | testimony                                | ^NUITE           |            |
|    | testimony                                |                  |            |
| 7  | Support for attending                    | XNone            |            |
| ,  | meetings and/or travel                   |                  |            |
|    |  |                  |            |
|    |  |                  |            |
|    |  |                  |            |
| 8  | Patents planned, issued or               | X None           |            |
| 0  | pending                                  | XNone            |            |
|    | benamb                                   |                  |            |
| 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                   | None             | Danger Bio |
|    |  |                  | BioNTech   |
|    |  |                  |            |
|    |  |                  |            |
| 12 | Receipt of equipment,                    | XNone            |            |
|    | materials, drugs, medical                |                  |            |
|    | writing, gifts or other                  |                  |            |
|    | services                                 |                  |            |
| 13 | Other financial or non-                  | XNone            |            |
|    | financial interests                      |                  |            |
|    |  |                  |            |

| Date:10/4/2021   |
|--|
| Your Name:_Michelle Petri MD MPH   |
| Manuscript Title:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known): ar-21-0264.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 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)  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. | NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2- AR067678, and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |

|    |                              | Time frame: pas | 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  | Payment or honoraria for     | XNone           |           |
|    | lectures, presentations,     |                 |           |
|    | speakers bureaus,            |                 |           |
|    | manuscript writing or        |                 |           |
|    | educational events           |                 |           |
| 6  | Payment for expert           | XNone           |           |
|    | testimony                    |                 |           |
|    |                              |                 |           |
| 7  | Support for attending        | XNone           |           |
|    | meetings and/or travel       |                 |           |
|    |                              |                 |           |
|    |                              |                 |           |
|    |                              |                 |           |
| 8  | Patents planned, issued or   | XNone           |           |
|    | pending                      |                 |           |
|    |                              |                 |           |
| 9  | Participation on a Data      | XNone           |           |
|    | 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          |                 |           |
|    |                              |                 |           |

| <b>Date:</b> 10/9/ | 2021   |
|--------------------|--|
| Your Name:         | Soumya Raychaudhuri  |
| Manuscript Tit     | le:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript nu      | mber (if known): ar-21-0264.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. | NIH grants: UH2-AR067676, UH2-AR067677, UH2-AR067681, UH2-AR067685, UH2-AR067688, UH2-AR067689, UH2-AR067690, UH2-AR067691, UH2-AR067694, UM2- AR067678, and AR074096. | These awards supported the Accelerating Medicines Partnership in RA/SLE network. Funding was provided to the institutions that collaborated in this project. |
|   |   |  |  |

|    |  | Time frame: past | 36 months                            |
|----|--|------------------|--------------------------------------|
| 2  | Grants or contracts from                     | XNone            |                                      |
|    | any entity (if not indicated                 |                  |                                      |
|    | in item #1 above).                           |                  |                                      |
| 3  | Royalties or licenses                        | X_None           |                                      |
|    |  |                  |                                      |
|    |  |                  |                                      |
| 4  | Consulting fees                              | None             | Gilead, Pfizer, Rheos Medicines, and |
|    |  |                  | Janssen                              |
|    |  |                  |                                      |
|    |  |                  |                                      |
| 5  | Payment or honoraria for                     | XNone            |                                      |
|    | lectures, presentations,                     |                  |                                      |
|    | speakers bureaus,                            |                  |                                      |
|    | manuscript writing or educational events     |                  |                                      |
| 6  | Payment for expert                           | XNone            |                                      |
|    | 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                 | 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-                      | None             | founder for Mestag                   |
|    | financial interests                          |                  |                                      |
|    |  |                  |                                      |
|    |  |                  |                                      |

form.

| Date:10/11/2021  |
|--|
| Your Name: Ting Zhang  |
| Manuscript Title:_ Urine Proteomics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known): ar-21-0264.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  |
|---|---|---|--|
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|   |   |   |  |

|    |                              | Time frame: pas | 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  | Payment or honoraria for     | XNone           |           |
|    | lectures, presentations,     |                 |           |
|    | speakers bureaus,            |                 |           |
|    | manuscript writing or        |                 |           |
|    | educational events           |                 |           |
| 6  | Payment for expert           | XNone           |           |
|    | testimony                    |                 |           |
|    |                              |                 |           |
| 7  | Support for attending        | XNone           |           |
|    | meetings and/or travel       |                 |           |
|    |                              |                 |           |
|    |                              |                 |           |
|    |                              |                 |           |
| 8  | Patents planned, issued or   | XNone           |           |
|    | pending                      |                 |           |
|    |                              |                 |           |
| 9  | Participation on a Data      | XNone           |           |
|    | 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:10/4/2021                  |   |
|---------------------------------|---|
| Your Name: David Wofsy          |   |
| Manuscript Title:_ Urine Proteo | mics and Renal Single Cell Transcriptomics Implicate IL-16 in Lupus Nephritis |
| Manuscript number (if known):   | ar-21-0264.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>.

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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)  |
|---|---|--|--|
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|    |   | Time frame: past 3 | 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  | Payment or honoraria for                    | X None             |           |
|    | lectures, presentations,                    | XNone              |           |
|    | speakers bureaus,                           |                    |           |
|    | manuscript writing or                       |                    |           |
|    | educational events                          |                    |           |
| 6  | Payment for expert                          | XNone              |           |
|    | testimony                                   |                    |           |
|    | _   |                    |           |
| 7  | Support for attending                       | XNone              |           |
|    | meetings and/or travel                      |                    |           |
|    |   |                    |           |
|    |   |                    |           |
| 8  | Patents planned, issued or                  | XNone              |           |
|    | pending                                     |                    |           |
|    |   |                    |           |
| 9  | Participation on a Data                     | XNone              |           |
|    | 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                      | X None             |           |
|    | Stock of Stock options                      |                    |           |
|    |   |                    |           |
| 12 | Receipt of equipment,                       | XNone              |           |
|    | materials, drugs, medical                   |                    |           |
|    | writing, gifts or other                     |                    |           |
|    | services                                    |                    |           |
| 13 | Other financial or non-                     | XNone              |           |
|    | financial interests                         |                    |           |
|    |   |                    |           |

| Date:   | 10/4/202     | 21              |                        |                     |                       |              |
|---------|--------------|-----------------|------------------------|---------------------|-----------------------|--------------|
| Your Na | me:          | PARIDE          | FENAROLI               |                     |                       |              |
| Manuscr | ript Title:_ | Urine Proteomic | s and Renal Single Cel | Transcriptomics Imp | olicate IL-16 in Lupi | us Nephritis |
| Manuscr | ript numb    | er (if known):  | ar-21-0264.R1          |                     |                       |              |

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|   |   | Name all entities with<br>whom you have this<br>relationship or indicate<br>none (add rows as<br>needed)  | Specifications/Comments (e.g., if payments were made to you or to your institution)  |
|---|---|---|--|
|   |   | Time frame: Since the initial   | planning of the work   |
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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 lectures, presentations, speakers bureaus, manuscript writing or educational events | XNone                      |
| 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<br>Safety Monitoring Board or<br>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   | XNone                      |
| 12 | Receipt of equipment,<br>materials, drugs, medical<br>writing, gifts or other<br>services                    | XNone                      |
| 13 | Other financial or non-<br>financial interests   | XNone                      |