

#### Instructions

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

# Identifying information.

# 2. The work under consideration for publication.

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earning royalties of not

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



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Robert	2. Surname (Last Name) Lowsky		3. Date 22-February-2019
4. Are you the corresponding author?	☐ Yes   ✓ No	Corresponding Author's Nan Everett Meyer	ne
<ol><li>Manuscript Title Transplantation of donor grafts with d regulatory T cells in HLA-matched reci</li></ol>		al and	
6. Manuscript Identifying Number (if you k 127244-INS-CMED-1	know it)		
Section 2. The Work Under C	Consideration for Publi	cation	
Did you or your institution <b>at any time</b> recany aspect of the submitted work (includir statistical analysis, etc.)?	eive payment or services from ng but not limited to grants, da	a third party (government, con	nmercial, private foundation, etc.) for sign, manuscript preparation,
Are there any relevant conflicts of inte	rest? Yes ✓ No		
Section 3. Relevant financia	l activities outside the	submitted work.	
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes V No			
A Contract of the Contract of			
Section 4. Intellectual Prope	erty Patents & Copyri	ghts	
Do you have any patents, whether pla	nned, pending or issued, b	roadly relevant to the work?	Yes V No

2



Section 5.	Relationships not covered above				
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?				
Yes, the follo	Yes, the following relationships/conditions/circumstances are present (explain below):				
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest				
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Section 6.	Disclosure Statement				
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Dr. Lowsky has	nothing to disclose.				

#### **Evaluation and Feedback**

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Lowsky



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patent

Baker



Section 1. Identifying Inform	nation	
Given Name (First Name)  Jeanette	2. Surname (Last Name) Baker	3. Date 22-February-2019
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Everett Meyer
<ol> <li>Manuscript Title         Transplantation of donor grafts with de- regulatory T cells in HLA-matched recip     </li> <li>Manuscript Identifying Number (if you known to the second to the sec</li></ol>	pients	l and
Section 2. The Work Under C	onsideration for Public	ation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	ubmitted work.
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Section 4. Intellectual Prope	rty Patents & Copyrig	ıhts
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes V No

Baker 2



Section 5.	
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Dr. Baker has no	thing to disclose.

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patent

heydari 1



Section 1. Identifying Inform	nation	
Given Name (First Name)  Kartoosh	2. Surname (Last Name) heydari	3. Date 22-February-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Everett Meyer
5. Manuscript Title Transplantation of donor grafts with do regulatory T cells in HLA-matched recip		l and
6. Manuscript Identifying Number (if you k 127244-INS-CMED-1	now it)	
Section 2. The Work Under C	onsideration for Public	ation
Did you or your institution at any time rece	eive payment or services from g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
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Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? Yes Vo



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Dr. Kartoosh He	ydari has nothing to disclose.		

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heydari



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patent

Arai



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Sally	2. Surname (Last Name) Arai	75)	Date 2-February-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Everett Meyer	
<ol> <li>Manuscript Title         Transplantation of donor grafts with done         regulatory T cells in HLA-matched recip     </li> <li>Manuscript Identifying Number (if you k</li> <li>127244-INS-CMED-1</li> </ol>	pients	land	
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Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of inter	g but not limited to grants, da	a third party (government, comm ta monitoring board, study desigr	nercial, private foundation, etc.) for n, manuscript preparation,
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Do you have any patents, whether plan	ned, pending or issued, bro	oadly relevant to the work?	Yes ✓ No



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patent

Johnston 1



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Laura	2. Surname (Last Name) Johnston	3. Date 22-Feb	ruary-2019
4. Are you the corresponding author?	Yes No Corresponding Author's Name Everett Meyer		
<ol><li>Manuscript Title Transplantation of donor grafts with de regulatory T cells in HLA-matched recip</li></ol>		al and	
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Johnston 2



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Dr. Laura Johnst	on has nothing to disclose.

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Johnston 3



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Other: Anything not covered under the previous three boxes

**Pending:** The patent has been filed but not issued **Issued:** The patent has been issued by the agency

Licensed: The patent has been licensed to an entity, whether

earning royalties or not

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

patent

Laport 1



Section 1. Identifying	ng Information	
1. Given Name (First Name) Ginna	2. Surname (Last Name) Laport	3. Date 26-February-2019
4. Are you the corresponding at	uthor? Yes Vo	Corresponding Author's Name
5. Manuscript Title Transplantation of donor gra	fts with defined ratio of conventiona	al and regulatory T cells in HLA-matched recipients
6. Manuscript Identifying Numb	er (if you know it)	
Section 2. The Work	Under Consideration for Public	cation
	k (including but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant	financial activities outside the	submitted work.
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes No		
Section 4. Intellectu	al Property Patents & Copyric	white
intellectu		
Do you have any patents, wh	ether planned, pending or issued, br	roadly relevant to the work? Yes V No

Laport 2



Section 5.		
Section 5.	Relationships not covered above	
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?	
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):	
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest	
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.		
Saction 6		
Section 6.	Disclosure Statement	
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box	
Dr. Laport has no	othing to disclose.	

#### **Evaluation and Feedback**

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Laport

#### Instructions

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### Identifying information.

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#### Relevant financial activities outside the submitted work.

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# 4. Intellectual Property.

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

# Relationships not covered above.

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earning royalties or not

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

MacDonald



Section 1. Identifying Inform	nation		
Given Name (First Name)  Kate	2. Surname (Last Name) MacDonald	3. Date 24-February-2019	
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Everett Meyer	
<ol> <li>Manuscript Title         Transplantation of donor grafts with deregulatory T cells in HLA-matched recip     </li> <li>Manuscript Identifying Number (if you known to be a comment of the comment</li></ol>	pients	land	
127244-INS-CMED-1			
Section 2. The Work Under C	onsideration for Public	ation	
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,	
Section 3. Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> .			
Are there any relevant conflicts of interest	est? Yes ✓ No		
Section 4. Intellectual Proper	rty Patents & Copyric	ihts	
Do you have any patents, whether plan		THE RESEARCH TO SERVICE AND ADDRESS OF THE PARTY.	

MacDonald 2



Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
Section 6.	
Section 6.	Disclosure Statement
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Ms. MacDonald I	has nothing to disclose.

#### **Evaluation and Feedback**

Please visit <a href="http://www.icmje.org/cgi-bin/feedback">http://www.icmje.org/cgi-bin/feedback</a> to provide feedback on your experience with completing this form.

MacDonald 3



#### Instructions

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# Identifying information.

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### Relevant financial activities outside the submitted work.

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# Intellectual Property.

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

# Relationships not covered above.

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Other: Anything not covered under the previous three boxes

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Licensed: The patent has been licensed to an entity, whether

earning royalties or not

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

patent

Tate



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Keri	2. Surname (Last Name) Tate	3. Date 22-February-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Everett Meyer
5. Manuscript Title Transplantation of donor grafts with do regulatory T cells in HLA-matched recip		l and
6. Manuscript Identifying Number (if you k 127244-INS-CMED-1	now it)	
Section 2. The Work Under C	onsideration for Public	cation
	g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ita monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the	submitted work
Place a check in the appropriate boxes of compensation) with entities as descr	in the table to indicate wh ribed in the instructions. Us sport relationships that we	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Prope	rty Patents & Copyri	ghts
Do you have any patents, whether plan	nned, pending or issued, br	roadly relevant to the work? Yes V No

Tate 2



Section 5.	
Jeenon J.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
Section 6.	Disclosure Statement
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Keri Tate has	nothing to disclose.

#### **Evaluation and Feedback**

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Tate



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# 4. Intellectual Property.

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

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earning royalties or not

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

patent

Sheehan 1



Section 1. Identifying Inform	nation		
Given Name (First Name)  Kevin	2. Surname (Last Name) Sheehan		3. Date 22-February-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Nam Everett Meyer	ne
<ol><li>Manuscript Title Transplantation of donor grafts with de regulatory T cells in HLA-matched recip</li></ol>		l and	
6. Manuscript Identifying Number (if you ki 127244-INS-CMED-1	now it)		
Section 2. The Work Under C	onsideration for Public	ation	
Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	g but not limited to grants, da		
Section 3. Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes of compensation) with entities as descr clicking the "Add +" box. You should re Are there any relevant conflicts of interest.	ibed in the instructions. Us port relationships that wer	e one line for each entity; ac	dd as many lines as you need by
Section 4. Intellectual Prope	rty Patents & Copyrig	ıhts	
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work?	☐ Yes 🗸 No

Sheehan 2



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

#### **Evaluation and Feedback**

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earning royalties or not

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

patent

Sahaf



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Bita	2. Surname (Last Name) Sahaf	3. Date 22-February-2019
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Everett Meyer
<ol><li>Manuscript Title Transplantation of donor grafts with de regulatory T cells in HLA-matched recip</li></ol>	fined ratio of conventiona ients	l and
Manuscript Identifying Number (if you kn 127244-INS-CMED-1	now it)	
Section 2.		
The Work Under Co	onsideration for Public	
Did you or your institution <b>at any time</b> recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	ubmitted work.
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Section 4. Intellectual Proper	ty Patents & Copyrig	hts
Do you have any patents, whether plann	ned, pending or issued, bro	oadly relevant to the work? ☐ Yes ✓ No



Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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c .: c	
Section 6.	Disclosure Statement
Based on the abo below.	ove disclosures, this form will automatically generate a disclosure statement, which will appear in the box
Dr. Bita Sahaf ha	s nothing to disclose.

#### **Evaluation and Feedback**

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Sahaf



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earning royalties or not

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

patent

Meyer



Section 1. Identifying Inform	nation	
Given Name (First Name)  Everett	2. Surname (Last Name) Meyer	3. Date 14-February-2019
4. Are you the corresponding author?	✓ Yes No	
<ol> <li>Manuscript Title         Transplantation of donor grafts with deregulatory T cells in HLA-matched recip     </li> <li>Manuscript Identifying Number (if you known to be compared to be compared</li></ol>	ients	
Section 2. The Work Under C	onsideration for Publication	
Did you or your institution at any time rece	ive payment or services from a third party (government, or but not limited to grants, data monitoring board, study	
Section 3. Relevant financial	activities outside the submitted work.	
of compensation) with entities as descr	n the table to indicate whether you have financial ribed in the instructions. Use one line for each entity port relationships that were <b>present during the 36</b> est?  Yes No	; add as many lines as you need by
If yes, please fill out the appropriate infe		
Name of Entity	Grant? Personal Non-Financial Other? Constitution Constit	omments
Orca Biosystems, Inc		
Section 4. Intellectual Proper	rty Patents & Copyrights	
	ned, pending or issued, broadly relevant to the wor ormation below. If you have more than one entity p g the "X" button.	

Meyer 2



Patent?	Pending? Iss	ued? Licensed	?Royalties?	Licensee?	Comments	
Method for selecting Treg cells for clinical use	<b>V</b>					
Section 5. Relationshi	ps not covere	d above				
Are there other relationships or potentially influencing, what yo			ceive to have	influenced, or th	at give the appeara	ance of
Yes, the following relationsh  No other relationships/cond				•	est	
At the time of manuscript accep On occasion, journals may ask a						ire statements.
Section 6. Disclosure S	itatement					
Based on the above disclosures, below.	this form will au	utomatically gen	erate a disclo	sure statement,	which will appear ir	n the box
Dr. Meyer reports grants from C Method for selecting Treg cells			submitted w	ork; In addition,	Dr. Meyer has a pat	tent

#### **Evaluation and Feedback**

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#### Instructions

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

Miklos 1



Section 1. Identifying Inform	nation	
Given Name (First Name)  David	2. Surname (Last Name) Miklos	3. Date 22-February-2019
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Everett Meyer
5. Manuscript Title Transplantation of donor grafts with do regulatory T cells in HLA-matched recip		l and
6. Manuscript Identifying Number (if you k 127244-INS-CMED-1	now it)	
Section 2. The Work Under C	onsideration for Public	ation
Did you or your institution at any time rece	eive payment or services from g but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	submitted work.
of compensation) with entities as descri	ribed in the instructions. Use port relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by se <b>present during the 36 months prior to publication</b> .
Section 4. Intellectual Prope	rty Patents & Copyric	yhts
Do you have any patents, whether plan	nned, pending or issued, br	oadly relevant to the work? ☐ Yes ✓ No

Miklos 2



Section 5.	Relationships not covered above			
Are there other r potentially influe	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?			
Yes, the following relationships/conditions/circumstances are present (explain below):  No other relationships/conditions/circumstances that present a potential conflict of interest				
	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.			
Section 6.	Disclosure Statement			
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Dr. Miklos has n	o relevant disclosures.			

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patent

Muffly 1



Section 1. Identifying In	formation	
1. Given Name (First Name) Lori	2. Surname (Last Name) Muffly	3. Date 22-February-2019
4. Are you the corresponding author?	Yes 🗸 No	Corresponding Author's Name Everett Meyer
<ol> <li>Manuscript Title         Transplantation of donor grafts w regulatory T cells in HLA-matched     </li> <li>Manuscript Identifying Number (if 127244-INS-CMED-1</li> </ol>	recipients	al and
Section 2. The Work Und	ler Consideration for Public	cation
Did you or your institution at any time	e receive payment or services from luding but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ata monitoring board, study design, manuscript preparation,
Section 3. Relevant finar	ncial activities outside the s	submitted work.
of compensation) with entities as	described in the instructions. Us ild report relationships that wer	ether you have financial relationships (regardless of amount se one line for each entity; add as many lines as you need by re present during the 36 months prior to publication.
Section 4. Intellectual Pr	operty Patents & Copyric	ghts
Do you have any patents, whether	planned, pending or issued, br	oadly relevant to the work? Yes V No



Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follo	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
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Dr. Muffly has no	othing to disclose.

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Muffly



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 $\textbf{Royalties:} \ \mathsf{Funds} \ \mathsf{are} \ \mathsf{coming} \ \mathsf{in} \ \mathsf{to} \ \mathsf{you} \ \mathsf{or} \ \mathsf{your} \ \mathsf{institution} \ \mathsf{due} \ \mathsf{to} \ \mathsf{your}$ 

patent



Section 1. Identifying Inform	nation	
Given Name (First Name) Robert	2. Surname (Last Name) Negrin	3. Date 22-February-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Everett Meyer
<ol> <li>Manuscript Title         Transplantation of donor grafts with de regulatory T cells in HLA-matched recip     </li> <li>Manuscript Identifying Number (if you kr 127244-INS-CMED-1</li> </ol>	ients	l and
Section 2. The Work Under Co	onsideration for Public	ation
Did you or your institution <b>at any time</b> rece any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Section 3. Relevant financial	activities outside the s	ubmitted work.
of compensation) with entities as descri	bed in the instructions. Us	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e <b>present during the 36 months prior to publication</b> .
Are there any relevant conflicts of interest If yes, please fill out the appropriate info		
Name of Entity	Grant? Personal Non	-Financial Other? Comments
Orca Biosystems, Inc		
Section 4. Intellectual Proper	ty Patents & Copyrig	hts
Do you have any patents, whether plant If yes, please fill out the appropriate info Excess rows can be removed by pressing	rmation below. If you have	padly relevant to the work?  Yes  No e more than one entity press the "ADD" button to add a row.

Negrin 2



Paten	t <b>?</b>	Pending?	Issued?	Licensed?	Royalties?	Licensee?	Comments	
Method for selecting clinical use	Treg cells for	<b>V</b>		<b>✓</b>				
Section 5.	Relationshi	ps not cove	ered abo	ve	TOTAL V			
Are there other r potentially influe					eive to have	influenced, or	that give the appeara	ance of
	wing relationsh					•		
✓ No other rela	tionsnips/cond	litions/circun	nstances t	nat presen	t a potential	conflict of int	erest	
At the time of ma On occasion, jou						(169)	, update their disclosu onships.	ire statements.
Section 6.	Disclosure S	Statement	STATE OF					
Based on the abo below.	ove disclosures,	, this form wi	ll automa	tically gene	erate a disclo	sure statemer	nt, which will appear in	n the box
Dr. Negrin repor	ts In addition,	Dr. Negrin ha	s a paten	t Method fo	or selecting <sup>-</sup>	Treg cells for c	linical use licensed.	

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patent

Rezvani 1



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Andrew	2. Surname (Last Name) Rezvani	3. Date 22-February-2019
4. Are you the corresponding author?	Yes No	Corresponding Author's Name Everett Meyer
<ol><li>Manuscript Title Transplantation of donor grafts with de regulatory T cells in HLA-matched recip</li></ol>		ll and
6. Manuscript Identifying Number (if you k 127244-INS-CMED-1	now it)	
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C at		
Section 4. Intellectual Prope	rty Patents & Copyric	phts
Do you have any patents, whether plan	ned, pending or issued, br	oadly relevant to the work? Yes Vo

Rezvani

Section 5. Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?
Yes, the following relationships/conditions/circumstances are present (explain below):
No other relationships/conditions/circumstances that present a potential conflict of interest
Dr. Rezvani has served on one-time ad hoc scientific advisory boards for Nohla Therapeutics and for Kaleido, both in 2018. He has received research support from AbbVie for a clinical trial from 2017 through the present. He has also served as an medical expert witness for the U.S. Department of Justice. His brother is an employee of Johnson & Johnson.
At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.
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Rezvani 3



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Xie



Section 1. Identifying Inform	nation	
Given Name (First Name)  Bryan	2. Surname (Last Name) Xie	3. Date 22-February-2019
4. Are you the corresponding author?	☐ Yes ✓ No	Corresponding Author's Name Everett Meyer
5. Manuscript Title Transplantation of donor grafts with do regulatory T cells in HLA-matched recip		al and
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Intellectual Prope		
Do you have any patents, whether plar	inea, penaing or issued, br	roadly relevant to the work? Yes V No

Xie 2



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# 4. Intellectual Property.

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earning royalties or not

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

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Weng



Section 1. Identifying Inform	nation		
1. Given Name (First Name) Wen-Kai	2. Surname (Last Name) Weng		3. Date 22-February-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Nam Everett Meyer	ne
<ol> <li>Manuscript Title</li> <li>Transplantation of donor grafts with de regulatory T cells in HLA-matched recip</li> <li>Manuscript Identifying Number (if you kn</li> </ol>	ients	land	
127244-INS-CMED-1			
Section 2. The Work Under Co	onsideration for Public	ation	
Did you or your institution <b>at any time</b> recei any aspect of the submitted work (including statistical analysis, etc.)? Are there any relevant conflicts of intere	but not limited to grants, da		
Section 3. Relevant financial	activities outside the s	ubmitted work.	
Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were <b>present during the 36 months prior to publication</b> .  Are there any relevant conflicts of interest? Yes Vo			
Section 4. Intellectual Property	tu. Dataut 0.C	h c	
Do you have any patents, whether plans	ty Patents & Copyrig		Vos. ZINs
Do you have any paterns, whether plant	nea, penaing or issued, bit	day relevant to the WORK?	Yes   ✓ No



Section 5.	Relationships not covered above
	elationships or activities that readers could perceive to have influenced, or that give the appearance of ncing, what you wrote in the submitted work?
=	wing relationships/conditions/circumstances are present (explain below): tionships/conditions/circumstances that present a potential conflict of interest
At the time of ma On occasion, jou	nuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements.  rnals may ask authors to disclose further information about reported relationships.
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Dr. Wen-Kai We	ng has nothing to disclose.

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#### Instructions

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Shizuru



Section 1. Identifying Inform	nation	
1. Given Name (First Name) Judith	2. Surname (Last Name) Shizuru	3. Date 22-February-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Everett Meyer
<ol> <li>Manuscript Title Transplantation of donor grafts with de regulatory T cells in HLA-matched recip</li> </ol>		l and
6. Manuscript Identifying Number (if you kn 127244-INS-CMED-1	now it)	
Section 2. The World Line Co.		
The Work Under Co	onsideration for Public	
any aspect of the submitted work (including statistical analysis, etc.)?	but not limited to grants, da	a third party (government, commercial, private foundation, etc.) for ta monitoring board, study design, manuscript preparation,
Are there any relevant conflicts of intere	est?	
Section 3. Relevant financial	activities outside the s	ubmitted work.
of compensation) with entities as descri	bed in the instructions. Us	ether you have financial relationships (regardless of amount e one line for each entity; add as many lines as you need by e present during the 36 months prior to publication.
Are there any relevant conflicts of intere		
Section 4. Intellectual Proper	ty Patents & Copyrig	hts
Do you have any patents, whether plann	ned, pending or issued, bro	oadly relevant to the work? Yes Vo



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	elationships or activities that readers could perceive to have influenced, or that give the appearance of encing, what you wrote in the submitted work?
Yes, the follow	wing relationships/conditions/circumstances are present (explain below):
✓ No other rela	tionships/conditions/circumstances that present a potential conflict of interest
On occasion, jou	anuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. rnals may ask authors to disclose further information about reported relationships.
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Dr. Shizuru has r	nothing to disclose.

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patent

Tudisco 1



Section 1. Identifying Inform	nation	
Given Name (First Name)  Cynthia	2. Surname (Last Name) Tudisco	3. Date 22-February-2019
4. Are you the corresponding author?	Yes ✓ No	Corresponding Author's Name Everett Meyer
<ol> <li>Manuscript Title         Transplantation of donor grafts with de regulatory T cells in HLA-matched recip     </li> <li>Manuscript Identifying Number (if you known to be supported by the support of the suppor</li></ol>	ients	l and
Section 2. The Work Under Co	onsideration for Public	ation
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*		
Section 4. Intellectual Proper	rty Patents & Copyrig	hts
Do you have any patents, whether plan	ned, pending or issued, bro	oadly relevant to the work? ☐ Yes ✓ No

Tudisco 2



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Tudisco 3

# **TREND Statement Checklist**

Paper	Item	n Descriptor		Reported?	
Section/ Topic	No		V.	Pg#	
Title and Abst	ract				
Title and	1	Information on how unit were allocated to interventions	1	3	
Abstract		Structured abstract recommended	//	3	
		Information on target population or study sample	/	3	
Introduction					
Background	2	Scientific background and explanation of rationale		И	
	-	Theories used in designing behavioral interventions	N/A		
Methods	Т э	- Flightlite exitoria for participants including exitoria at different levels in	/		
Participants	3	<ul> <li>Eligibility criteria for participants, including criteria at different levels in recruitment/sampling plan (e.g., cities, clinics, subjects)</li> </ul>	V	16	
		Method of recruitment (e.g., referral, self-selection), including the	/	11	
		sampling method if a systematic sampling plan was implemented	V	16	
		Recruitment setting	V	16	
		Settings and locations where the data were collected	V	16	
Interventions	4	Details of the interventions intended for each study condition and how  and table at the survey a ctually administered energifically including:	/	17	
		and when they were actually administered, specifically including:	1	17	
		<ul><li>Content: what was given?</li><li>Delivery method: how was the content given?</li></ul>	1	17	
			-	17	
		<ul> <li>Unit of delivery: how were the subjects grouped during delivery?</li> <li>Deliverer: who delivered the intervention?</li> </ul>	-	17	
		Setting: where was the intervention delivered?	1	817	
		Exposure quantity and duration: how many sessions or episodes or	1	911	
		events were intended to be delivered? How long were they intended to last?		D	
		<ul> <li>Time span: how long was it intended to take to deliver the intervention to each unit?</li> </ul>	1	17	
		Activities to increase compliance or adherence (e.g., incentives)		17	
Objectives	5	Specific objectives and hypotheses	/	5	
Outcomes	6	Clearly defined primary and secondary outcome measures	1	16	
		Methods used to collect data and any methods used to enhance the	1	16	
		quality of measurements	ļ		
		<ul> <li>Information on validated instruments such as psychometric and biometric properties</li> </ul>	NIA		
Sample Size	7	How sample size was determined and, when applicable, explanation of any	1		
oup.c 0.20	Pi II	interim analyses and stopping rules	V	1/	
Assignment	8	Unit of assignment (the unit being assigned to study condition, e.g.,	.11		
Method		individual, group, community)	N/A		
		Method used to assign units to study conditions, including details of any	4.		
		restriction (e.g., blocking, stratification, minimization)	VIA		
		Inclusion of aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help minimize potential bias induced due      The second aspects employed to help m	MA		
		to non-randomization (e.g., matching)	17/1		

# **TREND Statement Checklist**

TARBITE SCHOOL				
Blinding (masking)	9	<ul> <li>Whether or not participants, those administering the interventions, and those assessing the outcomes were blinded to study condition assignment; if so, statement regarding how the blinding was accomplished and how it was assessed.</li> </ul>	(A	
Unit of Analysis	10	Description of the smallest unit that is being analyzed to assess intervention effects (e.g., individual, group, or community)	./	17
Si di		If the unit of analysis differs from the unit of assignment, the analytical method used to account for this (e.g., adjusting the standard error estimates by the design effect or using multilevel analysis)	NA	
Statistical Methods	11	Statistical methods used to compare study groups for primary methods outcome(s), including complex methods of correlated data	V	18
		<ul> <li>Statistical methods used for additional analyses, such as a subgroup analyses and adjusted analysis</li> </ul>	/	19
		Methods for imputing missing data, if used	N/A	
The state of the s		Statistical software or programs used		1/
Results				
Participant flow	12	<ul> <li>Flow of participants through each stage of the study: enrollment, assignment, allocation, and intervention exposure, follow-up, analysis (a diagram is strongly recommended)</li> </ul>	/	6
	11	<ul> <li>Enrollment: the numbers of participants screened for eligibility, found to be eligible or not eligible, declined to be enrolled, and enrolled in the study</li> </ul>	N/A	L.
		<ul> <li>Assignment: the numbers of participants assigned to a study condition</li> </ul>	1	6
		<ul> <li>Allocation and intervention exposure: the number of participants assigned to each study condition and the number of participants who received each intervention</li> </ul>	N/A	
		<ul> <li>Follow-up: the number of participants who completed the follow-up or did not complete the follow-up (i.e., lost to follow-up), by study condition</li> </ul>	1	6
		<ul> <li>Analysis: the number of participants included in or excluded from the main analysis, by study condition</li> </ul>	V	б
		<ul> <li>Description of protocol deviations from study as planned, along with reasons</li> </ul>	N	6
Recruitment	13	Dates defining the periods of recruitment and follow-up	V	10
Baseline Data	14	Baseline demographic and clinical characteristics of participants in each study condition	V	#W6le
		Baseline characteristics for each study condition relevant to specific disease prevention research		Tuble
		Baseline comparisons of those lost to follow-up and those retained, overall and by study condition	N/A	
		Comparison between study population at baseline and target population of interest	V	18
Baseline	15	Data on study group equivalence at baseline and statistical methods used to control for baseline differences	11/1	

# **TREND Statement Checklist**

Numbers				
analyzed	16	<ul> <li>Number of participants (denominator) included in each analysis for each study condition, particularly when the denominators change for different outcomes; statement of the results in absolute numbers when feasible</li> </ul>	NA	
		<ul> <li>Indication of whether the analysis strategy was "intention to treat" or, if not, description of how non-compliers were treated in the analyses</li> </ul>	MA	
Outcomes and estimation	17	For each primary and secondary outcome, a summary of results for each estimation study condition, and the estimated effect size and a confidence interval to indicate the precision	/	Tuble
		Inclusion of null and negative findings		16-20
-		<ul> <li>Inclusion of results from testing pre-specified causal pathways through which the intervention was intended to operate, if any</li> </ul>		18-20
Ancillary analyses	18	Summary of other analyses performed, including subgroup or restricted analyses, indicating which are pre-specified or exploratory	/	19
Adverse events	19	<ul> <li>Summary of all important adverse events or unintended effects in each study condition (including summary measures, effect size estimates, and confidence intervals)</li> </ul>		Table
DISCUSSION				
Interpretation	20	Interpretation of the results, taking into account study hypotheses, sources of potential bias, imprecision of measures, multiplicative analyses,		17 41
		and other limitations or weaknesses of the study	,	13-14
		<ul> <li>and other limitations or weaknesses of the study</li> <li>Discussion of results taking into account the mechanism by which the intervention was intended to work (causal pathways) or alternative mechanisms or explanations</li> </ul>	/	13 AG
		Discussion of results taking into account the mechanism by which the intervention was intended to work (causal pathways) or alternative		13 74 15
		<ul> <li>Discussion of results taking into account the mechanism by which the intervention was intended to work (causal pathways) or alternative mechanisms or explanations</li> <li>Discussion of the success of and barriers to implementing the intervention,</li> </ul>		Î5
Generalizability	21	<ul> <li>Discussion of results taking into account the mechanism by which the intervention was intended to work (causal pathways) or alternative mechanisms or explanations</li> <li>Discussion of the success of and barriers to implementing the intervention, fidelity of implementation</li> </ul>		15

From: Des Jarlais, D. C., Lyles, C., Crepaz, N., & the Trend Group (2004). Improving the reporting quality of nonrandomized evaluations of behavioral and public health interventions: The TREND statement. American Journal of Public Health, 94, 361-366. For more information, visit: <a href="http://www.cdc.gov/trendstatement/">http://www.cdc.gov/trendstatement/</a>