ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
John

2. Surname (Last Name)  
Millar

3. Date  
09-October-2014

4. Are you the corresponding author?  
✔ Yes  
No

5. Manuscript Title  
CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
✔ Yes  
No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the "X" button.

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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 present during the 36 months prior to publication.

Are there any relevant conflicts of interest?  
No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
✔ Yes  
No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):

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At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement

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

Dr. Millar reports grants and personal fees from Merck, grants from NIH, during the conduct of the study.

Evaluation and Feedback

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.
**Section 1. Identifying Information**

1. **Given Name (First Name)**
   - Gissette

2. **Surname (Last Name)**
   - Soffer

3. **Date**
   - 23-September-2014

4. **Are you the corresponding author?**
   - Yes ✔

5. **Manuscript Title**
   - CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. **Manuscript Identifying Number (if you know it)**

**Section 2. The Work Under Consideration for Publication**

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ✔ Yes  No

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Are there any relevant conflicts of interest? ✔ Yes  No

If yes, please fill out the appropriate information below.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights
Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  ☐ Yes  ✔ No

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?

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Section 6. Disclosure Statement
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Dr. Soffer reports grants and non-financial support from Merck, Inc., during the conduct of the study; grants and personal fees from Genzyme/Sanofi, outside the submitted work.

Evaluation and Feedback
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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Patricia
2. Surname (Last Name)  Jumes
3. Date  15-September-2014
4. Are you the corresponding author?  ☑ No
   Corresponding Author’s Name  Millar J
5. Manuscript Title  CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance
6. Manuscript Identifying Number (if you know it)  

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest?  ☑ Yes  ☐ No

Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the “Add +” box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest?  ☑ Yes  ☐ No
If yes, please fill out the appropriate information below.

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  ☑ No  ☐ Yes
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?

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Patricia Jumes is an employee of Merck & Co., Inc.

Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.
### Section 1. Identifying Information

1. **Given Name (First Name)**
   - Richard

2. **Surname (Last Name)**
   - Dunbar

3. **Date**
   - 28-August-2014

4. **Are you the corresponding author?**
   - Yes

5. **Manuscript Title**
   - CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. **Manuscript Identifying Number (if you know it)**

### Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

- Are there any relevant conflicts of interest?  Yes

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the "X" button.

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Are there any relevant conflicts of interest?  Yes

If yes, please fill out the appropriate information below.

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? □ Yes  ✔ No

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

□ Yes, the following relationships/conditions/circumstances are present (explain below):

✔ No other relationships/conditions/circumstances that present a potential conflict of interest

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Section 6. Disclosure Statement

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

Dr. Dunbar reports grants from Merck, during the conduct of the study; personal fees from Regeneron, outside the submitted work.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Emil
2. Surname (Last Name)  deGoma
3. Date  20-October-2014
4. Are you the corresponding author?  Yes  No
5. Manuscript Title  CETP inhibition with anaetrapib lowers LDL by increasing apoB clearance
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?
Are there any relevant conflicts of interest?  Yes  No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  Yes  No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):

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Section 6. Disclosure Statement

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

Dr. deGoma has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Amanda

2. Surname (Last Name)  
   Baer

3. Date  
   10-September-2014

4. Are you the corresponding author?  
   ☐ Yes  ☑ No
   
   Corresponding Author's Name
   John Millar

5. Manuscript Title  
   CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. Manuscript Identifying Number (if you know it)  
   00027400

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
   ☐ Yes  ☑ No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  
   ☐ Yes  ☑ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   ☐ Yes  ☑ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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?

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Section 6. Disclosure Statement

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

Dr. Baer has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Wahida
2. Surname (Last Name) Karmally
3. Date 30-September-2014
4. Are you the corresponding author? ☑ No
5. Manuscript Title CETP inhibition with anaetrapib lowers LDL by increasing apoB clearance
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☑ No

Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? ☑ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☑ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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None that influenced the study

Evaluation and Feedback

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

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<td>Daniel</td>
<td>Donovan</td>
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4. Are you the corresponding author?  
   - Yes  
   - No  
   ✔ No

5. Manuscript Title  
   CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. Manuscript Identifying Number (if you know it) 

## Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
   - Yes  
   ✔ Yes  
   - No  
   No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the "X" button.

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Are there any relevant conflicts of interest?  
   - Yes  
   ✔ Yes  
   - No  
   No

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
☐ Yes  ✔ No

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?

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Dr. Donovan reports grants from Merck, during the conduct of the study; grants and personal fees from Merck, outside the submitted work; .

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

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<td>4. Are you the corresponding author?</td>
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### Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest? ☑ No

### Section 3. Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest? ☑ No

### Section 4. Intellectual Property -- Patents & Copyrights

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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

Dr. Rafeek has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Laura

2. Surname (Last Name)  
   Pollan

3. Date  
   30-September-2014

4. Are you the corresponding author?  
   □ Yes  ✔ No

   Corresponding Author’s Name  
   JS Miller

5. Manuscript Title  
   CETP inhibition with anacetrpib lowers LDL by increasing apoB clearance

6. Manuscript Identifying Number (if you know it)

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**Section 2. The Work Under Consideration for Publication**

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
   □ Yes  ✔ No

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Are there any relevant conflicts of interest?  
   □ Yes  ✔ No

---

**Section 4. Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)       Junichiro
2. Surname (Last Name)           Tohyama
3. Date                           14-October-2014
4. Are you the corresponding author?  ☑ No

Corresponding Author’s Name: John S. Millar

5. Manuscript Title
   CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?
Are there any relevant conflicts of interest?  ☑ No

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Are there any relevant conflicts of interest?  ☑ No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  ☑ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above
Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):
☑ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

Section 6. Disclosure Statement
Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

Dr. Tohyama has nothing to disclose.

Evaluation and Feedback
Please visit http://www.icmje.org/cgi-bin/feedback to provide feedback on your experience with completing this form.
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
Amy

2. Surname (Last Name)  
Johnson-Levonas

3. Date  
09-September-2014

4. Are you the corresponding author?  
Yes  ✔  No

Corresponding Author’s Name  
JS Milar

5. Manuscript Title  
CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  ✔ Yes  No

If yes, please fill out the appropriate information below. If you have more than one entity press the “ADD” button to add a row. Excess rows can be removed by pressing the “X” button.

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Amy O. Johnson-Levonas is an employee of Merck & Co., Inc. and as such owns stock in the company

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 present during the 36 months prior to publication.

Are there any relevant conflicts of interest?  ✔ Yes  No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  ✔ Yes  No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   John

2. Surname (Last Name)  
   Wagner

3. Date  
   23-September-2014

4. Are you the corresponding author?  
   Yes ☑  No

   Corresponding Author’s Name  
   John S. Millar, Gisette Reyes-Soffer

5. Manuscript Title  
   CETP inhibition with anacetrapib lowers LDL y increasing apoB clearance

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
   Yes ☑  No

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Are there any relevant conflicts of interest?  
   Yes ☑  No

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☑ No

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?

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Section 6. Disclosure Statement

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

Dr. Wagner reports other from Merck & Co., Inc., during the conduct of the study; other from Merck & Co. Inc., outside the submitted work;

Evaluation and Feedback

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

## Section 1. Identifying Information

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<td>4. Are you the corresponding author?</td>
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## Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes ✔ No

## Section 3. Relevant financial activities outside the submitted work.

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were present during the 36 months prior to publication.

Are there any relevant conflicts of interest? Yes ✔ No

## Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes ✔ No
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?

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Section 6. Disclosure Statement

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

Dr. Holleran has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Joseph

2. Surname (Last Name)  
   Obunike

3. Date  
   14-October-2014

4. Are you the corresponding author?  
   Yes  ✔  No

   Corresponding Author’s Name  
   JS Miller

5. Manuscript Title  
   CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. Manuscript Identifying Number (if you know it)  
   PN 026 ApoB

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  

Are there any relevant conflicts of interest?  
   Yes  ✔  No

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Are there any relevant conflicts of interest?  
   Yes  ✔  No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   Yes  ✔  No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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Section 6. Disclosure Statement

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Dr. Obunike has nothing to disclose.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Yang

2. Surname (Last Name)  
   Liu

3. Date  
   09-September-2014

4. Are you the corresponding author?  
   ☑ No

   Corresponding Author’s Name  
   J Millar

5. Manuscript Title  
   CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. Manuscript Identifying Number (if you know it)

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Are there any relevant conflicts of interest?  
   ☑ No

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Are there any relevant conflicts of interest?  
   ☑ Yes  
   ☑ No

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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   ☑ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

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ICMJE Form for Disclosure of Potential Conflicts of Interest

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.

1. Identifying information.

2. The work under consideration for publication.

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party—that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. Relevant financial activities outside the submitted work.

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected finanically by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.


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

5. Relationships not covered above.

Use this section to report 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.

Definitions.

Entity: government agency, foundation, commercial sponsor, academic institution, etc.

Grant: A grant from an entity, generally (but not always) paid to your organization

Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations

Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

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
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1: Identifying Information

1. Given Name (First Name)  
   Rajas  

2. Surname (Last Name)  
   Rama Krisnan  

3. Date  
   Oct. 23, 2014  

4. Are you the corresponding author?  
   □ Yes  ✔ No  

5. Manuscript Title  
   Anacetrapib increases LDL apoB clearance both as a monotherapy and in combination with a statin  

6. Manuscript Identifying Number (if you know it)  

Section 2: The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  
Are there any relevant conflicts of interest?  
   □ Yes  ✔ No  

Section 3: Relevant financial activities outside the submitted work.

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Are there any relevant conflicts of interest?  
   □ Yes  ✔ No  

Section 4: Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
   □ Yes  ✔ No
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 5. Relationships not covered above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):
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Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name) Michael
2. Surname (Last Name) Lassman
3. Date 23-September-2014
4. Are you the corresponding author? ☑ No
5. Manuscript Title CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance
6. Manuscript Identifying Number (if you know it) 0027400

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)? Are there any relevant conflicts of interest? ☑ No

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Are there any relevant conflicts of interest? ☑ Yes ☐ No
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Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☑ No
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Dr. Lassman reports other from Merck & Co, outside the submitted work.

Evaluation and Feedback

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   David

2. Surname (Last Name)  
   Gutstein

3. Date  
   09-September-2014

4. Are you the corresponding author?  
   ☑ No

Corresponding Author’s Name  
   John Millar

5. Manuscript Title  
   CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
   ☑ No

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Are there any relevant conflicts of interest?  
   ☑ No

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☑ Yes, the following relationships/conditions/circumstances are present (explain below):

☐ No other relationships/conditions/circumstances that present a potential conflict of interest

I am a full-time employee of Merck & Co, and I own stock in Merck & Co.

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

Dr. Gutstein reports and I am a full-time employee of Merck & Co, and I own stock in Merck & Co.

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**ICMJE Form for Disclosure of Potential Conflicts of Interest**

**Section 1. Identifying Information**

1. Given Name (First Name)  
   Henry

2. Surname (Last Name)  
   Ginsberg

3. Date  
   21-September-2014

4. Are you the corresponding author?  
   ✔ Yes  
   No

Corresponding Author’s Name  
John Millar

5. Manuscript Title  
   CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. Manuscript Identifying Number (if you know it)  
   00027400

**Section 2. The Work Under Consideration for Publication**

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest?  
✔ Yes  
No

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**Section 3. Relevant financial activities outside the submitted work.**

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Are there any relevant conflicts of interest?  
✔ Yes  
No

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Consultant: honoraria limited to $5000/year by Columbia University Guidelines
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
☐ Yes  ✔ No

Section 5. Relationships not covered above

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Dr. Ginsberg reports grants from Merck, during the conduct of the study; personal fees from Merck, outside the submitted work.

Evaluation and Feedback

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# ICMJE Form for Disclosure of Potential Conflicts of Interest

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<td>Rader</td>
<td>06-November-2014</td>
</tr>
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</table>

4. Are you the corresponding author?  
   - [ ] Yes  
   - X Yes  

Corresponding Author’s Name  
John Millar

5. Manuscript Title  
CETP inhibition with anacetrapib lowers LDL by increasing apoB clearance

6. Manuscript Identifying Number (if you know it)

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Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  
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