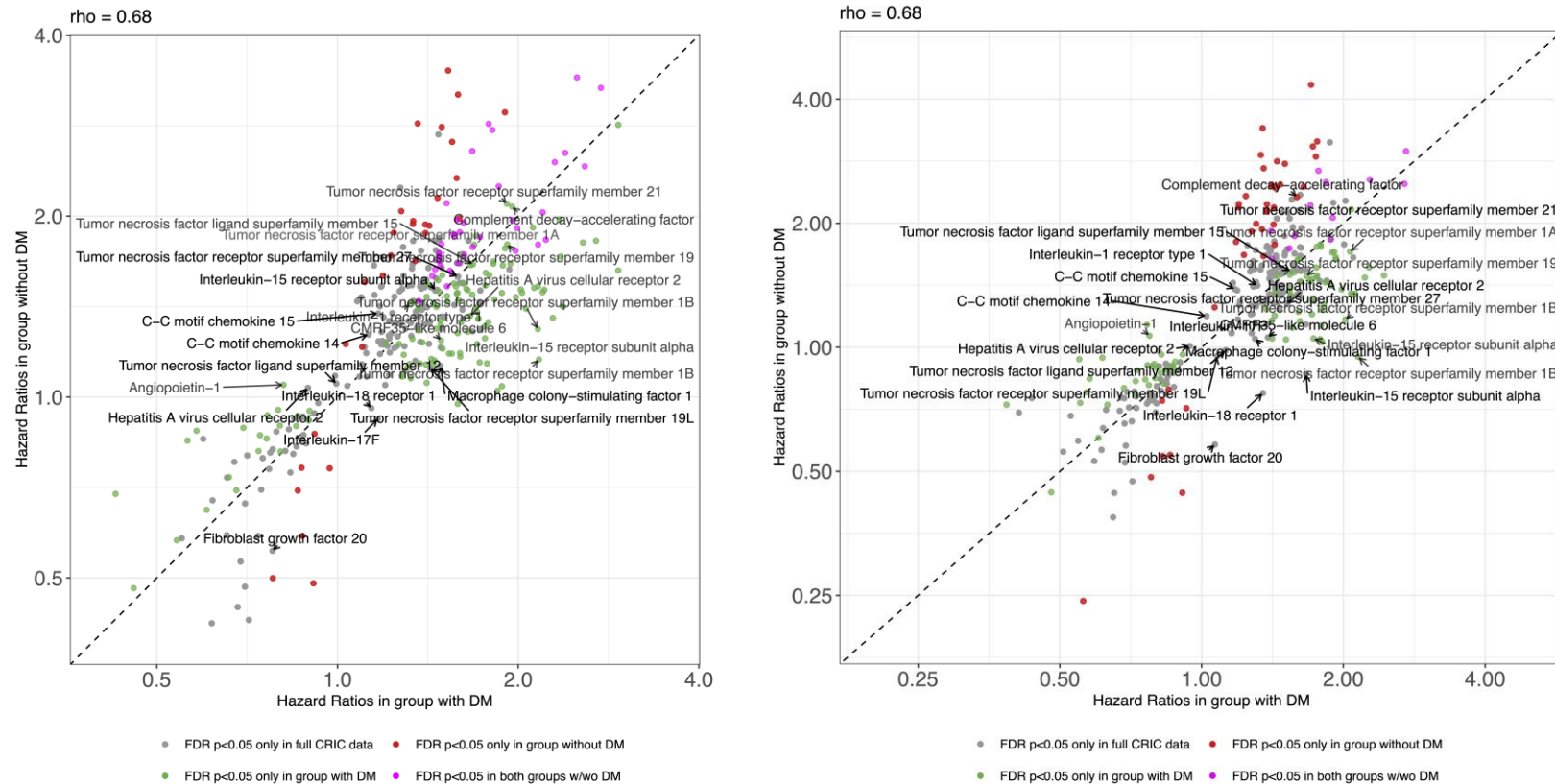


Supplementary Figure 1

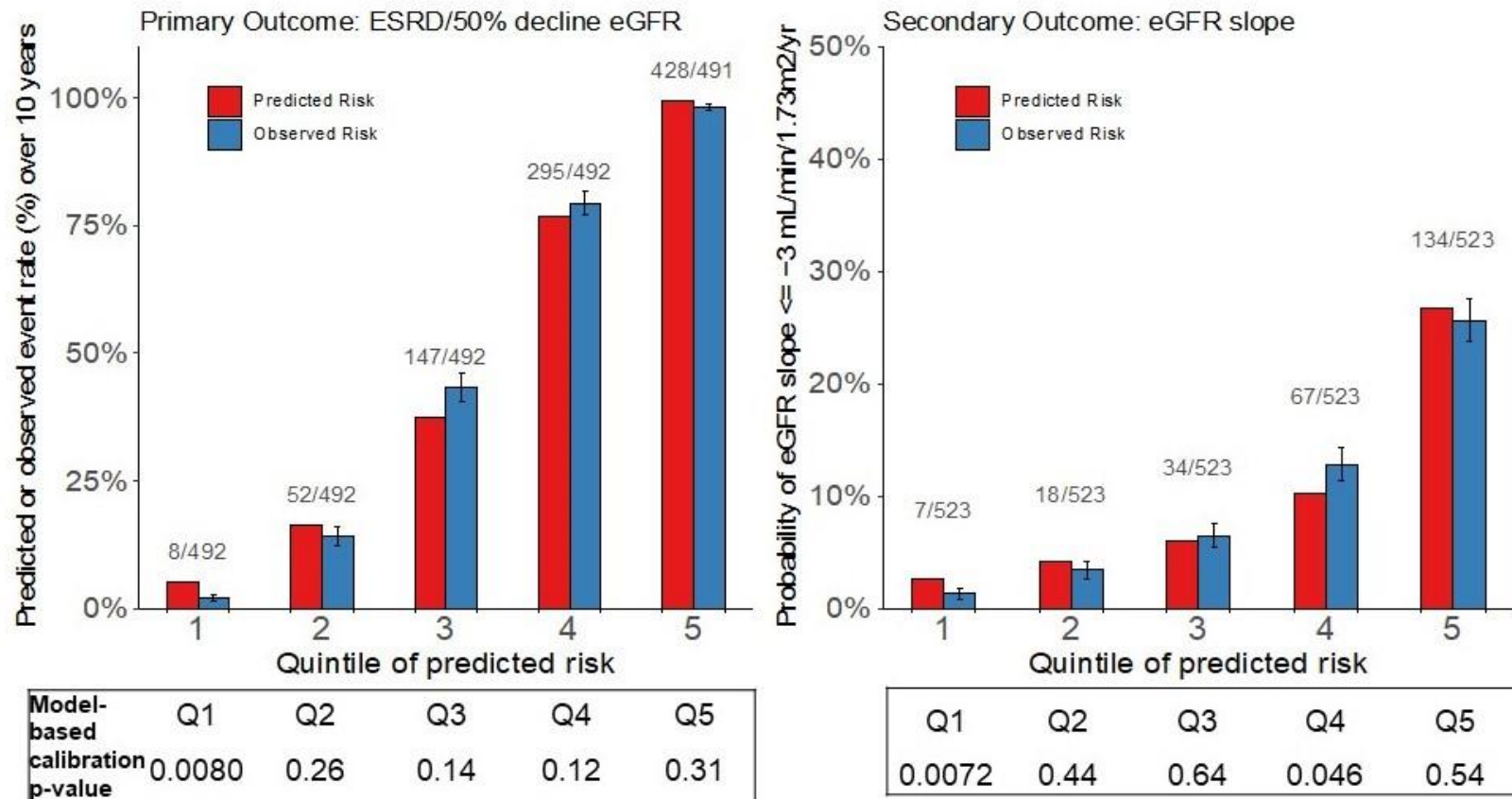
Hazard Ratios For CKD Progression in Participants With and Without Diabetes



Fully adjusted log2 hazard ratios for the outcome 10-year ESRD/50% eGFR decline (left) and ESRD alone (right), shown in participants with or without DM, for each of the proteins that were associated with respective outcomes in the full CRIC cohort at FDR < 0.05 (330 proteins for 10-year ESRD/50% eGFR decline and 287 for ESRD alone). Fully adjusted model includes age, gender, race, systolic blood pressure, tobacco use, body mass index, history of cardiovascular disease, eGFR, UPCR. Dotted line illustrates rho of 1.

Supplementary Figure 2

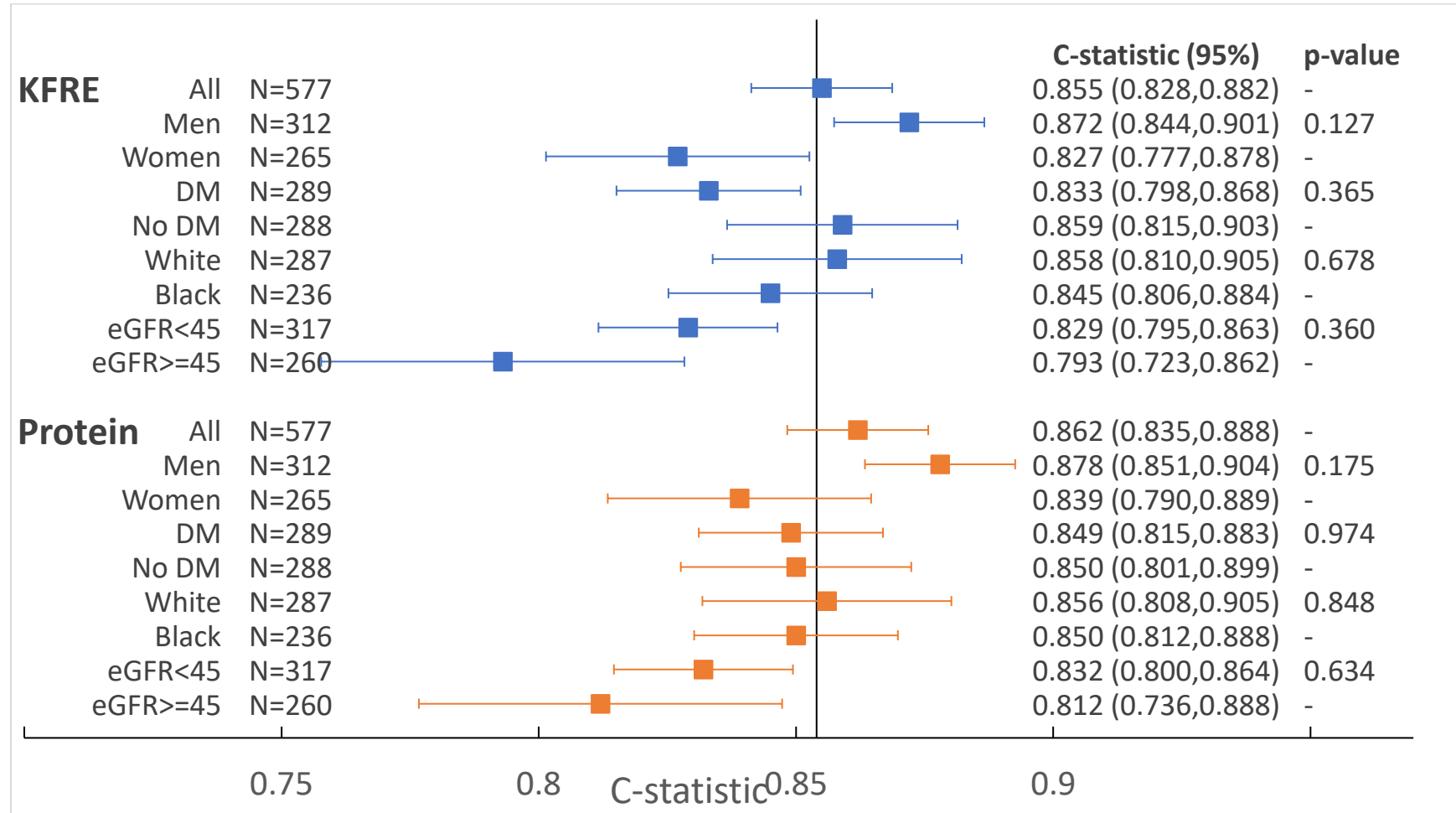
Calibration of the Proteomic Risk Models for Primary and Secondary Outcome in CRIC



Calibration was performed in the training set, N=2459 for primary outcome, N=2615 for secondary outcome. Bars represent 1 standard error of observed risks of the primary and secondary outcomes in each quintile, respectively. The plots also illustrate the breadth of the dynamic range of the predicted and associated observed risk. For the primary outcome and secondary outcome, Q5/Q1 risk is 20 and 10, respectively. Calibration p-values are one-sided.

Supplementary Figure 3

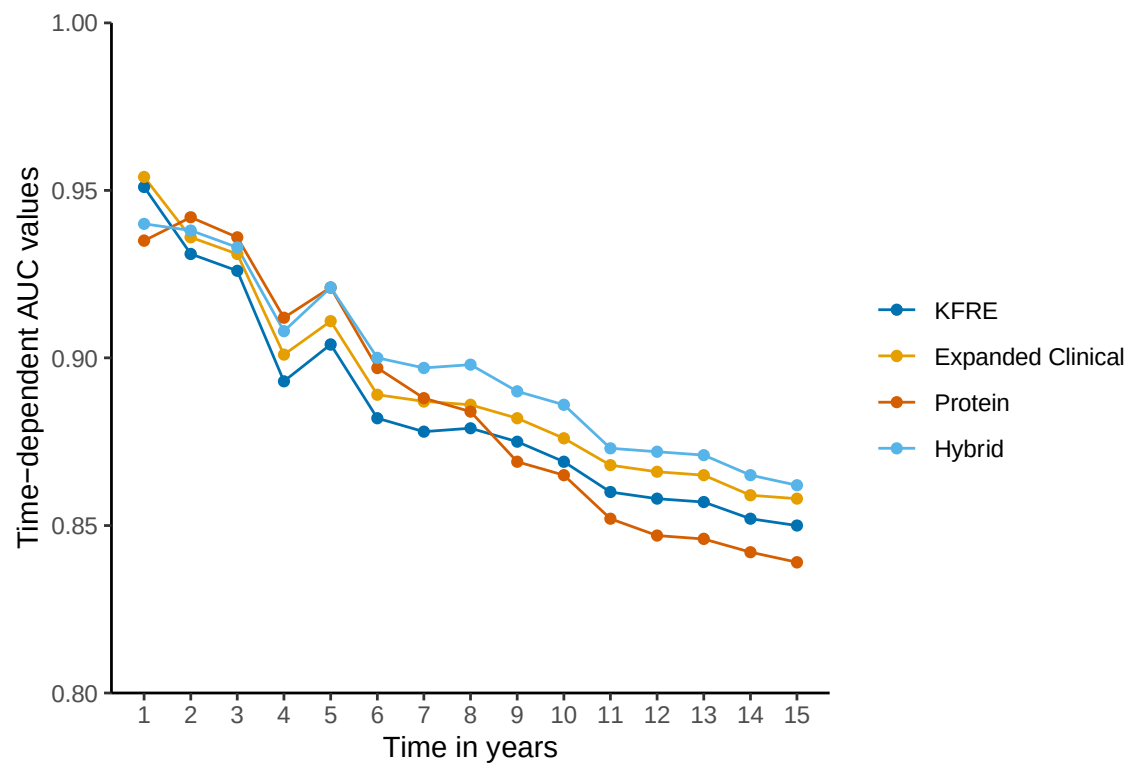
Subgroup Analyses for KFRE and 65-Protein Risk Model



Point estimates and standard errors for c-statistic in CRIC for the primary renal outcome are shown in subgroups of gender, diabetes, race and eGFR. All tests use two-sided, raw p-values.

Supplementary Figure 4

Time-dependent AUCs For Risk Models of 10-Year CKD Progression



Time-dependent AUCs are shown for each risk model in the 20% testing set in CRIC.

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