

## Supplementary Material

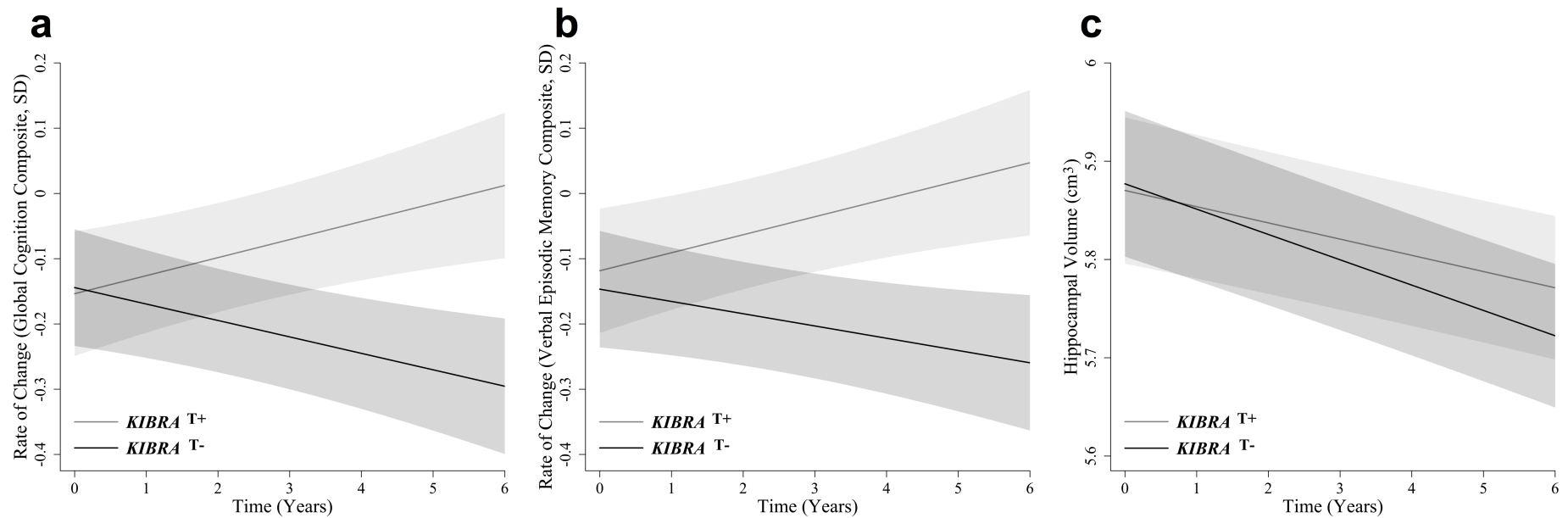
### ***KIBRA is associated with accelerated cognitive decline and hippocampal atrophy in APOE $\epsilon$ 4-positive cognitively normal adults with high A $\beta$ -amyloid burden***

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**Supplementary Table 1. Mean slopes for cognitive composites and hippocampal atrophy in all imaged cognitively normal participants by *KIBRA* carrier status**

	<i>KIBRA</i> T carrier	<i>KIBRA</i> non-T carrier	
	$\beta$	$\beta$	p
<b>Global</b>	0.028	-0.025	0.051
<b>Verbal Episodic Memory</b>	0.028	-0.019	0.085
<b>Hippocampal Atrophy</b>	-0.017	-0.026	0.242

Mean slopes for cognitive composites (presented in SD/year; n=602) and hippocampal atrophy (presented in cm<sup>3</sup>/year; n=548) in all imaged cognitively normal participants, controlling for *APOE*  $\epsilon$ 4 carrier and A $\beta$ -amyloid status. \*Represents a nominally statistically significant difference in slope of the *KIBRA* non-T carrier (C\_C) group when compared to the *KIBRA* T carrier (T\_T and C\_T) group.



**Supplementary Figure 1. Rates of change in cognitively normal adults based on *KIBRA* T carriage.**

Rates of change are presented for (a) a statistically driven global composite, (b) a verbal episodic memory composite, (c) hippocampal atrophy (n=548) in cognitively normal adults (n=602 unless otherwise stated). *KIBRA* T carriers (grey) and non-T carriers (black), controlling for *APOE*  $\epsilon$ 4 carrier and A $\beta$ -amyloid status. Hippocampal atrophy analysis also controlled for gender (shading represents time dependent standard error, \* p<0.05).