Table S1: Multiple regression analyses predicting coping from EF at the 1-year visit

	Approach Composite				Avoidance Composite				Behavioral Disengagement				Mental Disengagement				Denial			
	R2	B	SE B	β	R2	B	SE B	β	R2	B	SE B	β	R2	B	SE B	β	R2	B	SE B	β
Objective EF	.054	.016	.060	.023	.074	.031	.011	**-.252****	**.095***	-.159	.051	**-.266****	.076	-.206	.074	**-.241****	.114	-.008	.046	-.015
Subjective EF	.058	.050	.053	.075	**.136****	.042	.009	**.346****	**.138****	.192	.045	**.325****	**.084***	.203	.066	**.240****	.134	.079	.041	.147

Footnote: Multiple regression analyses predicting approach and avoidance coping composites and avoidance subscales from objective and subjective EF. Each model includes *a priori* hypothesized covariates: IQ, race, age, cancer stage, receipt of chemotherapy, and endocrine therapy. Abbreviations: EF = executive functioning. * p<.05, ** p<.01

Table S2: Multiple regression analyses predicting depressive symptoms from EF and coping at the 1-year visit

	Depressive Symptoms			
	R2	B	SE B	Beta
Model 1: Objective EF	.070	-.304	.163	-.162+
Model 2: Subjective EF	**.340****	1.043	.123	**.561****
Model 3: Approach Composite	.050	-.009	.217	-.003
Model 3: Avoidance Composite	**.139****	4.596	1.126	**.301****
Model 4: Behavioral Disengagement	**.135****	.932	.234	**.296****
Model 5: Mental Disengagement	**.120****	.588	.164	**.268****
Model 6: Denial	.053	.183	.278	.053

Footnote: Multiple regression analyses predicting depressive symptoms from objective and subjective EF, approach and avoidance coping composites, and avoidance subscales. Each model includes *a priori* hypothesized covariates: IQ, race, age, cancer stage, receipt of chemotherapy, and endocrine therapy. Abbreviations: EF = executive functioning. * p<.05, ** p<.01, + = .06

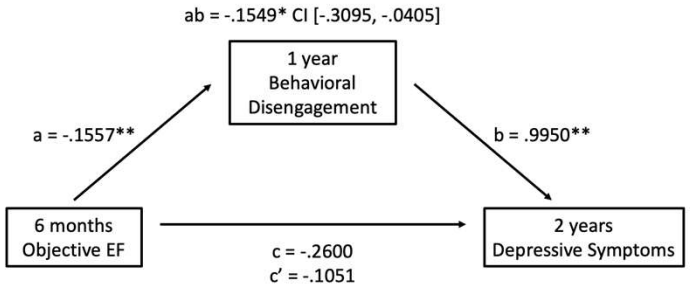
Figure Captions

Figure S1: Mediation models of the associations between objective (1a) and subjective (1b) EF at 6 months and depressive symptoms at 2 years mediated by behavioral disengagement at 1 year among breast cancer survivors. Unstandardized regression coefficients for all paths and the 95% CI for the indirect path are reported. Each model included *a priori* hypothesized covariates including IQ, race, age, cancer stage, receipt of chemotherapy, and endocrine therapy. Abbreviations: a, direct effect of EF on behavioral disengagement; b, direct effect of behavioral disengagement on depressive symptoms after controlling for EF; c, total effect of EF on depressive symptoms; c', direct effect of EF on depressive symptoms after controlling for behavioral disengagement; ab, indirect effect of EF on depressive symptoms mediated by behavioral disengagement, EF = executive functioning. * $p<.05$, ** $p<.01$

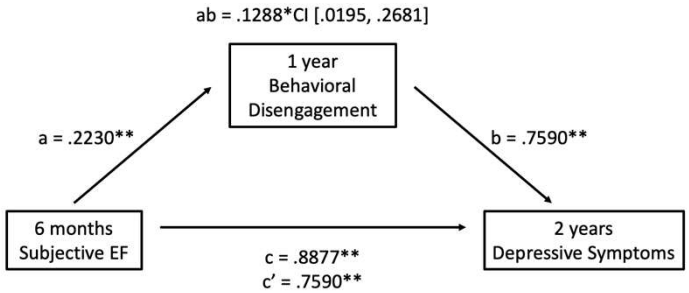
Figure S2: Mediation models of the associations between objective (1a) and subjective (1b) EF at 6 months and depressive symptoms at 2 years mediated by mental disengagement at 1 year among breast cancer survivors. Unstandardized regression coefficients for all paths and the 95% CI for the indirect path are reported. Each model included *a priori* hypothesized covariates including IQ, race, age, cancer stage, receipt of chemotherapy, and endocrine therapy. Abbreviations: a, direct effect of EF on mental disengagement; b, direct effect of mental disengagement on depressive symptoms after controlling for EF; c, total effect of EF on depressive symptoms; c', direct effect of EF on depressive symptoms after controlling for mental disengagement; ab, indirect effect of EF on depressive symptoms mediated by mental disengagement, EF = executive functioning. * $p<.05$, ** $p<.01$

Supplementary Figure 1: Behavioral disengagement as mediator

1a. Objective EF as predictor

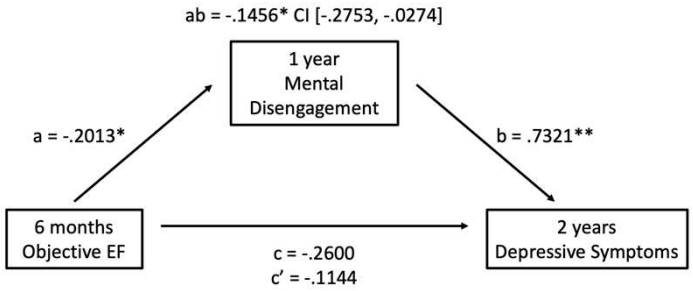


1b. Subjective EF as predictor



Supplementary Figure 2: Mental disengagement as mediator

2a. Objective EF as predictor



2b. Subjective EF as predictor