Supplementary Table 1. Specific causes of cardiovascular death

Mortality cause	No of CVD-deaths
Ischemic heart disease	46
Cerebrovascular disease	14
Heart Failure	10
Other cardiovascular disease	19
(including, generalized	
atherosclerosis, malignant	
hypertension, arrhythmias,	
valvular disease, aneurysms)	
Total	89
1 Utai	09

Supplementary Table 2. The association between KIM-1 concentrations (without creatinine standardization) and cardiovascular mortality:

multivariable Cox regression

	Model A	Model B	Model C
	Hazard ratio	Hazard ratio	Hazard ratio
	(95%CI)	(95%CI)	(95%CI)
Continuous models 1 SD increase	1.29 (1.09-1.51)	1.30 (1.10-	1.22 (1.01-
	†	1.55) †	1.47)*

^{*}p<0.05, † p<0.01, ‡ p<0.001

Model A age

Model B age and established cardiovascular risk factors (known CVD at baseline, antihypertensive treatment, lipid lowering treatment, low-dose aspirin treatment, current smoking, diabetes, systolic blood pressure, BMI, total cholesterol and HDL cholesterol)

Model C age, established cardiovascular risk factors, eGFR, and albumin/creatinine ratio

Supplementary Table 3. The association between KIM-1/24 hours, KIM-1/creatinine and cardiovascular mortality.

·	Number of events/ numbers at risk	KIM-1/ 24 hours	KIM- 1/creatinine
		HR (95 % CI)	HR (95 % CI)
Whole sample	89/590	1.08 (0.94-1.24)	1.50 (1.29-1.75)
Individuals with >1 l urine/24 hours	64/402	1.86 (1.08-3.23)	1.51 (1.28-1.78)
Individuals with >1.5 l urine/24 hours	34/195	2.97 (1.41-6.27)	1.56 (1.29-1.89)