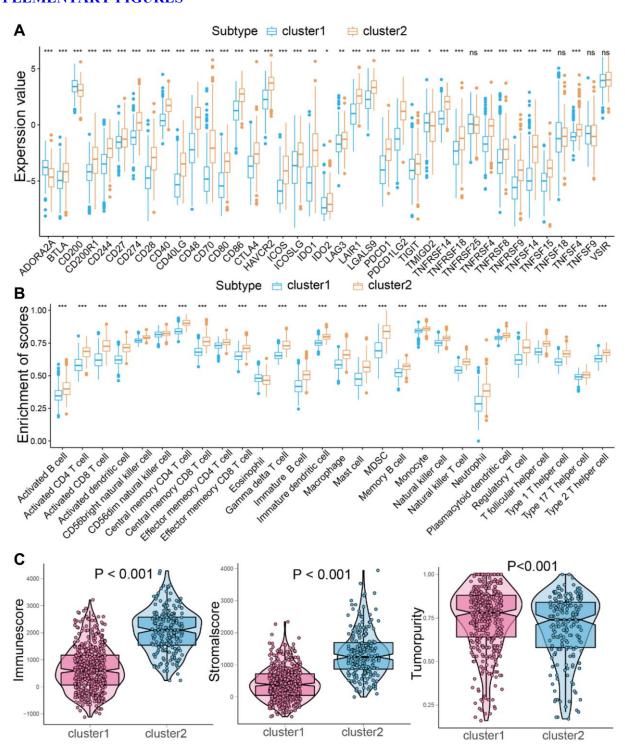
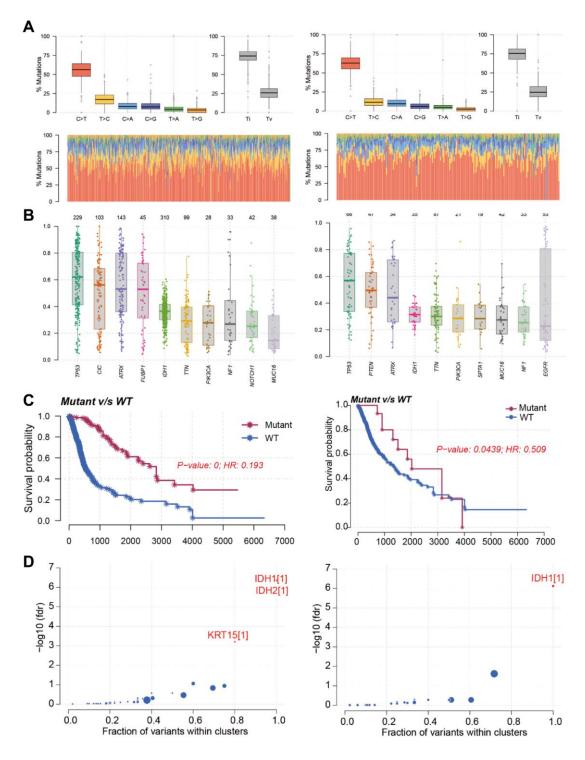
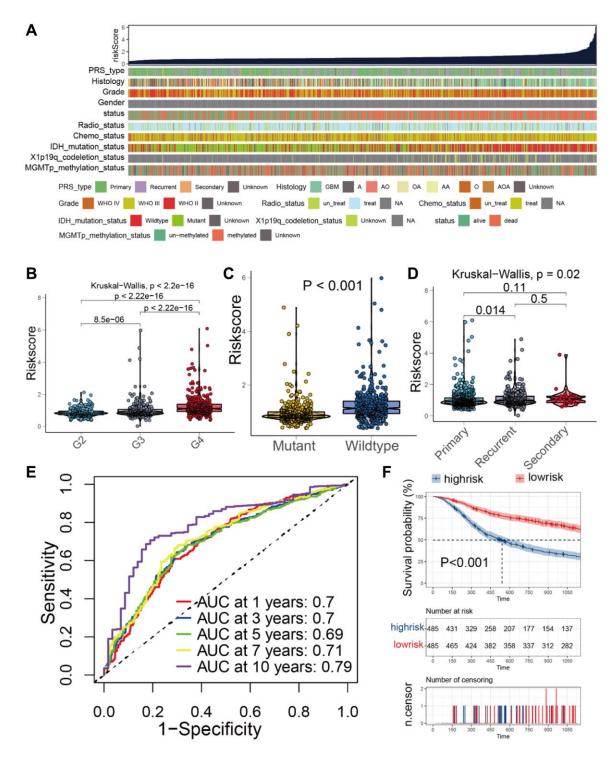
SUPPLEMENTARY FIGURES



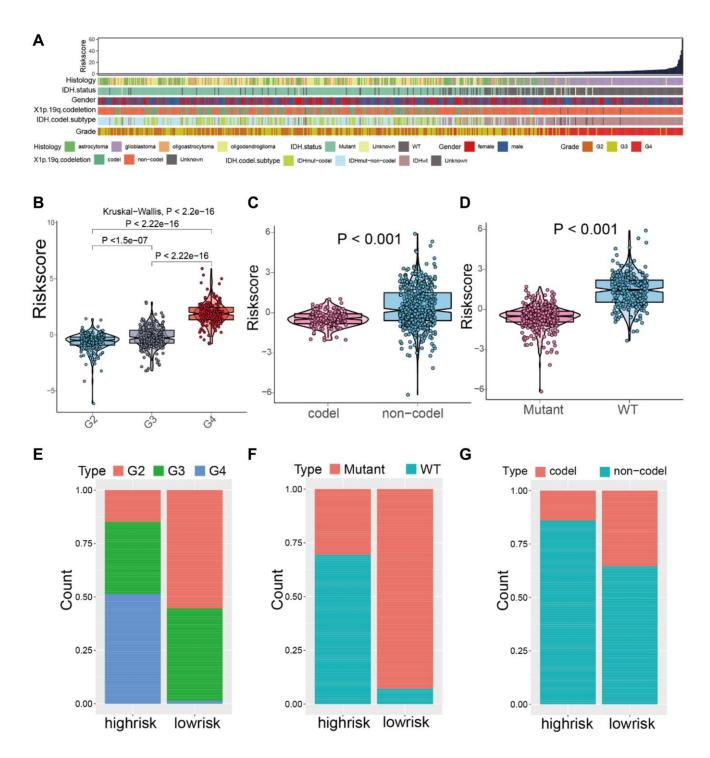
Supplementary Figure 1. The immune landscape of two cluster groups. (A) The expression value of immune checkpoint between cluster1 and cluster2 groups. (B) The enrichment scores of 22 kinds of immune cells between cluster1 and cluster2 groups. (C) The distribution of ESTIMATEscore in two cluster groups.



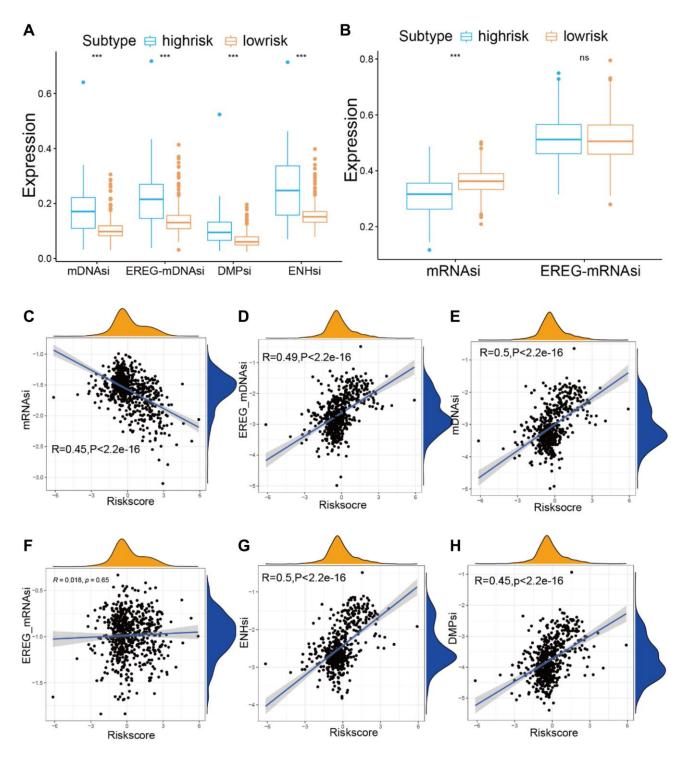
Supplementary Figure 2. Landscape of somatic mutation two cluster groups. (A) DNA substitution types including transition (Ti) and transversion (Tv). (B) Variant Allele Frequency expression of the top 10 genes of the two cluster groups. (C) Kaplan-Meier curves show the independent relevance between overall survival time and IDH1 mutation two cluster groups. (D) Distribution of tumor driver genes in two cluster groups.



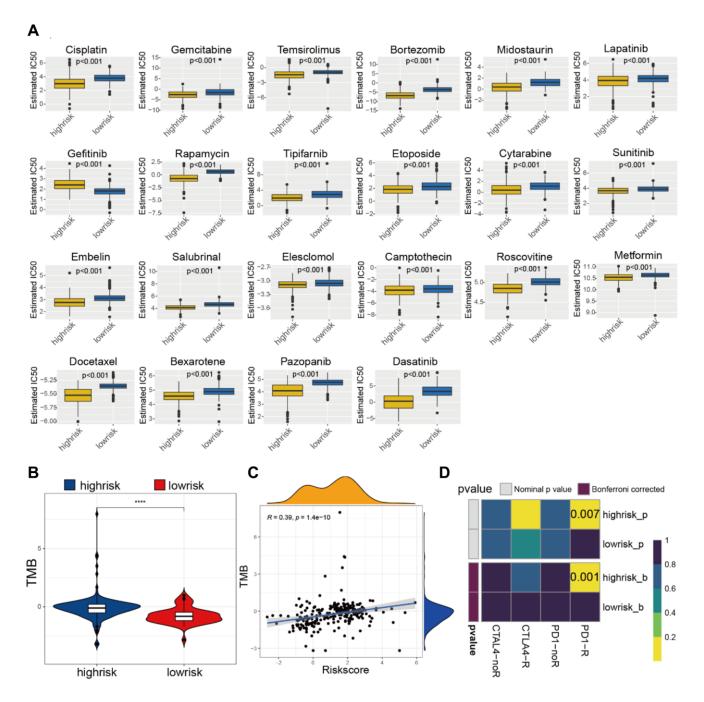
Supplementary Figure 3. The relationship between grades, IDH1 mutation types, 1p19q status, and riskscore in CGGA cohort. (A) An overview of the association between riskscore and clinical characteristics. (B–D) Analyses of the relationship between IDH1mut type, recurrence status, grades and PRLPM riskscore. (E) The timeROC curve to evaluate the prognostic value of PRLPM riskscore in CCGA cohort. (F) KM curve plot of OS for patients in high- and low-risk subgroups in CGGA cohort.



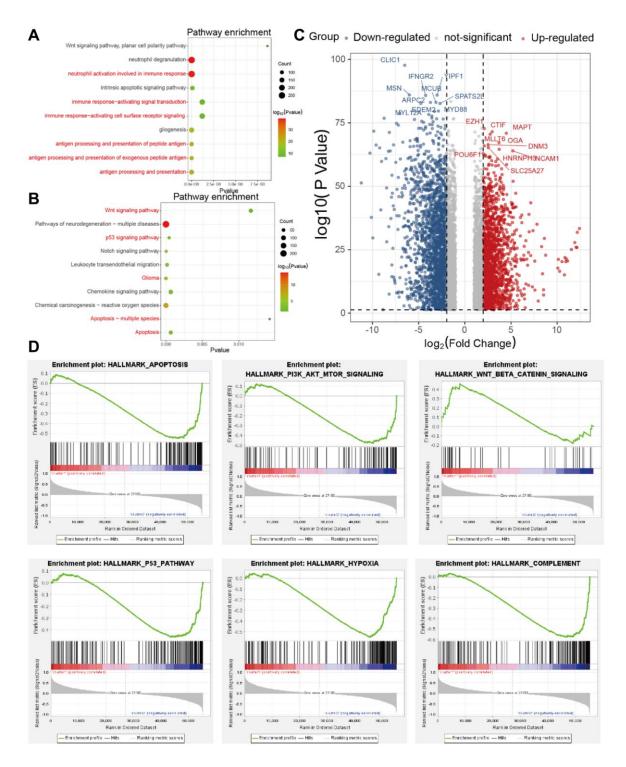
Supplementary Figure 4. The relationship between grades, IDH1 mutation types, 1p19q status, and riskscore in TCGA cohort. (A) An overview of the association between riskscore and clinical characteristics (Histology, IDH.status, Gender, IDHcodel.subtype and Grade). (B–D) Analyses of the relationship between IDH1 mutation type, recurrence status, 1p19q status and PRLPM riskscore. (E–G) The proportion of patients with IDH1 mutation type, recurrence status, 1p19q status in the high- or low-riskscore groups in the TCGA cohort.



Supplementary Figure 5. Differences in stemness indices between the high- and low-risk groups. (A, B) Analyses of relationship between stemness indices and high- and low-risk groups. (C–H) The relationship between mDNAsi, DMPsi, EREG-mDNAsi, ENHsi, EREG-RNAsi, mRNAsi and riskscore.



Supplementary Figure 6. Estimated drug sensitivity in patients with high- and low-risk groups. (A) The chemotherapy response of two prognostic subtypes for 30 common chemotherapy drugs. (B) The TMB expression value in high- and low-risk groups. (C) Correlations between the PRLPM riskscore and TMB for each cancer type. (D) Comparison of the effectiveness of PRLs signature-based stratification in predicting ICB responsiveness.



Supplementary Figure 7. Functional enrichment analyses of DEGs between high- and low-risk group in the TGCA cohort. (A, B) Gene Ontology (GO) and Kyoto Encyclopedia of Genes and Genomes (KEGG) enrichment analysis of DEGs. (C) The volcano plot for the DEGs between high- and low-risk group. (D) Gene set enrichment analysis (GSEA) enrichment analysis of DEGs.