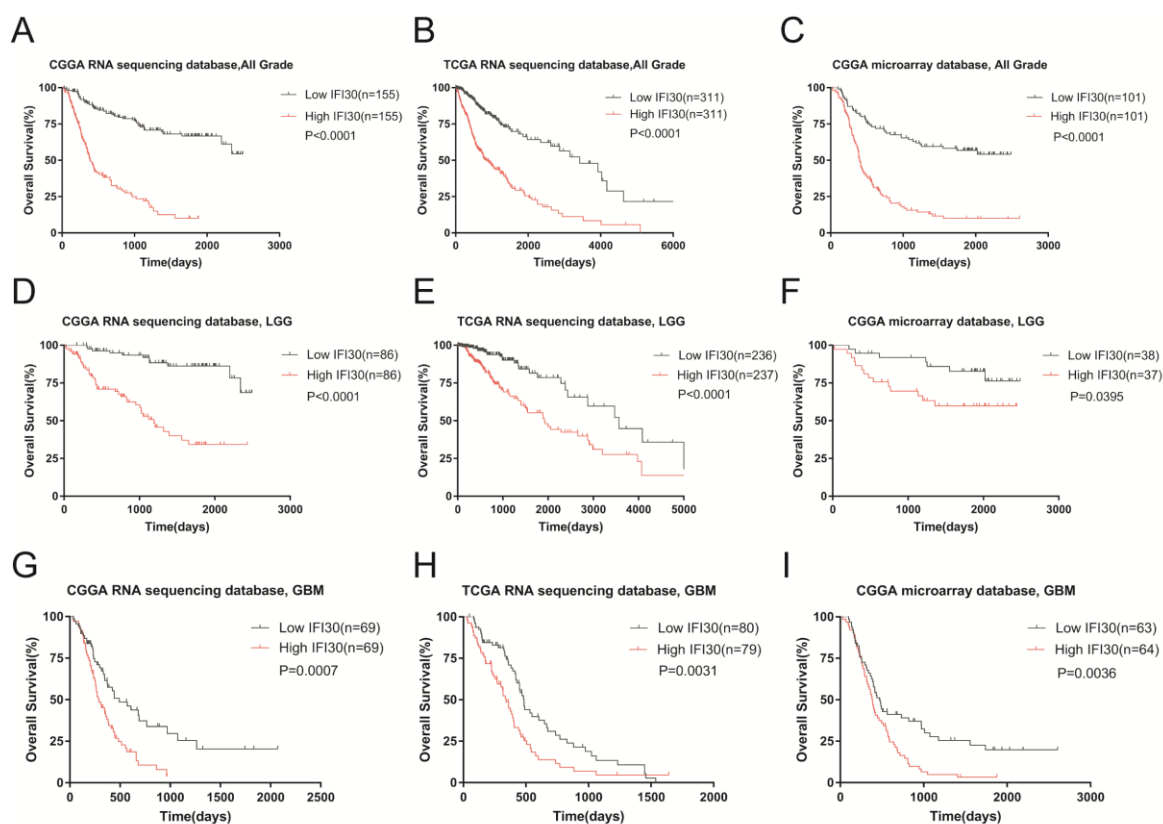


Supplementary figures

Supplementary figure 1

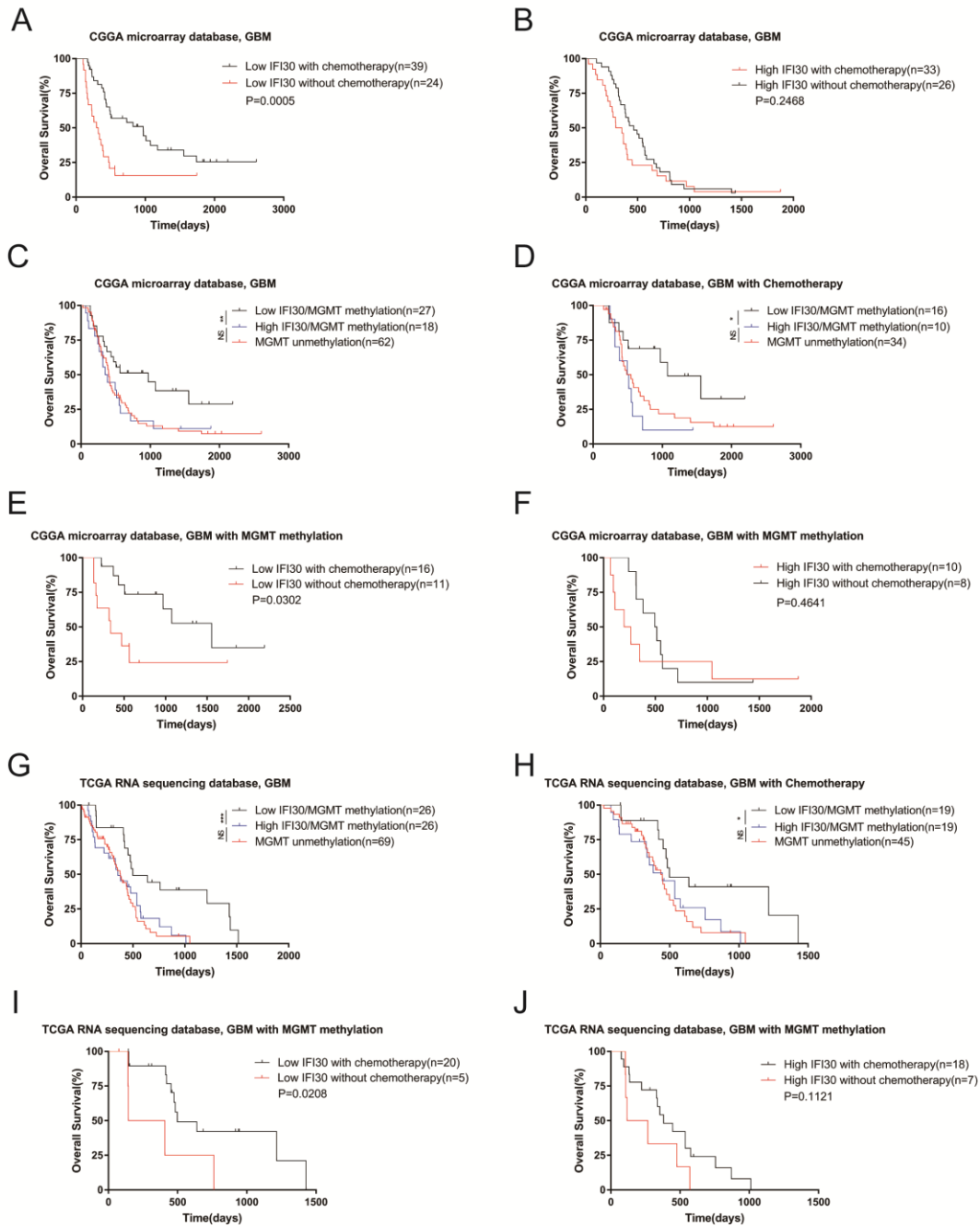


Supplementary figure 1. High IFI30 expression was a predictor of poor OS in glioma.

(A-C) Glioma patients with high IFI30 level had shorter OS than low-IFI30 patients in three database. (D-F) High IFI30 group occupied a significantly decreased survival in LGG patients. (G-I) GBM patients with low IFI30 expression benefited a longer survival than high IFI30 group.

Abbreviations: OS, overall survival; CGGA, Chinese Glioma Genome Atlas; TCGA, The Cancer Genome Atlas; LGG, lower grade glioma; GBM, glioblastoma.

Supplementary figure 2



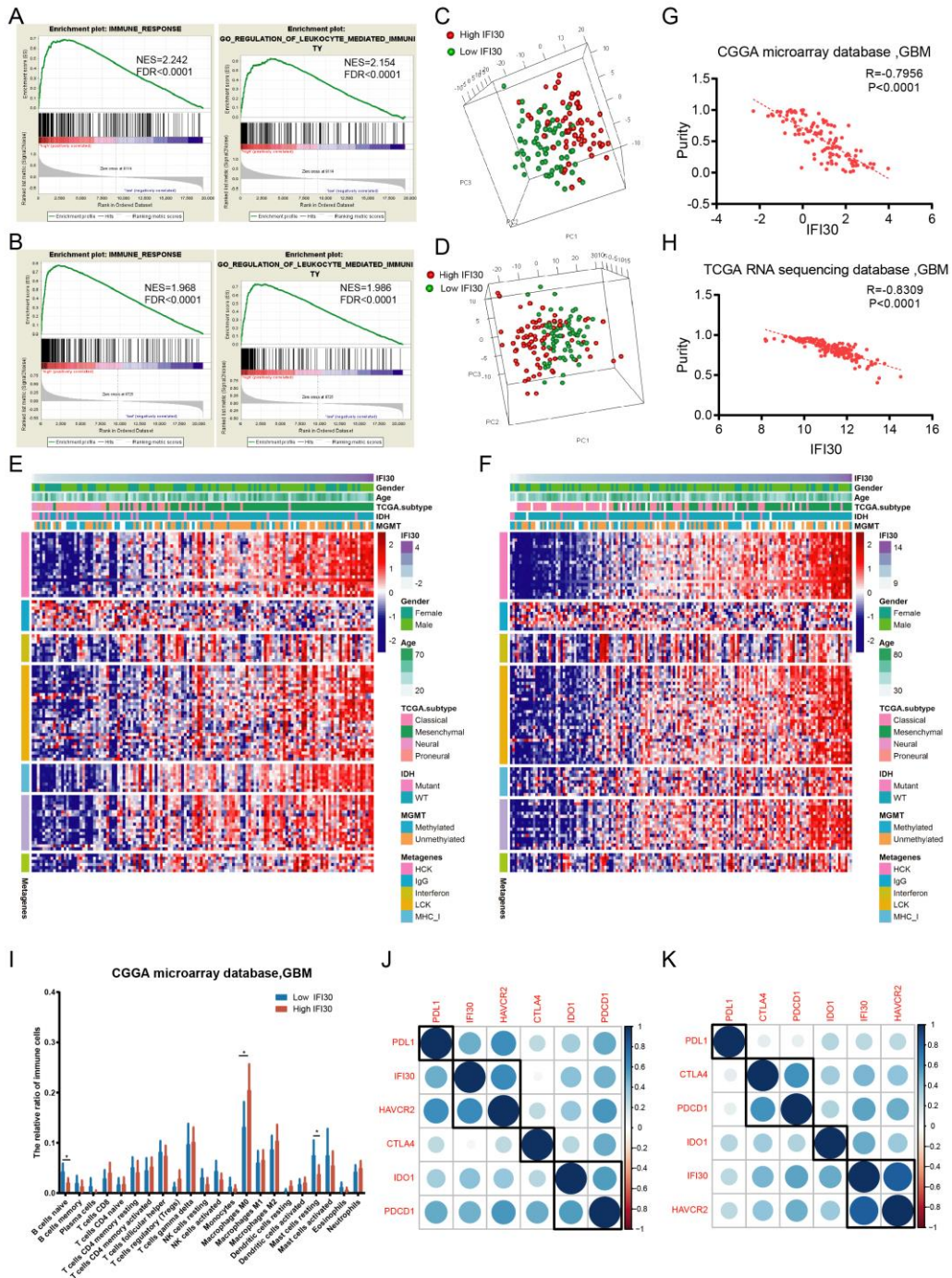
Supplementary figure 2. IFI30 decreased chemotherapy sensitivity in GBM in CGGA microarray and TCGA RNA-seq cohorts.

(A-B) GBM patients with low IFI30 level benefited from chemotherapy while high group did not survive longer even under chemotherapy in the two validated cohorts.

(C-D, G-H) For all GBM patients or who received chemotherapy, only the MGMT promoter methylated patients with a low IFI30 level had a survival advantage over the methylated-high IFI30 and unmethylated ones; MGMT promoter methylated patients with high IFI30 level exhibited similar survival time to that of unmethylated patients in the two cohorts. (E, I) Under MGMT promoter methylated, chemotherapy group performed an elevated survival compared to untreated group in low IFI30 patients in these two database. (F, J) In these two cohorts, for high IFI30 expression patients with MGMT promoter methylated, chemotherapy showed no prognostic significance.

Abbreviations: CGGA, Chinese Glioma Genome Atlas; TCGA, The Cancer Genome Atlas; GBM, glioblastoma.

Supplementary figure 3



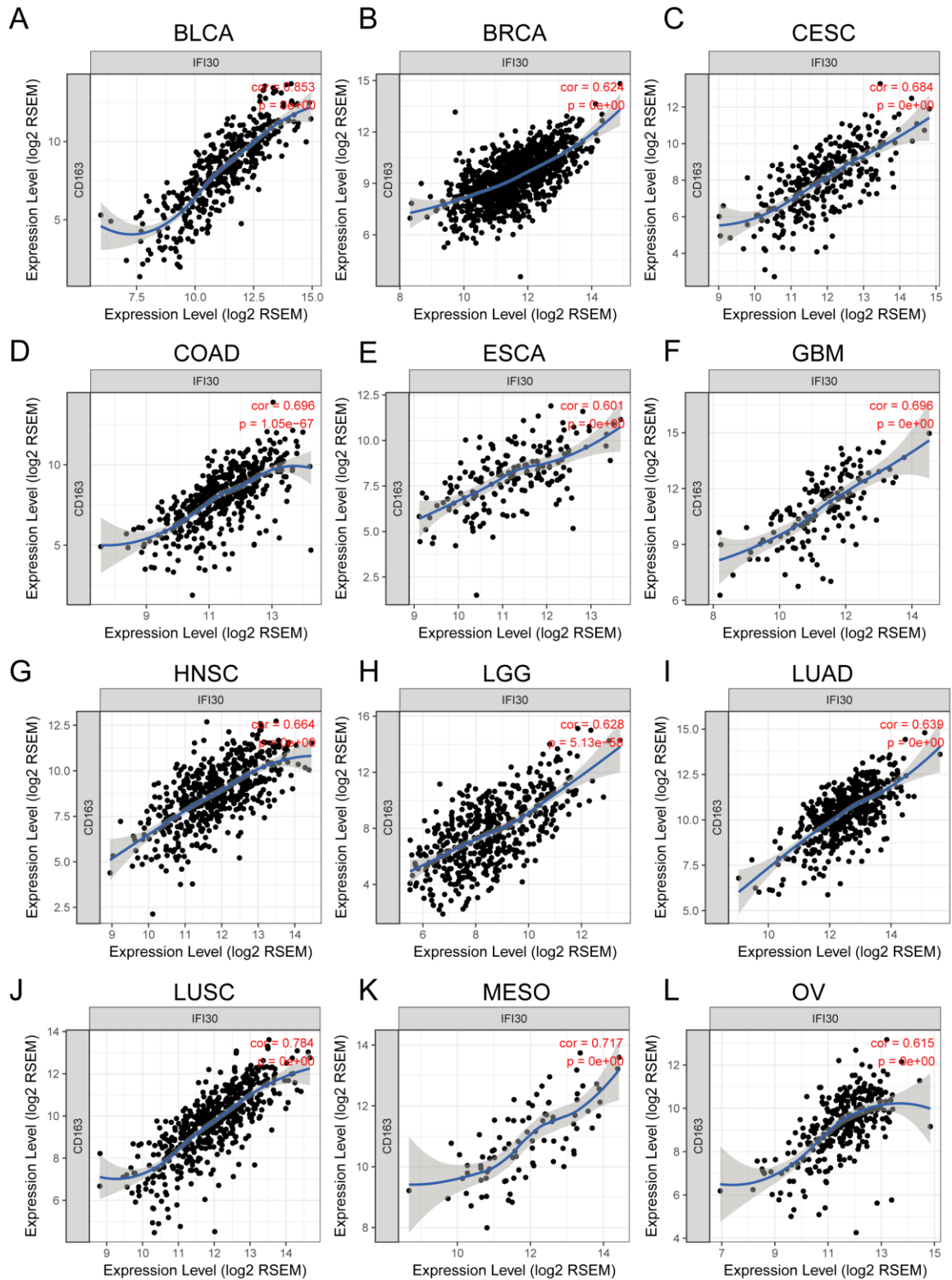
Supplementary figure 3. IFI30 associated with enhanced immune response and the microenvironment.

(A-B) Increased immune response enriched in high IFI30 group in CGGA microarray

and TCGA RNA-seq cohorts. (C-D) PCA analysis showed that high and low IFI30 groups conferred different immune status in two validated cohorts. (E-F) Inflammation and immunity clusters of metagenes enriched in high IFI30 group in two cohorts. (G-H) Relationship between IFI30 and purity in two cohorts. (I) In CGGA microarray database, GBM patients with high IFI30 level recruited more M0 cells and less B naive and resting mast cells. (J-K) IFI30 correlated with immunosuppressive checkpoints in two validated cohorts. (* means $P < 0.05$)

Abbreviations: CGGA, Chinese Glioma Genome Atlas; TCGA, The Cancer Genome Atlas; GBM, glioblastoma; PCA, principle component analysis; GSEA, gene set enrichment analysis.

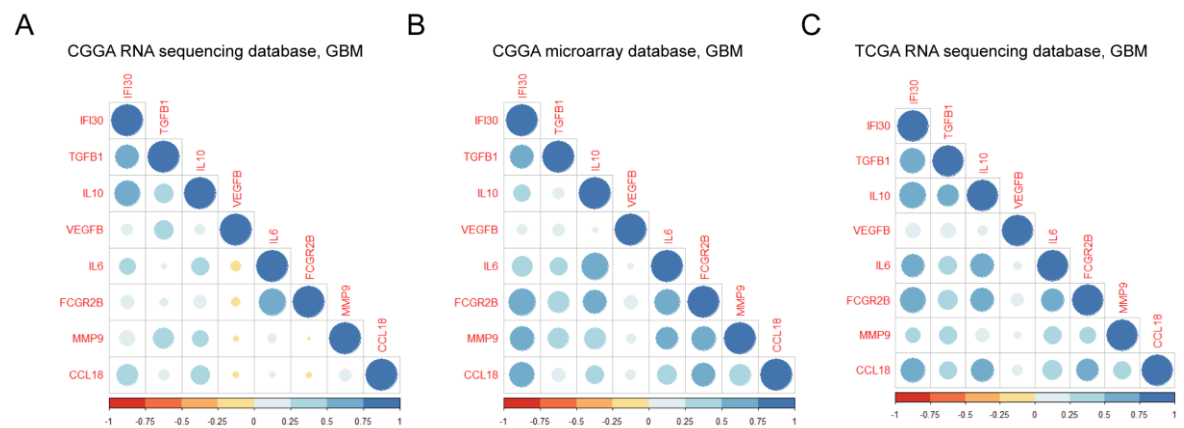
Supplementary figure 4



Supplementary figure 4. Correlation between M2 marker CD163 and IFI30 in pan-cancer (A-L).

Abbreviations: TCGA, The Cancer Genome Atlas; BLCA, Bladder Urothelial Carcinoma; BRCA, Breast invasive carcinoma; CESC, Cervical squamous cell carcinoma and endocervical adenocarcinoma; COAD, Colon adenocarcinoma; ESCA, Esophageal carcinoma; GBM, Glioblastoma multiforme; HNSC, Head and Neck squamous cell carcinoma; LGG, Lower Grade Glioma; LUAD, Lung adenocarcinoma; LUSC, Lung squamous cell carcinoma; MESO, Mesothelioma; OV, Ovarian serous cystadenocarcinoma.

Supplementary figure 5



Supplementary figure 5. Correlation between IFI30 and classical anti-inflammatory cytokines and chemokines (A-C).

Supplementary tables

Table S1 The list of 20 classical interferon- γ stimulated genes.

ISG15
ISG20L2
ISG20
IFI27L2
IFI27L1
IFI27
IFI30
IFI35
IFI44
IFI44L
IFI6
IFIT1
IFIT2
IFIT3
IFIT5
IFITM1
IFITM2
IFITM3
IFITM4P

Table S2: Cox Regression Analysis of TCGA RNA sequencing database, GBM.

Abbreviations: TCGA, The Cancer Genome Atlas; GBM, glioblastoma; HR, hazard ratio.

Variable	Univariate	Regression	Multivariate Regression	
	HR	P value	HR	P value
Age (young \leq 60 VS old $>$ 60)	0.6827	0.04	1.0944	0.72963
Gender (Male VS Female)	0.8624	0.448		
KPS (Low \leq 70 VS Low $>$ 70)	1.4711	0.117		
IDH1 status (Wild VS Mutant)	5.1697	0.00153	3.4528	0.09532
MGMT promoter status (Unmethylated VS Methylated)	1.7563	0.0137	1.9310	0.01208
Radiotherapy (Treated VS Untreated)	0.1657	3.65e-12	0.1519	0.00409
Chemotherapy (Treated VS Untreated)	0.2506	7.17e-09	0.8713	0.81586
IFI30	1.4815	0.042	1.8839	0.01499

(High VS Low)

Table S3: Cox Regression Analysis of CGGA microarray database, GBM

Abbreviations: CGGA, Chinese Glioma Genome Atlas; GBM, glioblastoma; HR, hazard ratio.

Variable	Univariate	Regression	Multivariate Regression	
	HR	P value	HR	P value
Age (young \leq 60 VS old $>$ 60)	0.7669	0.344		
Gender (Male VS Female)	1.1730	0.43		
KPS (Low \leq 70 VS Low $>$ 70)	2.0025	0.000469	2.1792	0.000246
IDH1 status (Wild VS Mutant)	1.5780	0.0985		
MGMT promoter status (Unmethylated VS Methylated)	1.4919	0.0744		
Radiotherapy (Treated VS Untreated)	0.3821	0.000195	0.4158	0.001584
Chemotherapy (Treated VS Untreated)	0.4706	0.000207	0.4158	0.004059
IFI30	1.7403	0.0057	1.7047	0.011781

(High VS Low)

Table S4 Clinical and molecular information of GBM patients included in the study

Abbreviations: CGGA, Chinese Glioma Genome Atlas; TCGA, The Cancer Genome Atlas; GBM, glioblastoma;

Cohort	CGGA-RNAseq (n=325)	TCGA-RNAseq (n=669)	CGGA microarray (n=306)
Database	CGGA	TCGA	CGGA
Age(years)	43(8-81)	60(14-89)	43(13-70)
Gender			
Male	203	394	180
Female	122	288	121
Unavailable	0	1	5
Survival(days)	396.59±341.86	415.57±381.56	
TCGA Subtype (GBM)			
Classical	48	39	16
Neural	12	26	12
Proneural	33	29	21
Mesenchymal	51	48	79
Unavailable	0	11	0
IDH1 status (GBM)			

Wild type	108	135	106
Mutant	36	8	22
Unavailable	0	10	0
MGMT promoter status (GBM)			
Unmethylated	71	70	45
Methylated	61	52	63
Unavailable	12	31	20
Chemotherapy (GBM)			
Treated	84	107	72
Untreated	44	45	50
Unavailable	16	1	6
Radiotherapy			
Treated	81	123	98
Untreated	47	29	22
Unavailable	16	1	8
Overall survival,months			
Median	37.37	48.6	27.47
Survival status			
Alive	168	422	132
Dead	142	206	165
Unavailable	15	55	9

