

Figure S1

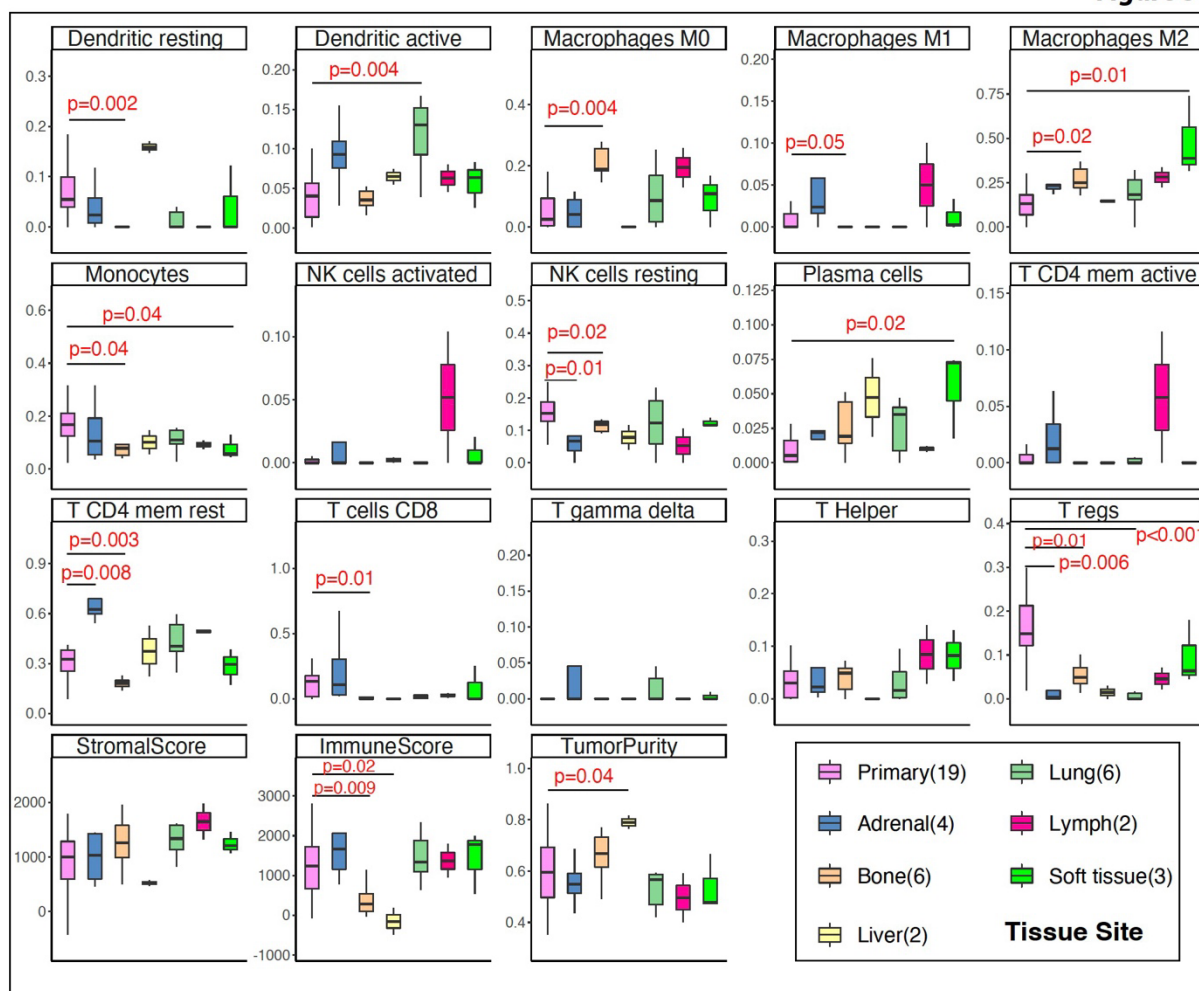


Figure S1. CIBERSORT deconvolution to characterize the tumor immune microenvironment (TIME) differences between primary vs. metastatic ccRCC by tissue site. We stratified CIBERSORT scores across all metastatic tissue types and compared them to primary ccRCC. T regs were significantly higher in primaries compared to adrenal, bone and lung metastatic sites. ESTIMATE immune scores were also significantly higher in primaries compared to bone and liver. Wilcoxon rank-sum test was used to calculate the p-values and the symbols indicate the levels of significance. *: $p < 0.05$, **: $p < 0.01$.

Figure S2

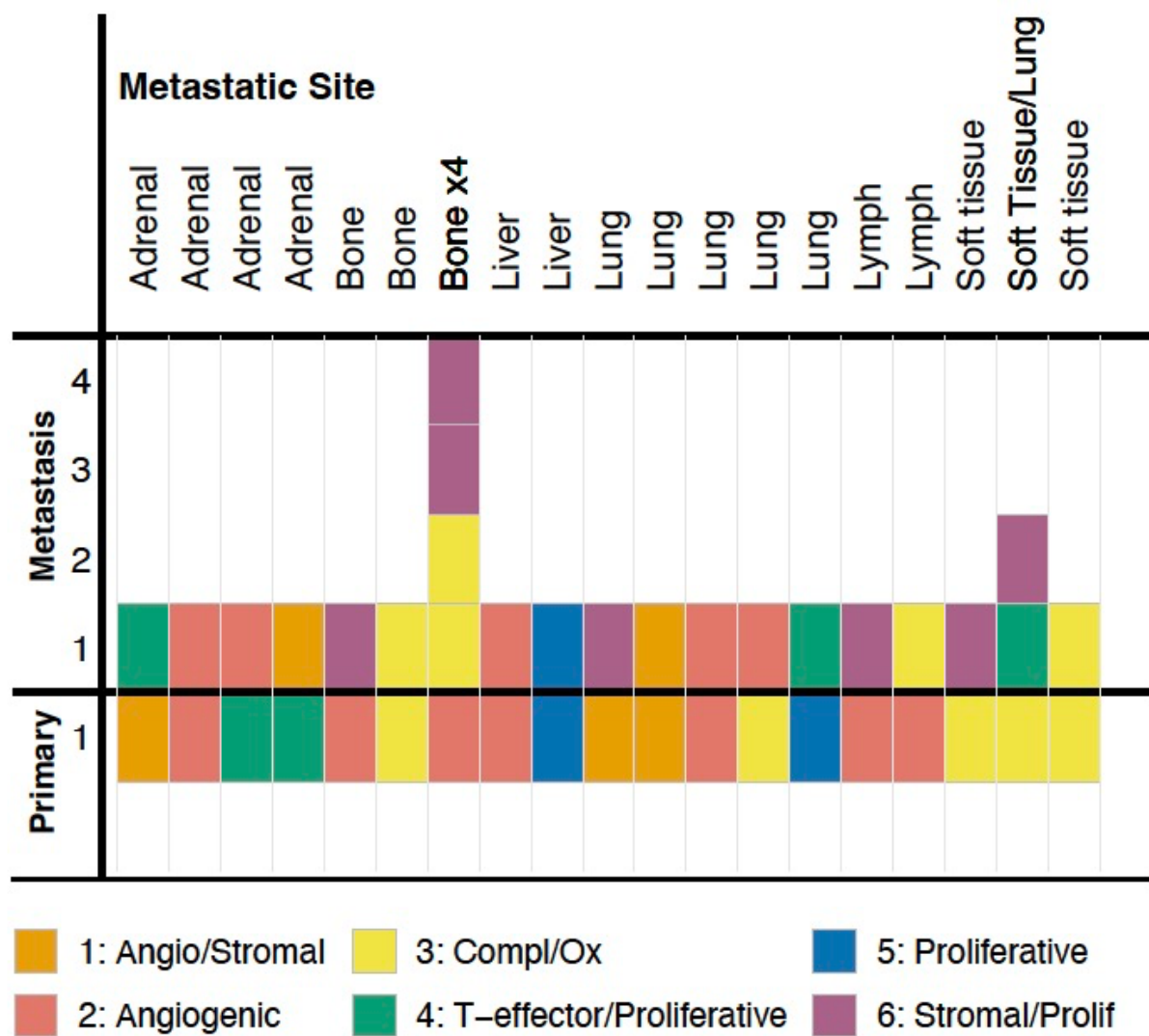


Figure S2. IMM151 molecular cluster assignments for each sample in our cohort. Each column represents an individual patient, and cells below the x-axis represents the primary tumor, whereas cells above the x-axis represent the matched metastasis. Two patients had multiple metastatic sites.

Figure S3

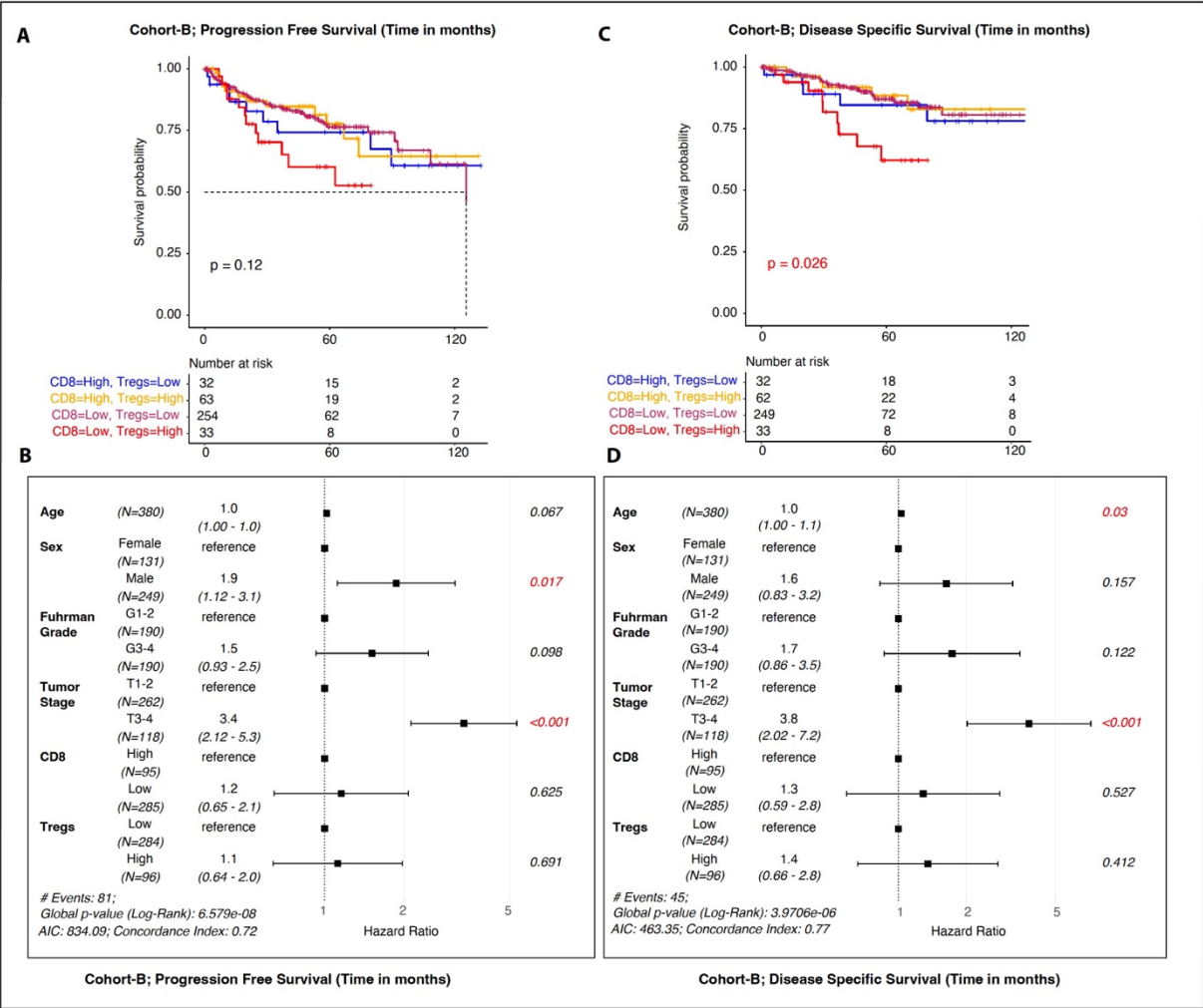


Figure S3. Testing the impact of immune cell infiltration in TCGA ccRCC dataset (n = 382). Upper quartile values (Q3) were used as cut-offs for CIBERSORT scores (CD8 high vs low; Tregs high vs low). A-B. Progression Free Survival (PFS). Kaplan-Meier survival curve analysis did not demonstrate a significant association with CD8 or Tregs with PFS. In multivariable Cox proportional hazard analyses adjusting for clinicopathologic variables, only tumor stage was associated with PFS. C-D. Disease Specific Survival (DSS). Kaplan-Meier survival curve analysis demonstrated a significant association with low CD8 and high Tregs with DSS. In multivariable Cox proportional hazard analyses adjusting for clinicopathologic variables, only tumor stage was associated with DSS.