## **Supplementary Figures and Tables**

A	TCGA n = 5155											
	Tumor	BRCA	CRC	GBM	LIHC	LUAD	LUSC	ov	PAAD	PRAD	UCEC	SUM
	Total n=	1058	580	420	364	536	497	520	177	488	515	5155
	HRD-H	292	18	8	28	184	257	361	13	15	81	1247
	HRD-L	766	562	412	336	352	240	159	164	473	434	3908
	Misssing	43	84	188	16	76	46	430	4	97	48	1042
	빝	1005	496	232	348	460	451	90	173	391	467	4113
	н.О.	281	15	6	26	162	232	57	13	10	68	870
	HRD-L	724	481	226	322	298	219	33	160	381	399	3243
В	CPTAC n = 573							C	7.50	GA CA		
	Tumor	GBM	LUAD	LSCC	PDA	UCE	C SU	М	10000	GA	(:	
	Total n=	99	111	109	153	101	57	3	TC	GA		
	HRD.	0	15	33	4	3	5	5	LII TC	(CO)		
	HRD.	99	96	76	149	98	51	8	TC LU	GA SC GA		
	Misssing data	0	5	1	14	2	2:	2	TC PE TC PR	GA AD		
	E	-	106	108	139	99	45	52	CP1	EC FAC		
	HRD.	-	14	33	4	3	54	4	LS CP1	CC FAC	i	

Supplementary Figure 1: Homologous recombination deficiency prevalences across the cohorts. (A) Overview of the total patient count (n=573) in the CPTAC cohort before merging the image data with the molecular data and afterward. (B) Overview of the total patient count (n=5,155) in the TCGA cohort before merging the image data with the molecular data and afterward. (C) Distribution of the homologous recombination deficiency high (HRD-H) and low (HRD-L) patient number among the different tumor types of The Cancer Genome Atlas (TCGA) and Clinical Proteomic Tumor Analysis

CPTAC

UCEC

HRD -L

HRD-H

Consortium (CPTAC). Abbreviations: BRCA=breast invasive carcinoma; CRC=colorectal cancer; GBM=glioblastoma; LIHC=liver cancer; LUAD=lung adenocarcinoma; LUSC/LSCC=lung squamous cell carcinoma; OV=ovarian cancer; PAAD/PDA=pancreatic adenocarcinoma; PRAD=prostate adenocarcinoma; UCEC=endometrial cancer

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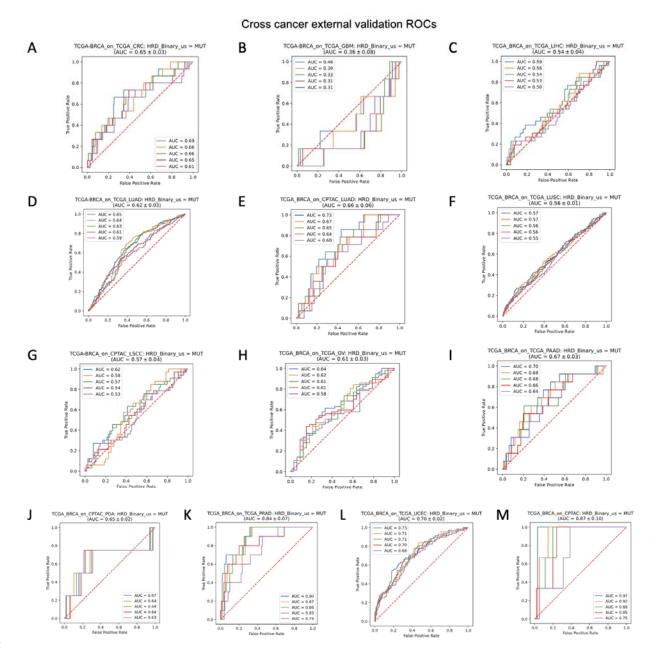
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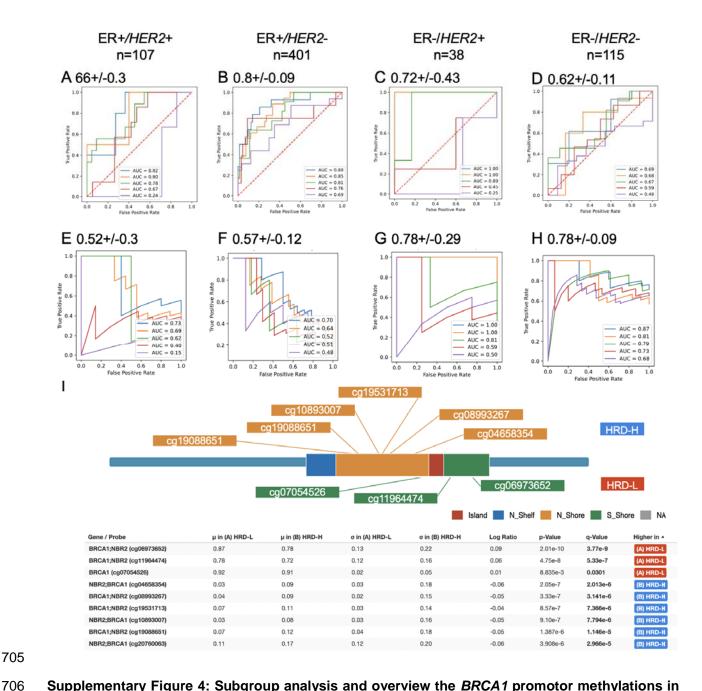
## Internal 5 fold Cross Validation and tumor wise external validation ROCs В Α C D TCGA\_PRAD: HRD\_Binary\_us (AUC = 0.76 ± 0.22) Ε F G Н TCGA\_LUSC: HRD\_Binary\_us = MUT (AUC = 0.55 ± 0.04) TCGA\_PAAD: HRD\_Binary\_us (AUC = 0.58 ± 0.22) ١ K L J CPTAC\_LSCC: HRD\_Binary\_ut (AUC = 0.57 ± 0.01) M Ν CPTAC\_UCEC: HRD\_Binary\_us = MUT (AUC = $0.93 \pm 0.07$ ) CPTAC\_PDA: HRD\_Binary\_us = MUT (AUC = 0.81 ± 0.14)

Supplementary Figure 2: Receiving operating curve for the Internal Validation and tumor wise external validation. The Receiving operating curve (ROC) is shown for the five-fold internal cross-validation experiment for each of the models in The Cancer Genome Atlas (TCGA) for the Homologous recombination deficiency (HRD) binary score for (A) TCGA-BRCA, (B) TCGA-CRC, (C) TCGA-GBM,

(D) TCGA-LIHC, (E) TCGA-LUAD, (F) TCGA-LUSC, (G) TCGA-PAAD, (H) TCGA-PRAD, (I) TCGA-OV, (J) TCGA-UCEC; Roc curves for the external validation on the Clinical Proteomic Tumor Analysis Consortium (CPTAC) for each previously trained model for (K) CPTAC-LUAD, (L) CPTAC-LSCC, (M) CPTAC-PDA, (N) CPTAC-UCEC. Abbreviations: BRCA=breast invasive carcinoma; CRC=colorectal cancer; GBM=glioblastoma; LIHC=liver cancer; LUAD=lung adenocarcinoma; LUSC/LSCC=lung squamous cell carcinoma; OV=ovarian cancer; PAAD/PDA=pancreatic adenocarcinoma; PRAD=prostate adenocarcinoma; UCEC=endometrial cancer



Supplementary Figure 3: Receiving operating curve for the cross-cancer external validation. The Receiving operating curve (ROC) is shown for the cross-cancer external validation experiment for each model trained on The Cancer Genome Atlas (TCGA) breast cancer (BRCA) cohort for the Homologous recombination deficiency (HRD) binary score on (A) TCGA-CRC, (B) TCGA-GBM, (C) TCGA-LIHC, (D) TCGA-LUAD, (E) CPTAC-LUAD, (F) TCGA-LUSC, (G) CPTAC-LSCC, (H) TCGA-OV, (I) TCGA-PAAD, (J) CPTAC-PDA, (K) TCGA-PRAD, (L) TCGA-UCEC, (M) CPTAC-UCEC. Abbreviations: BRCA=breast invasive carcinoma; CRC=colorectal cancer; GBM=glioblastoma; LIHC=liver cancer; LUAD=lung adenocarcinoma; LUSC/LSCC=lung squamous cell carcinoma; OV=ovarian cancer; PAAD/PDA=pancreatic adenocarcinoma; PRAD=prostate adenocarcinoma; UCEC=endometrial cancer



Supplementary Figure 4: Subgroup analysis and overview the *BRCA1* promotor methylations in TCGA-BRCA. The Receiving operating curve (ROC) and Precision Recall curve (PRC) are shown for the five-fold internal cross-validation experiment for each of the models in The Cancer Genome Atlas - breast cancer (TCGA-BRCA) cohort for the Homologous recombination deficiency (HRD) score. ROC curve is represented for the four different subgroups (A) estrogen receptor positive (ER+) and *HER2*+ (B) ER+ and *HER2*- (C) ER negative (ER-) and *HER2*+ (D) ER- and *HER2*-. The PRC curve is shown for (E) ER+/HER2+, (F) ER+/HER2-, (G) ER-/HER2+, (H) ER-/HER2-. (I) Sketched representation of

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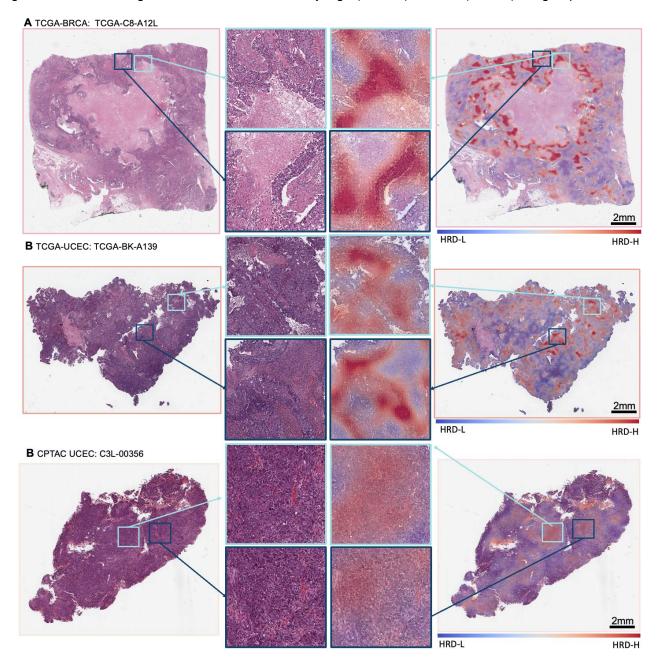
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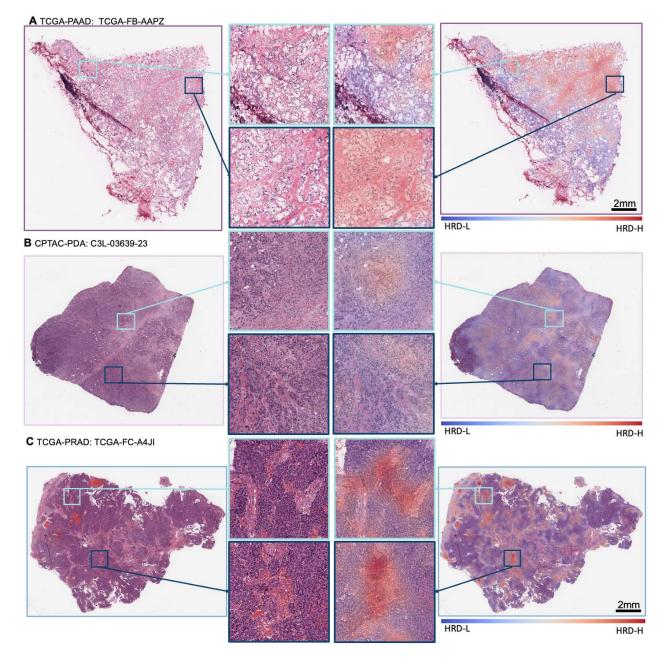
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the occurring promotor methylations (accessed with HM27 and HM450) in the *BRCA1* gene for the ground truth Homologous recombination deficiency high (HRD-H) and low (HRD-L) subgroups.



Supplementary Figure 5: Morphological features of Homologous recombination deficiency in breast and endometrial cancer. Whole Slide Image (WSI) and classification heatmap (ground truth: Homologous recombination deficiency high (HRD-H) and prediction: HRD-H) with magnifications of two different regions. The model was trained on The cancer genome atlas (TCGA) breast cancer (BRCA) cohort and deployed cross cancer wise. Top true positive predicted patients are shown for (A) TCGA-

## BRCA, (B) Clinical Proteomic Tumor Analysis Consortium (CPTAC) endometrial cancer (UCEC) and (C) TCGA-UCEC.



Supplementary Figure 6: Morphological features of Homologous recombination deficiency in pancreatic and prostate adenocarcinoma. Whole Slide Image (WSI) and classification heatmap (ground truth: Homologous recombination deficiency high (HRD-H) and prediction: HRD-H) with magnifications of two different regions. The model was trained on The cancer genome atlas (TCGA) breast cancer (BRCA) cohort and deployed cross cancer wise. Top true positive predicted patients are shown for (A) TCGA pancreatic adenocarcinoma (PAAD), (B) Clinical Proteomic Tumor Analysis

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Consortium (CPTAC) pancreatic adenocarcinoma (PDA) and (C) TCGA prostate adenocarcinoma (PRAD). Supplementary Table 1: All raw statistical results. All raw experimental results related to Figure 2. including receiving operating curve (ROC) with 95% confidence interval (CI), Precision-Recall Curve (PRC) with 95% confidence interval (CI), p-values and Homologous recombination deficiency (HRD) high (HRD-H) and HRD-low (HRD-L) patient numbers based on the ground truth, for internal 5-fold cross-validation on The Cancer Genome Atlas (TCGA) external validation on Clinical Proteomic Tumor Analysis Consortium (CPTAC). [Supplementary Table 1 All statistical results.xlsx] in separate file Supplementary Table 2: Homologous recombination deficiency score Tables. Training data and calculated homologous recombination deficiency score (HRD) out of the three subscores loss of heterozygosity (LOH), telomeric allelic imbalance (TAI) and large-scale state transitions (LST) available as continuous (HRDsum) and binary (HRD\_Binary) target with a chosen cut off of HRD-L<42 HRD-H>=42 for patients of The Cancer Genome Atlas (TCGA, Sheet1) and Clinical Proteomic Tumor Analysis Consortium (CPTAC, Sheet2). Supplementary Table 3: Weblink for customized Homologous recombination deficiency (HRD) subgroups. Weblink for accessing the clinical and molecular characteristics for both ground truth and prediction Homologous recombination Deficiency (HRD) subgroups at www.cbioportal.org for The Cancer Genome Atlas breast cancer (TCGA-BRCA) Pan Cancer Atlas 2018 study and the TCGA-BRCA Firehose Legacy cohort.