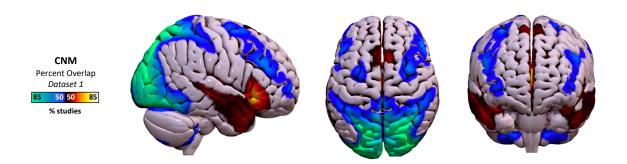
Supplementary Information



Supplementary Figure 1. A surface projection of the transdiagnostic network, thresholded at 50% of studies (t=5).

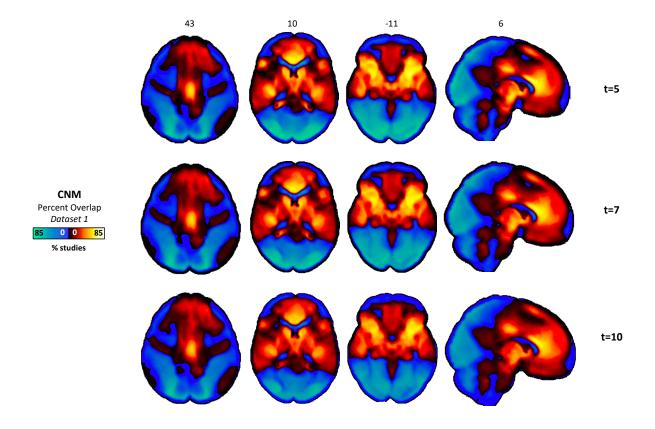
POSITIVE CONNECTIVITY

Cluster Size	Threshold	Min Ext	Coordinates		ites	Region	
mm³	t>		Х	У	Z		
390	12	40	-2	22	18	Anterior Cingulate	
358	12	40	-30	10	-14	L Insula	
202	12	40	32	12	-14	R insula	
83	12	40	-6	-14	36	Posterior Cingulate	
41	12	40	-20	40	24	L frontal pole	

NEGATIVE CONNECTIVITY

Cluster Size	Threshold	Min Ext	Coordinates			Region	
mm³	t>		Х	У	Z		
1149	12	40	58	-58	-24	R inferior temporal gyrus	
843	12	40	18	-68	68	R lateral occipital cortex (superior division)	
698	12	40	-18	-72	64	L lateral occipital cortex (superior division)	
119	12	40	0	-48	-68	Brainstem	
49	12	40	2	-78	-44	Cerebellum	

Supplementary Table 1. Significant clusters of a composite t-map network map generated from study-level functional connectivity maps using a voxel-wise one-sample t-test, with Bonferroni correction.



Supplementary Figure 2. The topography of the transdiagnostic network is robust across statistical thresholds.

Α					
_		Spatial Cor	relation with Full Map		
	Diagnosis Removed	CNM (+/-)	ALE		
	MDD	0.992	0.441		
	SUD	0.997	0.44	CNM (+/-) vs. ALE	7.47564E-
	BPAD	0.997	0.437		
	SCZ	0.980	0.344		
	PANIC	0.998	0.453		
	OCD	0.995	0.448		
	PTSD	0.997	0.453		
В					
		Spatial Cor	relation with Full Map		
	Diagnosis Removed	CNM (+)	ALE		
	MDD	0.995	0.441		
	SUD	0.998	0.44	CNM (+) vs. ALE	6.31186E-
	BPAD	0.997	0.437		

Supplementary Table 2. The transdiagnostic network from coordinate network mapping was significantly more robust to leave-one-diagnosis-out analyses than the ALE map. (A) Analyses on the coordinate network map with positive and negative connectivity. (B) Analyses on the coordinate network map with only positive connectivity.

0.344

0.453

0.448

0.453

SCZ

PANIC

OCD

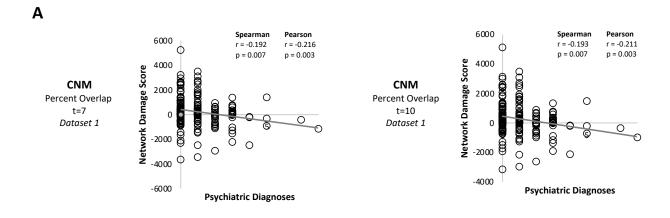
PTSD

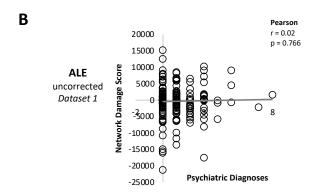
0.989

0.998

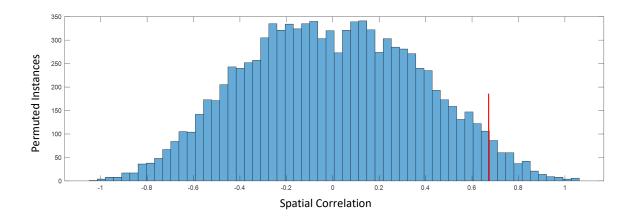
0.997

0.998





Supplementary Figure 3. (A) Lesions with positive network damage scores on the transdiagnostic map were correlated with lower psychiatric comorbidity. By contrast, lesions with negative network damage scores on the transdiagnostic map were correlated with higher psychiatric comorbidity. These results were significant at various statistical thresholds (t=7, Pearson r=-0.216, p=0.003; t=10, Pearson r=-0.211, p=0.003). (B) Lesion damage to the unthresholded ALE map was not correlated with psychiatric comorbidity (Pearson r=0.02, p=0.766).



Supplementary Figure 4. Histogram showing the spatial correlation of each randomly permuted lesion network to the transdiagnostic network. The spatial correlation of the real lesion network to the transdiagnostic network was r = 0.65.

Yeo Network	CNM	LNM
Visual	0.48	0.38
Dorsal Attention	0.32	0.37
Frontoparietal	0.06	0.11
Limbic	-0.04	-0.24
Motor	-0.07	-0.18
Ventral attention	-0.14	-0.08
Default Mode	-0.34	-0.39

Supplementary Table 3. The transdiagnostic map may have unique elements than vary from canonical networks. No single Yeo network showed a higher spatial correlation to the transdiagnostic network or the lesion network than the two networks showed to each other (r=0.65).