

**Figure S1.** Prognostic associations of PLSec-AFP, PLSec, and AFP in validation set 1-3, Related to Figure 2-4.

(A) Association of PLSec with incident HCC in validate set 1. (B) Associations of AFP with time to HCC development in individual patients in validation set 1. Closed and open circles indicate HCC development and censored observation, respectively. Gray horizontal lines indicate duration of clinical follow-up. Red and blue squares indicate proportion of incident HCC every 2 years in patients with high ( $\geq 5$  ng/mL) and low ( $< 5$  ng/mL) AFP at enrollment, respectively. Proportion of HCC incidence was consistent over time in both AFP-high and low groups and not associated with AFP levels ( $p = 0.76$  and  $0.46$  by Pearson correlation test, respectively). (C) Log-transformed hazard ratio of incident HCC related to PLSec (upper panel) and AFP (lower panel) in validation set 1. Gray shadows indicate 95% confidence interval. (D) Sensitivity and specificity of high-risk PLSec-AFP were stable over time in validation set 2. (E) Association of high AFP with HCC recurrence. High AFP was defined as  $\geq 5.5$  ng/mL, a cut-off frequently used in the context of post-SVR HCC risk prediction in validation set 3. (F) Calibration plot of high AFP at various time points in validation set 3. (G) Association of high-risk PLSec-AFP with HCC recurrence according to time between HCC treatment and DAA initiation in validation set 3.

PLSec, prognostic liver secretome signature; AFP, alpha-fetoprotein; HCC, hepatocellular carcinoma; HR, hazard ratio; CI, confidence interval; DAA, direct-acting antivirals.

**Table S1.** Univariable and multivariable analyses in validation set 1 (multi-etiology cirrhosis cohort), Related to Figure 2.

Variable	No. (%)	Univariable		Multivariable	
		HR (95% CI)	p value	HR (95% CI)	p value
<b>PLSec</b>					
As continuous	–	1.25 (1.06 – 1.48)	0.009	1.19 (1.01 – 1.41)	0.04
High risk defined as $\geq 4$	123 (37%)	2.33 (1.30 – 4.18)	0.004		
Age	–	1.02 (0.99 – 1.06)	0.24		
Sex male	195 (59%)	1.31 (0.71 – 2.40)	0.39		
<b>Race/ethnicity (vs. black)</b>					
White	311 (94%)	0.25 (0.06 – 1.06)	0.06		
Hispanic	8 (2%)	4.70 $\times 10^{-8}$ (0 – Inf)	1.00		
Others	3 (1%)	0.94 (0.08 – 10.5)	0.96		
<b>Etiology</b>					
HCV	123 (37%)	1.38 (0.77 – 2.46)	0.28		
HBV	13 (4%)	0.39 (0.05 – 2.87)	0.36		
ARLD	60 (18%)	1.14 (0.55 – 2.37)	0.72		
NAFLD	20 (6%)	0.87 (0.27 – 2.81)	0.81		
Cryptogenic	39 (12%)	0.83 (0.30 – 2.31)	0.71		
Others	76 (23%)	0.77 (0.36 – 1.65)	0.50		
Obesity	140 (42%)	0.76 (0.42 – 1.38)	0.37		
Active hazardous alcohol drinking	34 (11%)	0.45 (0.11 – 1.88)	0.28		
Diabetes	76 (23%)	0.60 (0.27 – 1.35)	0.22		
Child-Pugh class B or C (vs. A)	204 (63%)	1.51 (0.82 – 2.77)	0.19		
FIB-4 $\geq 3.25$ (vs. $< 3.25$ )	225 (69%)	1.84 (0.93 – 3.64)	0.08		
<b>Platelet count (<math>\times 10^3/\mu\text{L}</math>)</b>					
As continuous	–	0.998 (0.993 – 1.003)	0.40		
$< 140 \times 10^3/\mu\text{L}$	250 (76%)	1.20 (0.61 – 2.38)	0.60		
$< 100 \times 10^3/\mu\text{L}$	176 (54%)	1.29 (0.71 – 2.34)	0.40		
$< 80 \times 10^3/\mu\text{L}$	118 (36%)	1.56 (0.87 – 2.81)	0.14		
<b>AST (IU/L)</b>					
As continuous	–	1.003 (0.999 – 1.008)	0.11		
$> 40$ IU/L	255 (77%)	1.52 (0.70 – 3.27)	0.29		
$> 100$ IU/L	70 (21%)	1.48 (0.75 – 2.93)	0.26		
<b>ALT (IU/L)</b>					
As continuous	–	1.003 (0.997 – 1.009)	0.32		
$> 40$ IU/L	216 (65%)	0.95 (0.52 – 1.76)	0.88		
$> 100$ IU/L	58 (18%)	1.48 (0.75 – 2.93)	0.26		
<b>AFP</b>					
As continuous	–	1.004 (1.001 – 1.009)	0.008		

As continuous (log-transformed)*	–	1.38 (1.14 – 1.67)	<0.001	1.38 (1.14 – 1.68)	0.001
≥ 5 ng/mL	130 (40%)	1.64 (0.90 – 2.96)	0.10		
≥ 10 ng/mL	62 (19%)	2.44 (1.31 – 4.57)	0.005		
≥ 20 ng/mL	22 (7%)	3.05 (1.35 – 6.87)	0.007		

\*AFP was log-transformed as  $\log_2(1+AFP)$ .

PLSec, prognostic liver secretome signature; HR, hazard ratio; CI, confidence interval; HCV, hepatitis C virus; HBV, hepatitis B virus; ARLD, alcohol-related liver disease; NAFLD, non-alcoholic fatty liver disease; ALT, alanine transaminase; AST, aspartate transaminase; AFP, alpha-fetoprotein.

**Table S2.** Test for proportional hazards assumption in validation set 1, Related to Figure 2.

Variable	Chi-square	p value
PLSec-AFP score	<0.01	0.95
PLSec-AFP ( $\geq 1.66$ )	1.46	0.23
PLSec	0.58	0.45
PLSec ( $\geq 4$ )	1.13	0.29
$\log_2(1+AFP)$ (as continuous)	0.84	0.36
$AFP \geq 5$ ng/mL	0.27	0.60

Proportional hazards assumption is tested based on scaled Schoenfeld residuals using `cox.zph()` function in survival R package.

PLSec, prognostic liver secretome signature; AFP, alpha-fetoprotein.

**Table S3.** Association of high-risk PLSec-AFP with incident HCC after various adjustment, Related to Figure 2-4.

Cohort	Unadjusted		Model 1		Model 2		Model 3		Model 4	
	HR or OR	95% CI	Adjusted HR or OR	95% CI	Adjusted HR or OR	95% CI	Adjusted HR or OR	95% CI	Adjusted HR or OR	95% CI
Validation set 1 (n=331): Cirrhosis with mixed etiology (prospective–retrospective cohort)										
Overall	2.96	(1.64-5.35)	3.01	(1.64-5.51)	2.90	(1.61-5.25)	2.65	(1.43-4.91)	2.71	(1.44-5.12)
Validation set 2 (n=41:123): Resolved HCV hepatitis/cirrhosis (nested case-control series)										
Overall	3.85	(1.70-8.71)	3.80	(1.66-8.66)	3.92	(1.70-9.03)	3.91	(1.70-8.95)	3.95	(1.67-9.35)
Cirrhosis	3.15	(1.31-7.62)	3.12	(1.27-7.65)	3.13	(1.26-7.74)	3.22	(1.31-7.91)	3.09	(1.21-7.87)
Validation set 3 (n=146): Resolved HCV hepatitis/cirrhosis after HCC therapies (prospective–retrospective cohort)										
Overall	2.90	(1.78-4.74)	3.08	(1.78-5.31)	2.58	(1.54-4.34)	3.03	(1.76-5.22)	2.79	(1.52-5.12)
Cirrhosis	3.00	(1.74-5.16)	3.44	(1.86-6.36)	2.61	(1.48-4.63)	3.10	(1.73-5.58)	3.10	(1.58-6.05)

PLSec-AFP of  $\geq 1.66$  was defined as high-risk.

In validation set 2, ORs were adjusted for the following variables in each model with conditioning on the pairs of cases and the matched controls.

Model 1, age (as continuous), sex, obesity, diabetes, and active hazardous alcohol drinking in validation set 1 and 3 and obesity, diabetes, and active hazardous alcohol drinking in validation set 2.

Model 2, Child-Pugh class (A vs. B or C).

Model 3, FIB-4 index ( $\geq 3.25$  vs.  $< 3.25$ ).

Model 4, All variables.

PLSec, prognostic liver secretome signature; AFP, alpha-fetoprotein; HCC, hepatocellular carcinoma; HR, hazard ratio; OR, odds ratio; CI, confidence interval; HCV, hepatitis C virus.

**Table S4.** Univariable analyses in validation set 2 and 3, Related to Figure 3 and 4.

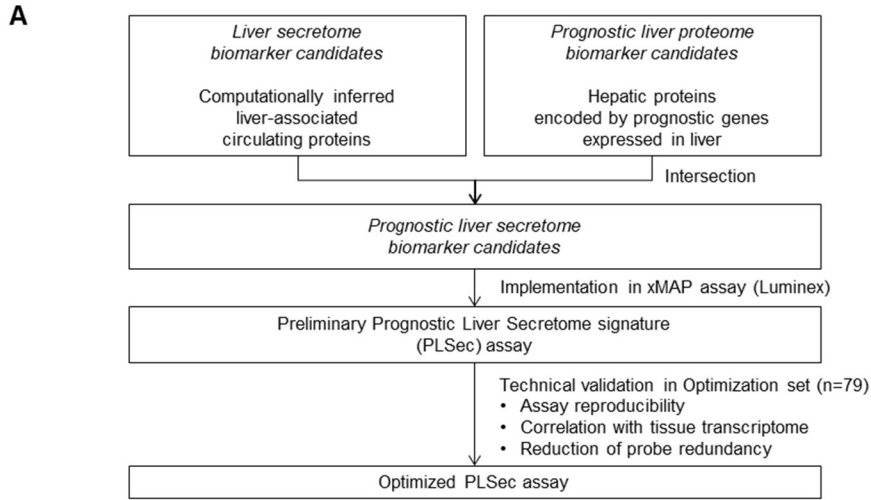
Variable	Validaiton set 2*		Validation set 3	
	No. (%)	OR (95% CI)**	No. (%)	HR (95% CI)
Age	-	-	-	0.99 (0.96 – 1.02)
Male sex	-	-	66 (45%)	0.76 (0.46 – 1.24)
Cirrhosis	-	-	117 (80%)	0.98 (0.52 – 1.84)
Obesity	40 (24%)	0.95 (0.40 – 2.26)	20 (14%)	1.14 (0.57 – 2.33)
Active hazardous alcohol drinking	12 (7%)	2.79 (0.71 – 11.0)	12 (9%)	0.55 (0.20 – 1.53)
Diabetes	23 (14%)	0.71 (0.24 – 2.06)	25 (18%)	0.99 (0.52 – 1.90)
Child-Pugh class B or C (vs. A)	144 (88%)	1.36 (0.47 – 3.90)	132 (90%)	2.78 (1.44 – 5.35)
FIB-4 $\geq$ 3.25 (vs. $<$ 3.25)	113 (69%)	1.17 (0.48 – 2.84)	111 (76%)	1.39 (0.74 – 2.61)
Platelet count ( $\times 10^3/\mu\text{L}$ )				
As continuous	–	0.99 (0.93 – 1.06)	-	0.99 (0.95 – 1.03)
$< 140 \times 10^3/\mu\text{L}$	103 (63%)	1.47 (0.65 – 3.36)	101 (69%)	0.99 (0.78 – 2.40)
$< 100 \times 10^3/\mu\text{L}$	60 (37%)	1.33 (0.64 – 2.80)	59 (40%)	1.03 (0.63 – 1.69)
$< 80 \times 10^3/\mu\text{L}$	40 (24%)	1.20 (0.52 – 2.75)	37 (25%)	1.13 (0.66 – 1.95)
ALT (IU/L)				
As continuous	–	1.02 (0.99 – 1.04)	-	1.01 (0.998 – 1.03)
$> 25$ IU/L	51 (31%)	0.81 (0.36 – 1.83)	31 (21%)	1.53 (0.88 – 2.68)
$> 40$ IU/L	13 (8%)	1.41 (0.38 – 5.22)	9 (6%)	1.97 (0.84 – 4.57)

\* ORs for age, sex, or cirrhosis were not available because these variables were used for matching.

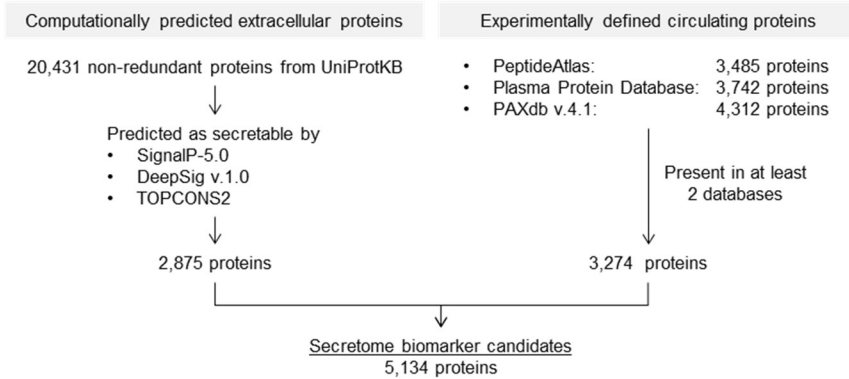
\*\* In validation set 2, ORs were calculated with conditioning on the pairs of cases and the matched controls.

OR, odds ratio; CI, confidence interval; HR, hazard ratio; FIB-4, fibrosis-4; ALT, alanine transaminase.

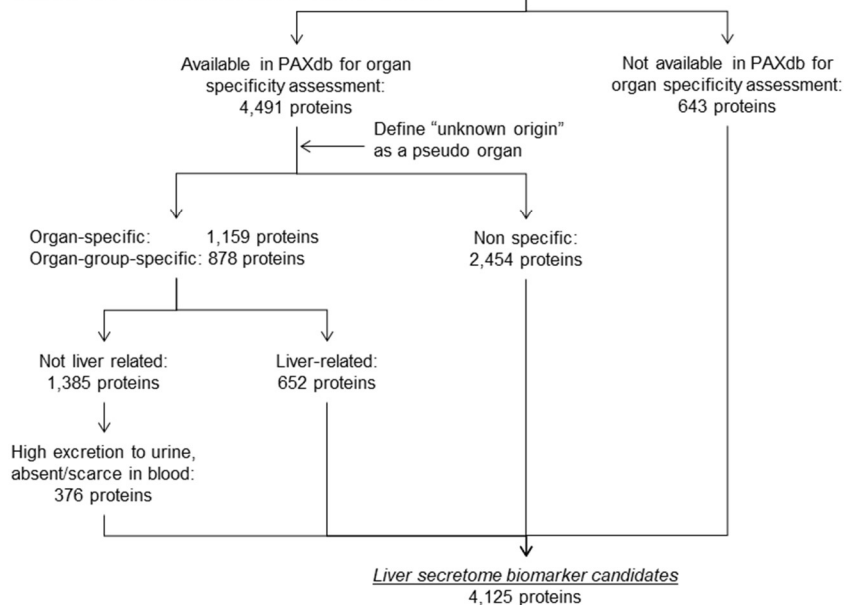
**Methods S1.** Workflow of Prognostic Liver Secretome signature (PLSec) derivation, Related to Figure 1 and STAR Methods.



**B Computational derivation secretome biomarker candidates**



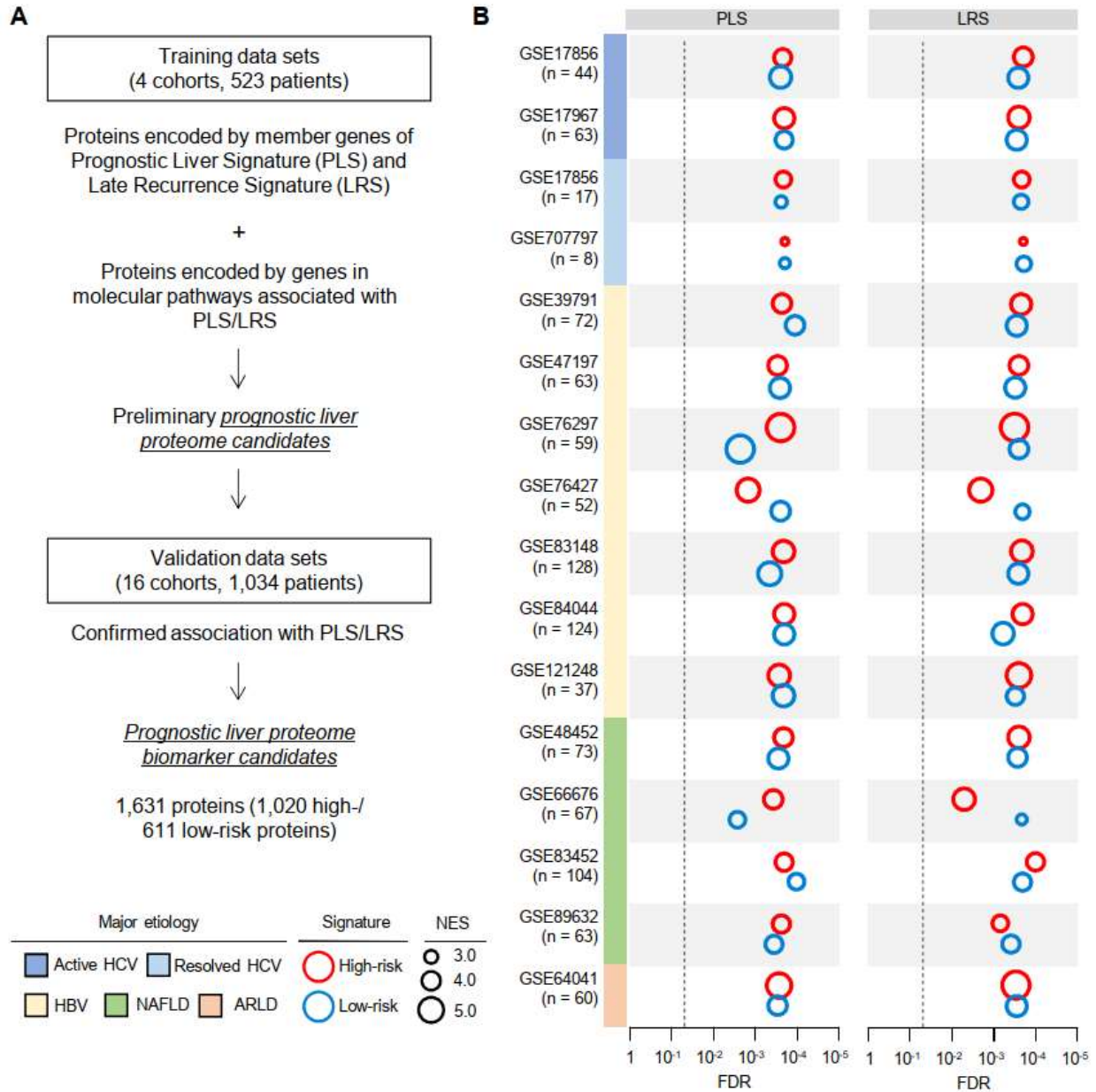
**C Organ specificity/ambiguity assessment**





(A) Overview of Prognostic Liver Secretome signature (PLSec) derivation (B) Workflow to derive secretome biomarker candidates. (C) Workflow of organ specificity/ambiguity assessment.

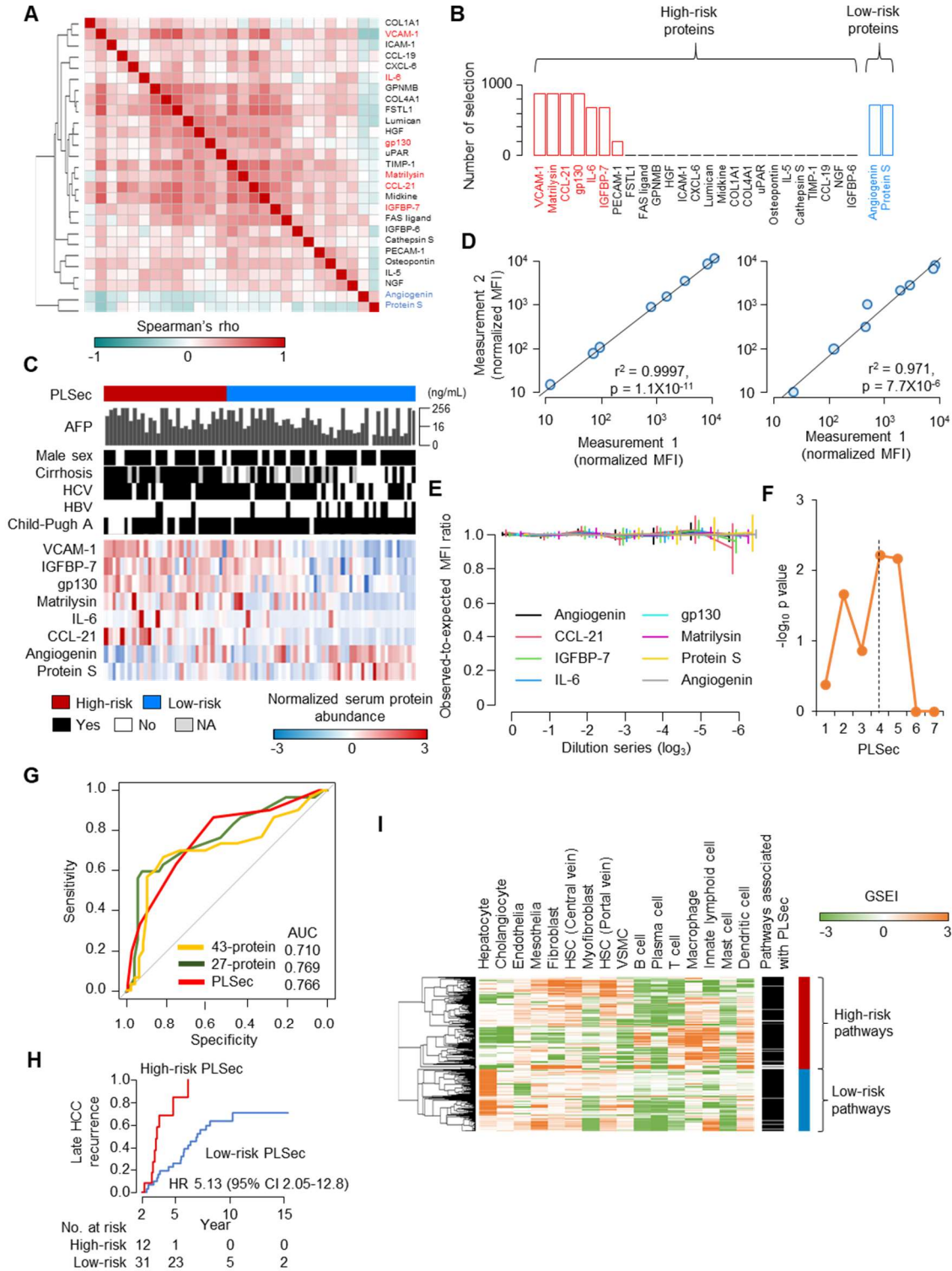
**Methods S2.** Computational derivation of *prognostic liver proteome biomarker candidates*, Related to STAR Methods.



(A) Workflow to derive *prognostic liver proteome biomarker candidates*. (B) Validation of *prognostic liver proteome signature* for association with tissue PLS/LRS status in the validation data sets (Table S1). Vertical dot lines indicate FDR of 0.05.

HCV, hepatitis C virus; HBV, hepatitis B virus; NAFLD, non-alcoholic fatty liver disease; ARLD, alcohol-related liver disease; PLS, prognostic liver signature; LRS, late recurrence signature; FDR, false discovery rate; NES, normalized enrichment score.

**Methods S3. Optimization of PLSec protein panel, Related to STAR Methods.**



(A) Correlations of abundance across the 27 proteins associated with tissue PLS/LRS status in the optimization set. Red- and blue-colored protein names indicate high- and low-risk proteins included in the final PLSec assay, respectively. (B) Number of selections for each protein as non-

redundant prognostic feature over the 1,000 iterative feature selections by LASSO. (C) Pattern of the PLSec protein abundance and associated clinical variables in the optimization set (79 patients with chronic hepatitis or cirrhosis who had curative HCC resection). (D) Within-plate (left panel) and inter-plate/batch (right panel) reproducibility of PLSec between technical replicates. (E) Sensitivity of Luminex assay. Vertical bars indicate 95% confidence interval from 10 batches at each dilution. (F) Prognostic association of PLSec with late recurrence assessed by log-rank test according to PLSec cut-off values in the optimization set. (G) Capability of the 43-protein panel, the 27-protein panel, and the final 8-protein PLSec to predict tissue-transcriptome-signature-based risk classification. (H) Association of PLSec-based prognostic prediction with late HCC recurrence after curative surgical tumor resection. (I) Induction of the 466 PLS/LRS-associated pathways in single-cell genome-wide transcriptome profiles of human cirrhotic livers.

COL1A1, collagen type (I) alpha 1 chain; VCAM-1, vascular cell adhesion molecule 1; ICAM-1, intercellular adhesion molecule 1; CCL-19, C-C motif chemokine 19; CXCL-6, C-X-C motif chemokine 6; IL-6, interleukin-6; GPNMB, transmembrane glycoprotein NMB; COL4A1, collagen alpha-1(IV) chain; FSTL1, follistatin-related protein 1; HGF, hepatocyte growth factor; uPAR, urokinase plasminogen activator surface receptor; TIMP-1, metalloproteinase inhibitor 1; CCL-21, C-C motif chemokine 21; IGFBP-7, insulin-like growth factor-binding protein 7; IGFBP-6, insulin-like growth factor-binding protein 6; PECAM-1, platelet endothelial cell adhesion molecule; IL-5, interleukin-5; NGF, beta-nerve growth factor; PLSec, prognostic liver secretome signature; AFP, alpha-fetoprotein; HCV, hepatitis C virus; HBV, hepatitis B virus; MFI, median fluorescent intensity; AUC, area under receiver operating characteristic curve; HR, hazard ratio; CI, confidence interval; HCC, hepatocellular carcinoma; HSC, hepatic stellate cell; VSMC, vascular smooth muscle cell; GSEI, gene signature enrichment index.

**Methods S4.** Cirrhosis/chronic hepatitis cohorts used for PLSec development, Related to STAR Methods.

Authors	Year	Major etiology	Country	No. patients	Concomitant HCC, No. (%)	Tissue acquisition	Cirrhosis, No. (%)	Male sex, No. (%)	Age, median (IQR)	GEO accession
Training data sets										
Hoshida <i>et al.</i>	2013	HCV	Italy	216	0 (0%)	Liver biopsy	216 (100%)	116 (53%)	59 (54-64)	GSE15654
Roessler <i>et al.</i>	2010	HBV	China	199	199 (100%)	Resection	185 (93%)	175 (88%)	50 (44-58)	GSE14520
Moylan <i>et al.</i>	2014	NAFLD	USA	72	0 (0%)	Liver biopsy	32 (44%)*	25 (35%)	51 (n.a.)	GSE49541
Trepo <i>et al.</i>	2017	ARLD	Belgium	36	0 (0%)	Liver biopsy	36 (100%)	n.a.	n.a.	GSE94417
Validation data sets										
Tsuchiya <i>et al.</i>	2010	HCV	Japan	44	44 (100%)	Resection	22 (50%)	32 (73%)	66.4 ± 7.9**	GSE17856
Archer <i>et al.</i>	2009	HCV	USA	63	16 (25%)	n.a.	63 (100%)	52 (83%)	n.a.	GSE17967
Meissner <i>et al.</i>	2014	SVR	USA	17	0 (0%)	Liver biopsy	n.a.	n.a.	n.a.	GSE51699
Meissner <i>et al.</i>	2016	SVR	USA	8	0 (0%)	Liver biopsy	3 (38%)	7 (88%)	55 (52-57)	GSE70779
Kim <i>et al.</i>	2014	HBV	Korea	72	72 (100%)	Resection	36 (50%)	58 (81%)	57.5 (29-77)	GSE39791
Halgand <i>et al.</i>	n.a.	HBV	France	63	n.a.	n.a.	n.a.	n.a.	n.a.	GSE47197
Chaisaingmongkol <i>et al.</i>	2017	HBV	Thailand	59	59 (100%)	Resection	n.a.	n.a.	n.a.	GSE76297
Grinchuk <i>et al.</i>	2018	HBV/HCV	Singapore	52	52 (100%)	Resection	n.a.	n.a.	n.a.	GSE76427
Zhou <i>et al.</i>	2017	HBV	China	128	0 (0%)	Liver biopsy	n.a.	n.a.	n.a.	GSE83148
Wang <i>et al.</i>	2017	HBV	China	124	0 (0%)	Liver biopsy	10 (8%)	88 (71%)	40 (33-51)	GSE84044
Hui <i>et al.</i>	2007	HBV	Singapore	37	37 (100%)	Resection	n.a.	n.a.	n.a.	GSE121248
Ahrens <i>et al.</i>	2013	NAFLD	Germany	73	0 (0%)	Liver biopsy	1 (1%)	15 (21%)	45 (38-51)	GSE48452
Xanthakos <i>et al.</i>	2015	NAFLD	USA	67	0 (0%)	Liver biopsy	1 (2%)	15 (22%)	17 (15-18)	GSE66676
Arendt <i>et al.</i>	2015	NAFLD	Canada	63	0 (0%)	Liver biopsy	4 (6%)	27 (43%)	41 (34-49)	GSE89632

Francque et al.	2017	NASH	France	104	0 (0%)	Liver biopsy	n.a.	46 (44%)	47 (35-54)	GSE83452
Makowska et al.	2016	ARLD	Switzerland	60	60 (100%)	Liver biopsy	54 (90%)	53 (88%)	64 ± 12**	GSE64041

\* Number (%) of advanced fibrosis, defined as F3 or F4, was shown.

\*\* Mean ± standard deviation.

HCV; hepatitis C virus; HBV, hepatitis B virus; NAFLD, nonalcoholic fatty liver disease; ARLD, alcohol-related liver disease; SVR, sustained virologic response; IQR, interquartile range.

**Methods S5.** Prognostic Liver Signature (PLSec) protein panel and tested proteins in the optimization set, Related to STAR Methods.

Protein name	Uniprot ID	Gene symbol	Anticipated prognostic association	Correlations with PLS enrichment*			Correlations with LRS enrichment*		
				Spearman's rho	p	FDR	Spearman's rho	p	FDR
<b>Vascular cell adhesion protein 1</b>	P19320	<i>VCAMI</i>	High-risk	0.40	<0.001	0.003	0.37	0.001	0.005
<b>Insulin-like growth factor-binding protein 7</b>	Q16270	<i>IGFBP7</i>	High-risk	0.31	0.005	0.02	0.38	0.001	0.005
<b>gp130</b>	P40189	<i>IL6ST</i>	High-risk	0.24	0.04	0.09	0.21	0.06	0.14
<b>Matrilysin</b>	P09237	<i>MMP7</i>	High-risk	0.41	<0.001	0.002	0.26	0.02	0.06
<b>Interleukin-6</b>	P05231	<i>IL6</i>	High-risk	0.18	0.12	0.20	0.19	0.09	0.18
<b>C-C motif chemokine 21</b>	O00585	<i>CCL21</i>	High-risk	0.47	<0.001	<0.001	0.46	<0.001	0.001
<b>Protein S</b>	P07225	<i>PROS1</i>	Low-risk	0.40	<0.001	0.001	0.38	0.001	0.001
<b>Angiogenin</b>	P03950	<i>ANG</i>	Low-risk	0.21	0.06	0.06	0.25	0.03	0.03
Follistatin-related protein 1	Q12841	<i>FSTL1</i>	High-risk	0.44	<0.001	0.001	0.35	0.002	0.008
Hepatocyte growth factor	P14210	<i>HGF</i>	High-risk	0.38	0.001	0.004	0.44	<0.001	0.001
Metalloproteinase inhibitor 1	P01033	<i>TIMP1</i>	High-risk	0.35	0.001	0.009	0.33	0.003	0.012
Osteopontin	P10451	<i>SPP1</i>	High-risk	0.35	0.001	0.009	0.21	0.062	0.143
Collagen alpha-1 (IV) chain	P02462	<i>COL4A1</i>	High-risk	0.34	0.002	0.010	0.31	0.005	0.018
C-C motif chemokine 19	Q99731	<i>CCL19</i>	High-risk	0.33	0.003	0.014	0.33	0.003	0.013
Midkine	P21741	<i>MDK</i>	High-risk	0.32	0.004	0.016	0.39	<0.001	0.003
Lumican	P51884	<i>LUM</i>	High-risk	0.29	0.009	0.028	0.38	0.001	0.004
Intercellular adhesion molecule 1	P05362	<i>ICAMI</i>	High-risk	0.27	0.015	0.043	0.08	0.470	0.622
Transmembrane glycoprotein NMB	Q14956	<i>GPNUMB</i>	High-risk	0.26	0.021	0.053	0.20	0.079	0.165
Interleukin-5	P05113	<i>IL5</i>	High-risk	0.23	0.042	0.097	0.06	0.570	0.673
Beta-nerve growth factor	P01138	<i>NGF</i>	High-risk	0.22	0.049	0.106	0.43	<0.001	0.001
Platelet endothelial cell adhesion molecule	P16284	<i>PECAMI</i>	High-risk	0.19	0.089	0.175	0.05	0.643	0.733
Collagen alpha-1(I) chain	P02452	<i>COL1A1</i>	High-risk	0.19	0.097	0.175	0.16	0.167	0.274
C-X-C motif chemokine 6	P80162	<i>CXCL6</i>	High-risk	0.19	0.098	0.175	0.21	0.063	0.143
Urokinase plasminogen activator surface receptor	Q03405	<i>PLAUR</i>	High-risk	0.18	0.110	0.189	0.17	0.142	0.253

Insulin-like growth factor-binding protein 6	P24592	<i>IGFBP6</i>	High-risk	0.16	0.161	0.245	0.03	0.803	0.844
Granzyme A	P12544	<i>GZMA</i>	High-risk	0.15	0.179	0.263	0.29	0.010	0.033
Fatty acid-binding protein, adipocyte	P15090	<i>FABP4</i>	High-risk	0.13	0.253	0.357	0.16	0.151	0.258
Pro-epidermal growth factor	P01133	<i>EGF</i>	High-risk	0.12	0.298	0.405	-0.02	0.891	0.914
Tumor necrosis factor receptor superfamily member 6	P25445	<i>FAS</i>	High-risk	0.12	0.313	0.405	0.23	0.046	0.126
Endoglin	P17813	<i>ENG</i>	High-risk	0.11	0.319	0.405	-0.07	0.558	0.673
Cathepsin S	P25774	<i>CTSS</i>	High-risk	0.11	0.326	0.405	0.26	0.021	0.061
Interferon gamma	P01579	<i>IFNG</i>	High-risk	0.10	0.389	0.465	0.05	0.679	0.752
C-C motif chemokine 2	P13500	<i>CCL2</i>	High-risk	0.07	0.562	0.601	0.01	0.923	0.923
Thrombomodulin	P07204	<i>THBD</i>	High-risk	0.06	0.569	0.601	0.18	0.113	0.211
Interleukin-2	P60568	<i>IL2</i>	High-risk	-0.02	0.873	0.873	0.04	0.720	0.777
Matrix metalloproteinase-9	P14780	<i>MMP9</i>	High-risk	-0.04	0.730	0.749	-0.06	0.574	0.673
Growth-regulated alpha protein	P09341	<i>CXCL1</i>	High-risk	-0.07	0.572	0.601	0.09	0.439	0.599
Interleukin-7	P13232	<i>IL7</i>	High-risk	-0.08	0.481	0.547	-0.09	0.418	0.591
CD44 antigen	P16070	<i>CD44</i>	High-risk	-0.10	0.397	0.465	-0.10	0.359	0.546
Vascular endothelial growth factor C	P49767	<i>VEGFC</i>	High-risk	-0.16	0.160	0.245	-0.10	0.360	0.546
Platelet factor 4	P02776	<i>PF4</i>	High-risk	-0.19	0.093	0.175	-0.10	0.391	0.573
Platelet-derived growth factor D	Q9GZP0	<i>PDGFD</i>	High-risk	-0.27	0.017	0.045	-0.20	0.081	0.165
Interleukin-18	Q14116	<i>IL18</i>	High-risk	-0.39	0.007	0.023	-0.09	0.563	0.673

Bold proteins are included in the final PLSec panel.

\* Correlations with signature enrichment with the same risk direction.

PLS, prognostic liver signature; LRS, late recurrence signature; FDR, false discovery rate.



**Methods S6.** Demographics of patients in the optimization set, Related to STAR Methods.

Variable	(n = 79)
Age, median (IQR), y	58 (52-64)
Male sex, No. (%)	62 (78%)
Etiology, No. (%): HCV/HBV/other	58/16/5 (73%/20%/7%)
Advanced fibrosis, No. (%)	58 (91%)
AST, median (IQR), IU/L	42 (25-67)
Platelet count, median (IQR), $\times 10^3/\mu\text{L}$	134 (83-192)
AFP, median (IQR), ng/mL	44 (12-218)
Time between HCC resection and serum collection, median (IQR), days	92 (75-107)
Clinical follow-up time, median (IQR), y	7.5 (3.5-9.7)
Tissue-based high-risk PLS, No. (%)	30 (38%)

Categorical variables are shown as n (%). Continuous variables are shown as median (IQR).

HCV, hepatitis C virus; HBV, hepatitis B virus; AST, aspartate aminotransferase; AFP, alpha-fetoprotein; HCC, hepatocellular carcinoma; PLS, prognostic liver signature; IQR, interquartile range.