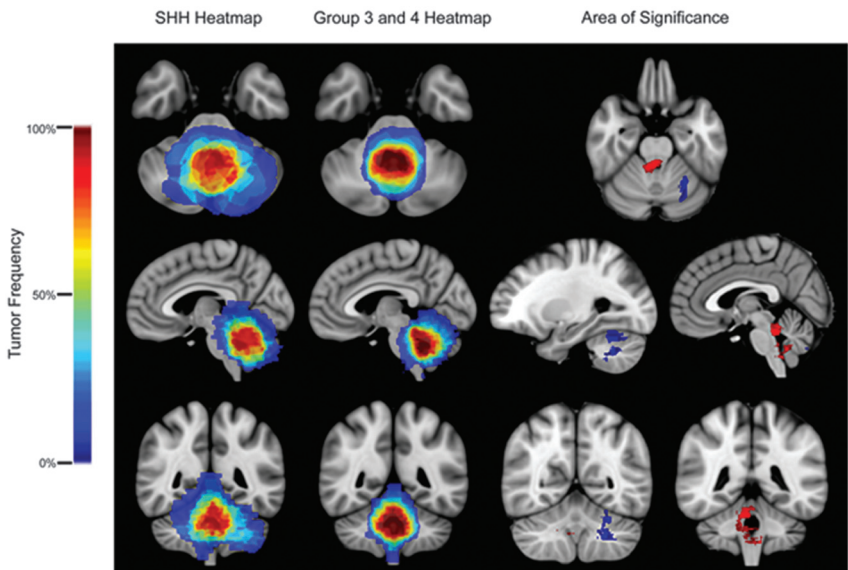
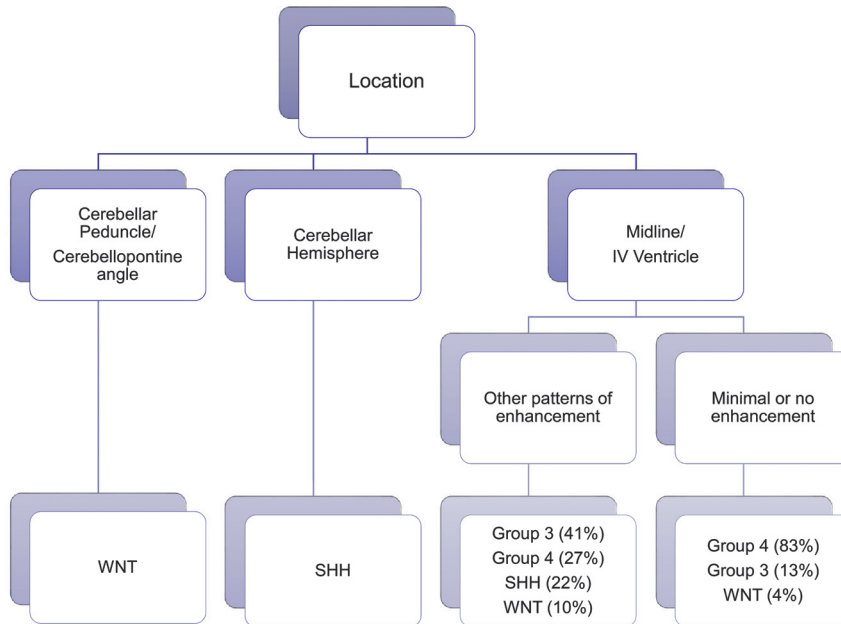


ON-LINE FIG 1. Frequency of medulloblastoma occurrence in the WNT subgroup (first column) versus the combined group 3 and 4 subgroups (second column) displayed in axial, sagittal, and coronal views. The area of significant differential involvement (third column) demonstrates that group 3 and 4 medulloblastomas are associated with localized midline fourth ventricular involvement (significant voxels displayed a range from $P = .007$ to $.05$, red), compared with predominance at the CP/CPA in WNT tumors (significant voxels displayed a range from $P = .003$ to $.05$, green). The midline fourth ventricular voxels differentially associated with group 3 and 4 lesions remain significant after adjusting for the family-wise error rate for multiple comparisons (corrected $P = .005$ – $.05$, center of red).



ON-LINE FIG 2. Frequency of medulloblastoma occurrence in the SHH subgroup (first column) versus the combined group 3 and 4 subgroups (second column) displayed in axial, sagittal, and coronal views. The area of significant differential involvement (third column) demonstrates that SHH medulloblastoma is significantly associated with greater infiltration of the cerebellar hemispheres, even after adjusting for the family-wise error rate for multiple comparisons (corrected $P = .02$ – $.05$, blue) versus the midline group 3 and 4 lesions ($P = .005$ – $.05$, red).



ON-LINE FIG 3. Decision-making tree based on a logistic regression model when combining the discovery and validation cohorts. Percentage represents the predicted subgroup.