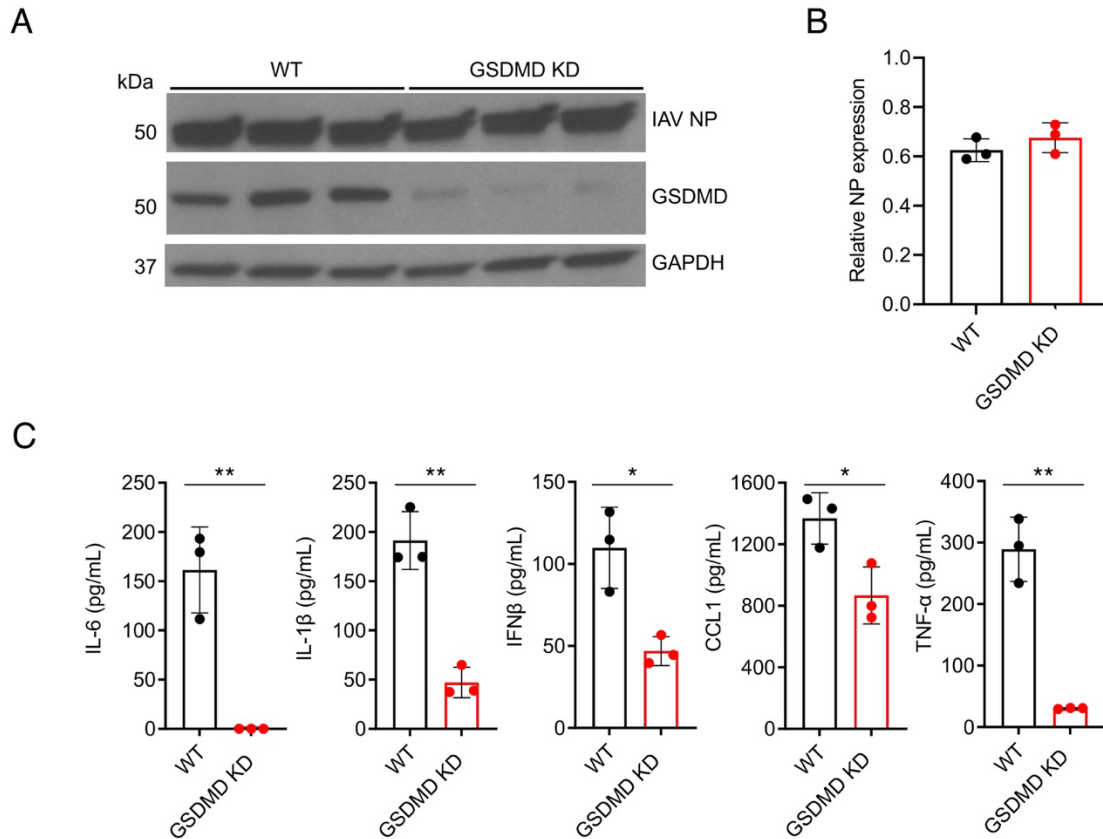
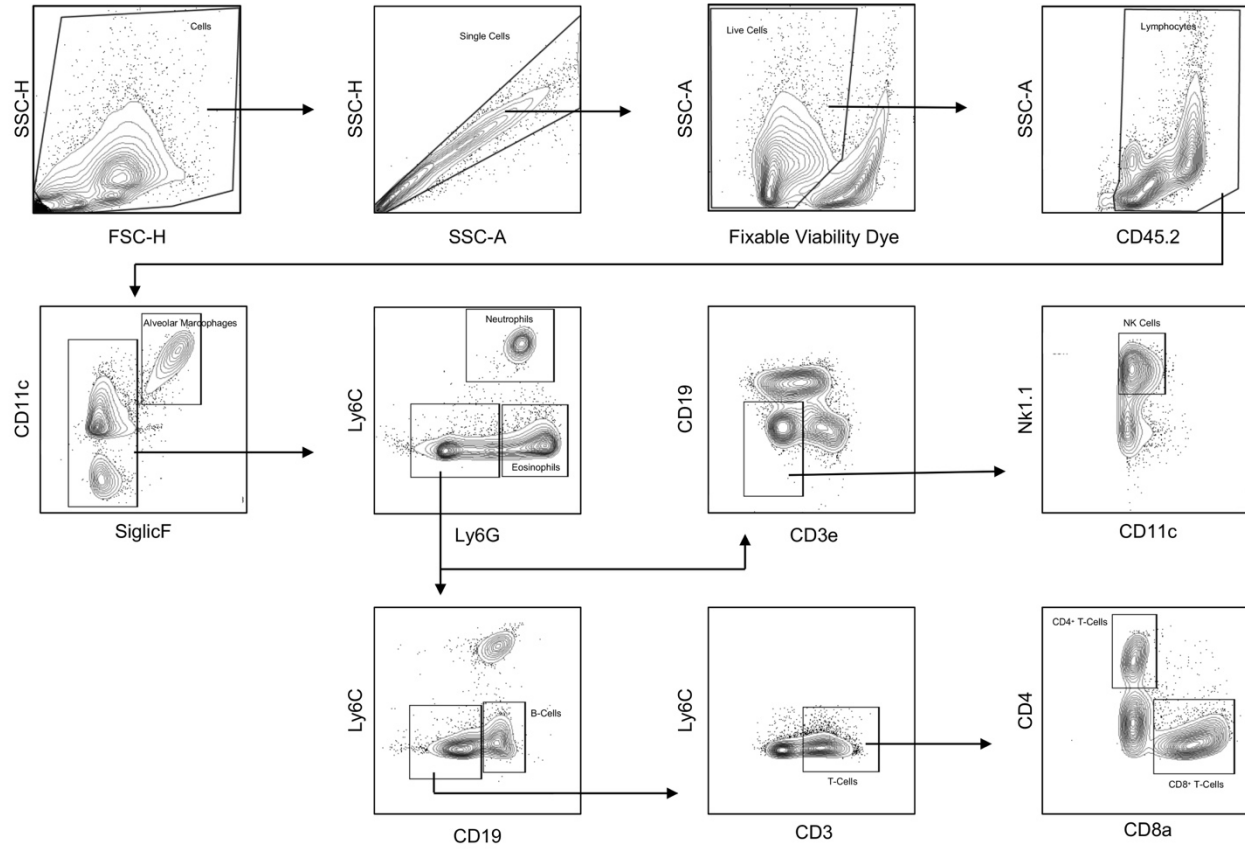


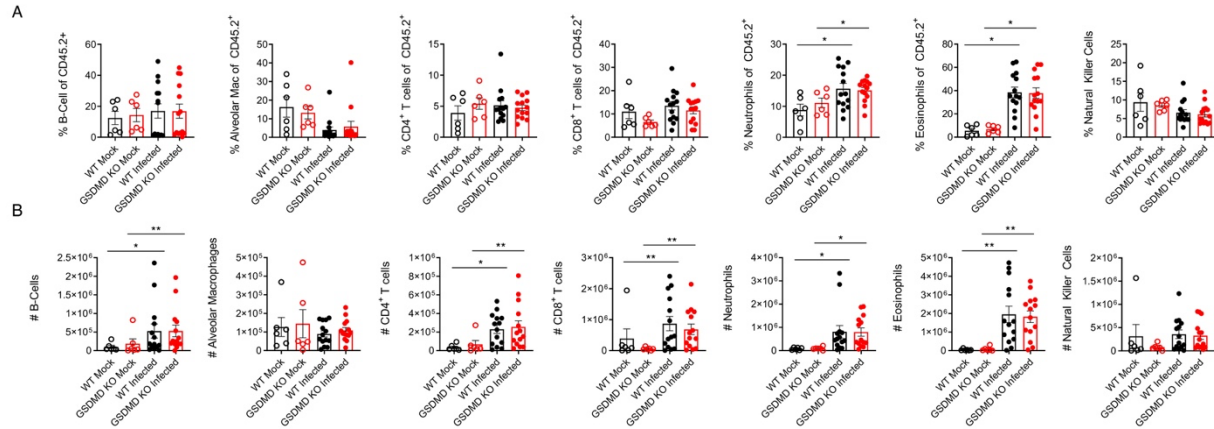
**Supplementary Figure 1: Pathway analysis of gene signatures downregulated in GSDMD KO mice.** **A-C** Differentially expressed genes in day 7 post infection GSDMD KO lungs versus WT were subjected to pathway and cell type analysis. **A** Downregulated genes in GSDMD KO versus WT lungs were subjected to PanglaoDB analysis and all significant associations with specific cell types are shown. **B** Significant REACTOME gene set enrichments ( $p < 0.05$ ) for all downregulated genes in GSDMD KO versus WT lungs. **C** All differentially expressed genes were examined using Ingenuity Pathway Analysis and the top five most significant Canonical Pathways are shown.



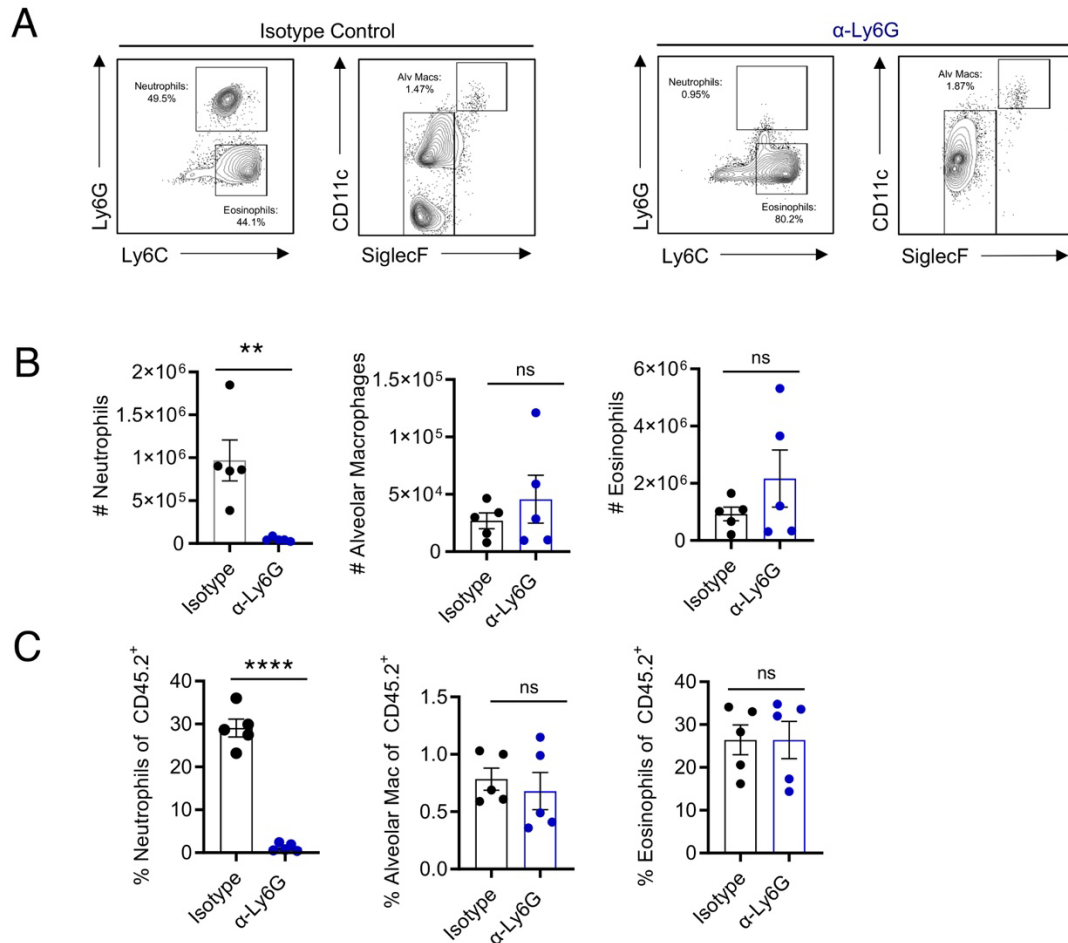
**Supplemental Figure 2: Human GSDMD promotes secretion of pro-inflammatory cytokines *in vitro*.** **A** Western blotting for PMA-differentiated WT and GSDMD knockdown (KD) human THP1 macrophages 48 hours post infection with PR8 at an MOI of 10 (NP = influenza virus nucleoprotein). Three technical replicates from one experiment were probed. **B** Densitometry quantification of NP levels relative to GAPDH in **A**. **C** ELISA quantification of IL-6, IFN $\beta$ , IL-1 $\beta$ , CCL1, or TNF- $\alpha$  levels in supernatants from cells infected as in **A** (\* $p < 0.05$ , \*\* $p < 0.01$ , t-test).



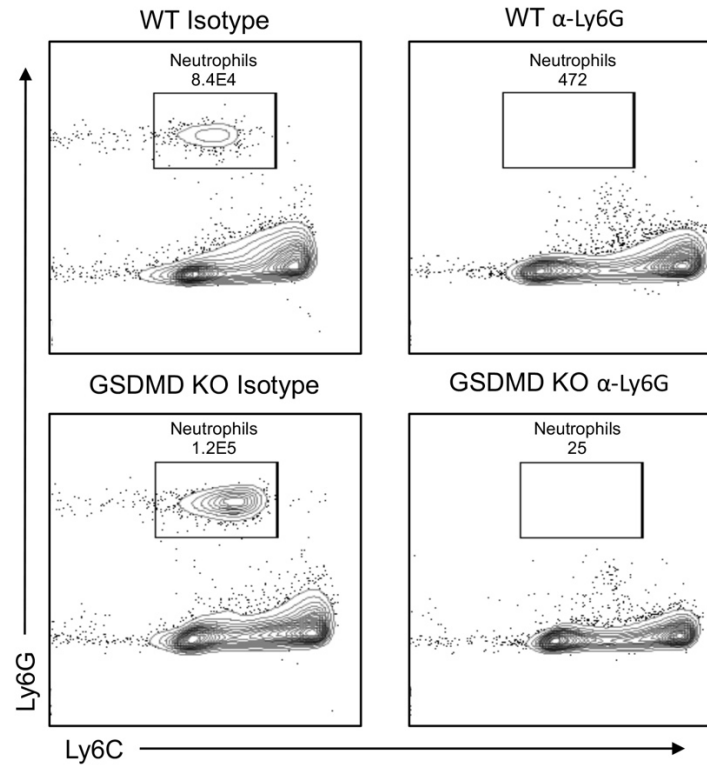
**Supplementary Figure 3: Gating strategy for quantifying immune cell recruitment to mouse lungs during IAV infection.**



**Supplementary Figure 4: GSDMD does not affect immune cell recruitment to the lung during IAV infection.** **A-B** WT and GSDMD KO mice were infected with 50 TCID<sub>50</sub> of PR8. Analysis was done on day 7 post infection using the flow cytometry gating strategy show in Supplementary Figure 3. **A** Percentage of indicated cell type relative to all CD45.2<sup>+</sup> immune cells (\*p < 0.05, two-way ANOVA and Tukey multiple comparisons test). **B** Number (#) of infiltrating immune cells into the lungs of mock and infected mice (\*p < 0.05, \*\*p < 0.01, two-way ANOVA and Tukey multiple comparisons test). Neutrophil # data is repeated from **Fig 4E** in main text.



**Supplementary Figure 5: Ly6G antibody treatment depletes neutrophils but not other innate immune cells. A-C** WT and GSDMD KO mice as infected in **Fig 5A**. **A** Representative flow cytometry plots showing neutrophil, eosinophil, and alveolar macrophage gating from lungs on day 5 post infection. Upstream gating performed as in Supplementary Figure 3. **B** Neutrophil, eosinophil, and alveolar macrophage total number (#) in the lung on day 5 post infection (\*\* $p < 0.01$ , ns, not significant, t-test). Neutrophil # data is repeated from **Fig 5B** in main text. **C** Neutrophil, eosinophil, and alveolar macrophage percentage of all CD45.2<sup>+</sup> cells in the lung on day 5 post infection (\*\*\*\* $p < 0.0001$ , ns, not significant, t-test).



**Supplementary Figure 6: Ly6G antibody treatment depletes neutrophils in GSDMD KO mice as expected.** Representative flow cytometry dot plots showing neutrophil gating of single-cell suspensions from the lungs of mice on day 5 post infection as in **Fig 5G**. These plots represent data from mice randomly chosen to be sacrificed to confirm neutrophil depletion.