Supplementary Materials

PD-L1) in Siglec-9+TAMs as compared to Siglec-9- TAMs in primary tumor tissues **(A)**, ascitic

 fluid samples **(C)** from HGSC, in CD14+monocytes derived from healthy donors were treated with tumor conditioned media (TCM) **(E)** and ascites fluid **(G)** corresponding to control. **(B**, **D, F, H)** Flow cytometry analysis of mean fluorescence intensity (MFI) of M1-like (CD86 and HLA-DR) and M2-like (CD163, CD206, arginase-1 and PD-L1) in Siglec-9+TAMs as compared to Siglec-9- TAMs in primary tumor tissues **(B)**, ascitic fluid samples **(D)** from HGSC, in CD14+monocytes derived from healthy donors were treated with tumor conditioned media (TCM) **(F)** and ascites fluid **(H)** corresponding to control. Significance was assessed by Mann-Whitney U test.

 Supplementary Figure 4 Single-cell sequencing data profiling of the fallopian tube, primary and ascites HGSC tumor environments.

 (A) Dimensionality reduction (UMAP) projections and clustering of 51,603 cells color-coded for the indicated cell type from 28 samples (*n* = 17 patients). **(B)** Violin plots of marker gene expression averaged per cluster, showing differential expression expressed genes in rows and clusters in columns. **(C)** Heatmap showed the large-scale CNVs for epithelial cells (rows along the y-axis) from 28 samples (*n* = 17 patients). CNVs were inferred according to the average expression of 100 genes spanning each chromosomal position (x-axis). Red: gains; blue: losses. Malignant HGSC cells from different patients and the range of different chromosomes were indicated as different color bars on the left and top of the heatmap, respectively. **(D)** Monocle2 trajectory analysis of monocyte/macrophage cells recapitulates 48 known lineage relationships, with classical monocytes $(CD14⁺)$ branching into macrophages. **(E)** Heatmap showing the dynamic changes in gene expression along the pseudotime. The distribution of macrophage subtypes during the transition, along with the pseudotime. Subtypes were labeled by colors. **(F)** Gene Set Enrichment Analysis (GSEA) plots of metabolic pathways were shown in Siglec-9+TAMs compared to Siglec-9- TAMs. The signature was defined by genes with significant expression changes. **(G)** The inferred IL-10 signaling networks. Circle sizes were proportional to the number of cells in each cell group and edge

 width represents the communication probability. **(H)** The differential genes that were 56 upregulated in Siglec-9+TAMs compared with Siglec-9⁻ TAMs from the integrated data (Figure 3D) were subjected to motif enrichment analysis. The top transcription factors from the analysis were shown. **(I)** Significant signaling pathways were ranked based on differences in the overall information flow within the inferred networks between primary tumors and ascites. The overall information flow of a signaling network was calculated by summarizing all communication probabilities in that network. The top signaling pathways colored red were enriched in ascites, and colored green were enriched in the primary tumors. **(J)** Comparison of the significant ligand-receptor pairs between primary tumor and ascites, which contributed to the signaling from CD8+T to Siglec-9+TAMs subpopulations. Dot color reflects communication probabilities and dot size represents computed *p*-values. Space means the communication probability was zero. *p*-values were computed from one-sided permutation test.

Supplementary Figure 5 Siglec-9+TAMs infiltration was associated with CD163+, CD8+T cells and immune phenotype in Fudan cohort.

 (A-B) Scatter plots showing the Spearman correlation analysis results between the score of Siglec-9+TAMs and M1-like **(A)** or M2-like **(B)** markers in HGSC TCGA specimens (*n* = 316). The rug plots on the right of the y-axis show the expression of CD68 and the Siglec-9 on top of the x-axis showed individual patients. Color scale: expression of markers from low (white) to high (purple). **(C)** Association between Siglec-9+TAMs and FIGO stage in HGSC TCGA specimens (*n* = 316). The Chi-square test was used to compare groups. **(D)** Kaplan-Meier curves of OS stratified by expression of Siglec-9+TAMs score in HGSC TCGA cohort (*n* = 316) using the Log-rank test. **(E)** Association between Siglec-9+TAMs and CD163 in Fudan cohort (*n* = 316). The Chi-square test was used to compare groups. **(F)** Kaplan-Meier curves of OS stratified by infiltration of Siglec-9+TAMs and CD163 in patients in Fudan cohort (*n* = 120) using the Log-rank test. **(G)** Expression of GZMB⁺ IFN-γ⁺and GZMB+TNF-α⁺on CD8+T cells

 stratified by infiltration of Siglec-9+TAMs. **(H)** Upregulated genes of both immunostimulators and immune checkpoints in Siglec-9+TAMs. *P* values were obtained by Bonferroni-corrected. **(I-K)** Kaplan-Meier curves of OS stratified by CD8+T infiltration in patients with stage III or IV 85 from Fudan cohort $(n = 92)$ (I) as well as for low Siglec-9+TAMs $(n = 49)$ (J) and high Siglec-9+TAMs (*n* = 43) **(K)** proportion in patients with stage III or IV HGSC tumors using the Log-rank test.

 Supplementary Figure 6 Siglec-9 blockade enhanced the antitumor activity of CD8+T leucocytes and skews macrophages to an M1-like phenotype.

(A-C) Intracellular cytokine production of (**A**) GZMB+IFN-γ⁺ or (**B**) GZMB+TNF-α⁺or (**C**) 92 IFN-γ⁺TNF- α ⁺ by healthy donor CD8 ⁺T cells co-cultured with TCM-educated macrophages in direct or indirect contact upon engagement by α Siglec-9 (5 mg/mL) (*n* = 3-5, t-test). **(D-E)** HGSC single cell suspension was incubated with control or Siglec-9-neutralizing antibody and subjected to flow cytometric analysis to determine the expression of biomarkers of CD86, HLA-DR **(D)** and CD163, CD206, Arginase-1, PD-L1 **(E)** stratified by Siglec-9+TAMs infiltration. Two-sided Wilcoxon rank-sum test was used for pairwise comparisons.

 Supplementary Figure 7 Gating strategy for flow cytometry assays to identify T cells and macrophages in fresh HGSC tissues.

 (A) Representative plots showing the flow cytometry gating strategy for M1 and M2 102 macrophages in Siglec-9+TAMs. **(B)** Representative gating strategy for tumor-infiltrating CD8+, CD4+Foxp3- Teff and CD4+Foxp3+Tregs, where expression of cytolytic markers was assessed as well as co-inhibitory receptors.

Supplementary Figure 8 Relationship between Siglec-9+TAMs infiltration and ICB-response

signature predicting poorer responses HGSC TCGA cohort.

 (A-B) Scatter plots showing the Spearman correlation analysis results between the score of Siglec-9+TAMs and DDIR (DNA Damage Immune Response), Immune checkpoint, Tertiary lymphoid structure TLS, IFN signature 18 genes **(A)** and indicated signatures for good prognosis responsive to ICB-treatment **(B)** in HGSC TCGA specimens (*n* = 316). The rug plots on the right of the y-axis showed score of corresponding pathways and the Siglec-9+TAMs score on top of the x-axis showing for individual patients. *P* and r values were from a Spearman correlation coefficient test.

 Supplementary Figure 9 Siglec-9+TAMs and PD-L1 expression panel correlated with molecular alterations and clinical outcome in HGSC.

 (A) Forest plots of HR for overall survival high Siglec-9+TAMs score versus the other were respectively protracted according to distinct levels of PD-L1 expression. **(B)** Kaplan-Meier curves of overall survival (OS) stratified by Siglec-9+TAMs infiltration combing PD-L1 expression level in TCGA cohort (*n* = 316) using the Log-rank test. **(C)** Scatter plots showing the Spearman correlation analysis results between the score of Siglec-9+TAMs and *CD274* expression (R=0.64, *P*<0.05) in patients of the TCGA cohort. The rug plots on the right of the y-axis showed the expression of *CD274* and the Siglec-9+TAMs signature defined on top of the x-axis showed individual patients. Color scale: expression of markers from low (white) to high (purple). Data were analyzed by Mann–Whitney U test and presented as mean and SD. **(D)** Landscape of pathway enriched in molecular function and biological processes, along 128 with PD-L1 expression across four subgroups (Siglec-9+TAMs^{low}PD-L1neg, 129 Siglec-9+TAMslowPD-L1pos, Siglec-9+TAMshighPD-L1neg, Siglec-9+TAMshighPD-L1pos) in TCGA cohort. **(E)** Landscape of genomic alterations and spectrum of inferred COSMIC mutational signatures across four subgroups in TCGA cohort. Statistical significance (Mann-Whitney U test *P* < 0.05) was indicated with asterisk. (*, *P* < 0.05) HRs were evaluated by univariate Cox analysis in the TCGA cohort. HRR, homologous recombination repair; MMR, mismatch repair; RTK, receptor tyrosine kinase; CI, confidence interval; HR, hazard ratio; GA, gene alteration;

WT, wild type.

 Supplementary Figure 10 Oncogenic pathway and immune pathway activity across Siglec-9+TAMs and PD-L1 panel in HGSC.

 (A) Pathway activity was estimated as the mean expression of downstream genes targeted by each pathway. Only genes that were transcriptionally activated by these pathways were considered. Kruskal-Wallis test p-values were Benjamini-Hochberg corrected. **(B-C)** Violin plot showing portions of CD20 expression stratified by Siglec-9+TAMs and PD-L1 in Fudan cohort (*n* = 120) **(B)** and B cell signature in HGSC TCGA cohort (*n* = 316) **(C)**. In the box plots inside violin plots the black horizontal lines represent the sample means, the boxes extend from the first to third quartile and the whiskers indicate values at 1.5 times the interquartile range. Data were analyzed by Kruskal-Wallis test. **(D)** Summary of molecular characteristics found in the present study, and potential therapeutic implications for the treatment of HGSC per subtype of infiltration of Siglec-9+TAMs combined with PD-L1. From top to bottom: Siglec-9+TAMs subtypes, PD-L1 subtypes, shared genomic features among infiltration subtypes; unique characteristics per infiltration subtype; suggested therapeutic strategies per infiltration subtype.

 Supplementary Table 1. Patient characteristics and relationship with Siglec-9+TAMs cell infiltration.

Supplementary Table 2. Immunohistochemistry antibodies.

Supplementary Table 3. Flow cytometry antibodies and reagents.

Supplementary Table 4. Univariable and Multivariate analysis for OS in Fudan Cohort.

Supplementary Table 5. Univariable and Multivariate analysis for OS according to

Siglec-9+TAMs cells in Fudan Cohort.

Supplementary Table 6. The transcriptomic data were publicly available.

Supplementary methods

HGSC patient tissue.

 Preparation of single-cell suspensions. Fresh tumor samples were processed independently with enzymatic digestion and mechanical dissociation immediately after collection to generate single-cell suspensions. Briefly, each tumor was cut into small pieces 167 with approximately 1-mm³ in RPMI 1640 medium with 10% fetal bovine serum (FBS), followed by enzymatic type IV (Signa) digestion for 90 min on a rotator at 37°C. The digested mixture was passed through a 40 μm cell strainer to obtain dissociated cells. The filtered mixture was centrifuged at 400 g for 5 min, and after removal of the supernatant, the pelleted cells were resuspended in red blood cell lysis buffer (Invitrogen) and incubated at room temperature for 10 min. After washing twice with PBS, the dissociated cells from the tumor were resuspended in a cell staining buffer (Invitrogen), consisting of 1X PBS supplemented with 0.04% BSA. Cells were collected from the ascites via centrifugation either by paracentesis or during laparotomy. After the collection of the fluid, the fluid was 176 centrifuged for 10 minutes at 500 x g at 4° C) and residual red blood cells in pellets were lysed using the same procedure abovementioned. PBMCs were isolated using a leukocyte separation solution, following the manufacturer's instruction (HISTOPAQUE-1077; Sigma-Aldrich). Briefly, 5 ml of fresh peripheral blood was collected in EDTA anticoagulant tubes and subsequently transferred into the solution. After density gradient centrifugation for 20 min at 400 x g, PBMCs settled at the interphase were carefully collected and washed twice with PBS. Residual red blood cells were lysed using the same procedure abovementioned.

 Tumor Conditioned Medium (TCM). Tumor tissues were washed with PBS, then minced and seeded on a petri dish in RPMI 1640 medium containing 10% FBS. After 48 hours of culture, the medium was filtered through a 0.22 μm ultra-low protein binding filter and 188 collected as the conditioned medium. Ascitic fluid was centrifuged at 400 x g for 5 min and 189 filtered through a 0.22 µm ultra-low protein binding filter and stored at -80°C for long-term storage.

 Cell lines. SKOV3, OVCAR-5, OVCAR8, A2780 and HO-8190 were acquired from ATCC. Cell lines were tested for their authentication by STR-PCR, performed by Biowing (Shanghai, China), before the start of the project. All the cell lines were cultured in RPMI 1640 supplemented with 10% Fetal Bovine Serum and 1000 U/mL Penicillin-Streptomycin, except for SKOV3 in Mc5A (ATCC) supplemented with 10% Fetal Bovine Serum and 1000 U/mL Penicillin-Streptomycin.

 Tumor lysate production. SKOV3 tumor cells were harvested from 80% confluent culture 200 flasks and resuspended at $1x10^6$ cells/mL concentration for SKOV3 in PBS. Cells were disrupted by five freeze-thaw cycles and subsequent sonication to produce a homogeneous lysate.

 Immunohistochemistry (IHC). Tissue microarray construction and the IHC protocol have been described previously. The specimens were collected from the Obstetrics and Gynecology Hospital of Fudan University within 30 min of the tumor resection and fixed in 10% formalin for 48 h. Dehydration and embedding in paraffin were performed as the following routine methods. These paraffin blocks were cut into 5-µm sections and adhered to 209 a glass slide. Then, the paraffin sections were placed in the 70 \degree C paraffin oven for 1 h before being deparaffinized in xylene and then rehydrated in 100%, 90% and 70% alcohol successively. The detailed procedure of immunohistochemistry was provided in Table S2.

 Single staining. FFPE tissue was deparaffinized and antigen retrieval was performed using citrate buffer (pH=6) and heat treatment. The tissue was blocked with Carbo-Free Blocking Solution (Vector Labs) and then incubated with biotinylated Siglec-9 Fc chimera (5 μg/ml) for 30 min at room temperature, which was generated using a Mix-n-Stain biotin labeling kit (Biotium). Slides were washed and incubated with Streptavidin-Peroxidase conjugates for 30 min at room temperature. Development of section was performed with 3,3'-Diaminobenzidine (DAB, Abcam) and using hematoxylin as counterstain.

 Double staining. FFPE tissue was performed on the human sample using a Double IHC Kit (ZSGB-BIO DS-0006) according to the provided factory instructions.

 Pathologist Scoring. Immunohistochemistry sections were scanned by Olympus CDD camera, Nikon eclipse Ti-microscope (200X magnification) and NIS-Elements F3.2 software. Qupath was used for quantification of the signal intensity of the ductal cells using the color deconvolution plug-in. Two genitourinary pathologists, masked to the follow-up data, count the number of positive staining cells at 200× magnification, and the average number was used as the final number.

 Immunofluorescence (IF). Siglec-9 ligand expression on OCT-embedded tissue sections was assessed by lectin immunohistochemistry. Fresh frozen ovarian tumor sections were 233 cut at 10 μ m thickness and then fixed with the mixture of methanol /acetone (50/50, v/v), solution and following washing steps. Blocking with BSA and Streptavidin/Biotin Blocking Kit 235 (Vector Labs). Sections were incubated overnight at 4° C with Siglec-9 Fc chimera (ligand) and were subsequently detected with PE-streptavidin (Biolegend). Tissue sections were counterstained with DAPI (Sigma-Aldrich) and quenched autofluorescence signal by autofluorescence Quenching kit medium (Vector Labs), mounted in antifade mounting medium (Vector Labs).

Flow Cytometry. Cryopreserved single-cell suspensions from human tumor tissue and cells

 in ascitic fluid (and PBMCs for use as controls) were thawed. When indicated, cells were treated with 25mU/mL of neuraminidase from Clostridium perfringens (Sigma-Aldrich) for 30 min at 37 °C to study the dependency of Siglec on the interaction with sialic acid. Live single cells were sub-gated by staining with Zombie Aqua™ Fixable Viability Kit (1:500 dilution, Biolegend) for 30 minutes at room temperature in the dark. For blocking of Fc receptors, cells were stained for 10 minutes on ice before immunostaining. After one wash with flow cytometry buffer, cells were incubated with appropriate dilutions of various combinations of the following antibodies. Appropriate antibody concentrations were determined previously by titration in Table S3. Samples were fixed per manufacturers' directions for 60 min (eBioscience) and stained for intracellular targets in 1X permeabilization buffer (eBioscience), at 25℃ for 60 minutes in the dark. Samples were washed with PBS +2% FBS and resuspended in 1X stabilizing fixative for flow cytometry (BD) use. The stained cells were acquired by a Beckman Coulter cytoflex flow cytometer using FACS CytExpert software (Beckman Coulter) and the data were analyzed with the FlowJo software (FlowJo LLC) v.10.7.2. All gates were set based on isotype control antibodies after appropriate compensation using single-stained compensation controls.

 Phosphorylation analysis. The phosphorylation of Siglec receptors induced by the tumor 259 lysates was analyzed using flow cytometry. CD14+ isolated monocytes were aliquoted into 24-well U-bottom plates and 100 ng/mL M-CSF was added to cells to desired dilutions as indicated for 3 days. Then educated macrophages with TCM or ascites and then treated with 262 anti-Siglec-9 or isotype control (both 5 mg/mL) in complete RPMI for 4 h at 4 \degree C. Phosphorylation status of Siglec-9+TAMs cells from healthy donors treated with tumor lysates for 1 or 5, 10, and 15 minutes compared with time-matched controls (ratio) measured by cytometry**.** The treatment was stopped by fixing cells at room temperature (RT) immediately 266 with 4% PFA (2% final volume)¹. Cells were stained with antibodies according to manufacturer protocol against cell surface markers and live/dead dye. After fixation with 4% PFA for 10 minutes, cells were washed and resuspended in 150 uL of prechilled True-Phos™

 Perm Buffer according to the manufacturer's protocol (Biolegend). Cells were then stained with antibodies against intracellular markers (pSHP-1 and pSHP-2; 45 minutes to 1 hour at RT) and analyzed on the flow cytometry the same day. All gates were set based on isotype control antibodies after appropriate compensation using single-stained compensation controls.

In vitro flow-based phagocytosis assay.

 For all flow-based in vitro phagocytosis assays, tumor cells and Siglec-9+TAMs were co-cultured at a ratio of 2:1 in ultra-low-attachment 96-well U-bottom plates (Corning) in serum-free RPMI (Thermo Fisher Scientific). PBMC-derived macrophages were pre-incubated with a tumor-conditioned medium for 24-48 hours and separated Siglec-9+TAMs by fluorescence-activated cell sorting. HO-8190 tumor cells were labeled with CFSE (Invitrogen) by suspending cells in PBS (2.5 μM working solution) for 25 min at 37°C protected from light and washed twice with 20 ml of FBS-containing media before co-culture. 283 Carboxylate-modified red fluorescence latex beads with a mean diameter of $2 \mu m$ beads and human macrophages were co-cultured in ultra-low-attachment 96-well U-bottom plates (Corning) in serum-free RPMI (Thermo Fisher Scientific) at a bead: cell ratio of 1:500 for 1 h at 37 °C and 5% CO2. For blocking binding with anti-Siglec-9, educated macrophages were treated with 5 μg/mL anti-Siglec-9 or isotype control before being incubated with lysates for 288 4 h at 4 ° C and then stimulated in the presence of lysates for 5min in room temperature. Plates were washed two times; human macrophages were added to the plate; and plates were incubated for 1h at 37°C Phagocytosis was stopped by washing with 4°C PBS and centrifugation at 400 x g before the cells were stained with Live/Dead stain and anti-CD11b. Assays were analyzed by flow cytometry, and phagocytosis was measured as the number of CD11b⁺ and CFSE⁺ macrophages, quantified as a percentage of the total CD11b+macrophages and normalized to the control condition.

Macrophages-mediated T-cell suppression assay

 To measure the T cell suppression by macrophages, macrophages were pre-incubated with a tumor-conditioned medium for 24-48 hours and separated Siglec-9+TAMs by fluorescence-activated cell sorting. CD8+T cells were isolated from peripheral blood using MACS CD8 MicroBeads (Miltenyi). For blocking binding with anti-Siglec-9, Siglec-9+TAMs were treated with 5 μg/mL anti-Siglec-9 or isotype control before being incubated with lysates for 4 h at 4 °C and then stimulated in the presence of lysates for 5min in room 303 temperature. Then macrophages $(3 \times 10^4 \text{ cells})$ were co-cultured with T cells $(1.5 \times 10^4 \text{ cells})$ in the presence of anti-CD3/CD28 beads (Dynabeads Human T-Activator CD3/28, Thermo 305 Fisher Scientific) for 3 days at 37° C. Activated T cells without macrophages were used as a positive control. T-cell proliferation was assessed by flow cytometry. Protein transport inhibitor cocktail and cell stimulation cocktail (Invitrogen) was added to detect intracellular cytokines in CFSE-labeled CD8+T cells during the final 5 h. CFSE dilution was analyzed to assess T cell proliferation.

 Ex vivo tumor stimulation assay. To recapitulate the tumor faithfully from their derivation and test the sensitivity to PD-1 blockade, we developed HGSC short-term organoids culture. The single-cell suspension was incubated in 1x Red Blood Cell Lysis buffer (Biolegend) for five minutes at room temperature and spun for three minutes at 1500 RPM. The lysis buffer was aspirated and resuspended in RPMI-1640 (10% FBS, and 1% Pen/Strep). The 316 appropriate cell number of single cell suspension was diluted to a concentration of 6 x $10⁶$ cells/mL in RPMI-1640, 10% FBS, 1% Pen/Step, and 30 ng/mL of IL-2 (Peprotech) mixed with 15% Matrigel (Corning). 40 uL of suspension was added per well of 24 well plates. Anti-PD-1 antibody (Biolegend) and isotype control were with a final concentration of 5 μg/mL, neutralizing antibodies for Siglec-9 (R&D Systems) and isotype control (R&D Systems) 321 with a final concentration of 5 μ g/mL antibody was used in RPMI-1640, 10% FBS, 1% Pen/Strep, and 30 ng/mL of IL-2 for 96 hours. Protein transporter inhibitor (Biosciences)

 was added to the media at a concentration of 1:500 and incubated for 5 hours before being harvested for flow cytometry analysis. For intracellular T effector cytokine and cytotoxic granule detection, cells were fixed and permeabilized (fixation and permeabilization kit, eBioscience) as per the manufacturer's instructions.

 Genomic analysis and variant assessment. Gene alterations (GA) were defined as the aggregation of gene mutation and copy number variation (CNV). Either nonsense, missense, frameshift, or splice-site variants affecting consensus nucleotides; on deleterious homozygous deletions and amplifications were defined as gene alteration. The mutational pattern of each sample was established by categorizing SNVs according to their 96-trinucleotide context. The contribution of each of the 79 mutational signatures from COSMIC v3.3 (as deposited on June 2022).

 Single-cell RNA-seq analysis. The scRNA-seq data was downloaded from the GEO 337 GSE151214², GSE154600³ and GSE146026⁴ as pre-processed raw data and imported into the package Seurat (v4) for down-stream analysis (Table S6). The data were filtered to include genes that were expressed in at least 25% of cells and cells that expressed at least 200 genes and 3% ribosomal transcripts, not more than 6000 genes and less than 15% of mitochondrial transcripts. Cell cycle effects were adjusted by regressing out the G2M and S phase gene expression scores using the ScaleData function of the Seurat package. Doublets were artefactual libraries generated from two cells arising due to errors in droplet encapsulation of cells, and thus commonly affect the quality of single-cell sequencing data. The R package "DoubletFinder"(https://github. com/chris-mcginnis-ucsf/DoubletFinder) was applied to predict doublets in our data. A doublet was defined as a single-cell library representing more than one cell, and a closer examination of some known markers would suggest that the offending cluster consists of doublets of more than one cell type, while no cell type was known to strongly express both markers at the same time. We removed doublets in each sample individually, with an expected doublet rate of 0.04 and default parameters used otherwise. The remaining cells that survived the filtering criteria were single. Then the gene expression matrices for all cells from the fallopian tube, primary tumors and ascites were combined and converted to a Seurat object using the FindIntegrationAnchors function of the Seurat package. The SCTransform function was used to normalize and scale the data, regressing out the mitochondrial percentage,and Principle component analysis (PCA) was performed using the highly variable genes that were identified by the SEURAT function ''FindVariableGenes()''. From the remaining cells, the tSNE transformation was performed 358 using the RunTSNE with default perplexity value ⁵. These clusters were projected onto Uniform Manifold Approximation and Projection (UMAP) dimensional reduction. Gene expression matrices were generated with log normalization and linear regression using the ''NormalizeData()'' and ''ScaleData()'' functions of the Seurat package. Cell populations were identified using the SEURAT ''FindClusters()'' function with a resolution set to 1.5. Marker genes for each cluster were identified using the SEURAT function ''FindMarkers()'' with default parameters. The binary expression plots were generated by coloring the tSNE plot with the expression status of selected genes, i.e. expressed (UMI count >0) or not expressed (UMI count = 0).

 Cell cluster annotation. Cell clusters were identified using the FindClusters function in Seurat, with a K parameter of 20 and default parameters used otherwise. We annotated the clusters as different major cell types based on their average gene expression of well-known markers, including CD4+T cell (PTPRC, CD3D, and CD4), CD8+T cell (PTPRC, CD3D, and CD8A), myeloid cell (CD14 and ITGAX encoding CD11C), macrophages (FCGR2A, CSFIR), CD14+monocytes (S100A9, CD14), malignant cell (EPCAM and KRT family genes), dendritic cells (FLT3, IL3RA), B cell (CD19 and MS4A1), plasma cells (SLAMF7, IGKC), mast cells (TPSAB1 and TPSB2), cancer-associated fibroblasts (PDPN and DCN) and stromal cells (PECAM1, ACTA2). Clusters were also confirmed by identifying differentially expressed marker genes for each cluster and comparing them to known cell-type-specific marker genes.

 InferCNV analysis. To identify malignant cells, we identified evidence for somatic alterations of large-scale chromosomal copy number variants, either gains or losses, in a single cell using inferCNV (https://github.com/broadinstitute/inferCNV), in addition to the expression of EPCAM. The raw single-cell gene expression data were extracted from the Seurat object according to the software recommendation. The single-cell data derived from cancer-associated fibroblasts and stromal cells were included as a control reference. We performed inferCNV analysis with the default parameters.

 Derivation and experimental validation of single-cell signatures. As described in Figure S4A-B, we sought to derive signatures for single cell populations (in particular, the Siglec-9+TAMs population) for application to bulk RNA-seq data and/or data from clinical cohorts. Gene sets specific for each myeloid population were generated using the function FindMarkersAll in the Seurat package to find differential genes expressed between each cluster. To enable the discovery of highly specific single-cell signatures, we performed multiple rounds of differential expression (DEG) analysis. First, we performed a ''subpopulation'' DEG analysis, whereby each cluster (e.g. Siglec-9+TAMs) was compared to all other cells in its broad lineage (e.g. all other macrophage clusters). This round of DEG establishes the DEGs specific to the cluster (i.e. subpopulation). For each cluster, we then retained only those genes (log FC > 0.55; FDR *P* < 0.01) exclusive to that cluster's subpopulation DEG. Subsequently, for each cluster, we performed a ''lineage'' DEG analysis, in which each cluster (i.e. Siglec-9+TAMs) was compared to all other clusters of other lineages 401 (e.g. all CD8+ clusters, and all myeloid clusters). For each subpopulation (e.g. Siglec-9+TAMs) within a lineage (e.g. CD8+T cells, CD4+T cells, TAMs, monocytes, B cells, Mast cells and CD45-cells), we retained the same set of lineage genes, i.e. the set of genes that were commonly upregulated across all subpopulations of the same lineage when performing DEG analyses vs other lineages. As with the subpopulation DEG analysis, for each lineage, we only retained genes that were exclusive to that lineage when compared to all other lineage signatures. To define the final signature genes for each cluster, we combined its subpopulation and lineage DEGs—and, to ensure that genes in each signature were only expressed on immune cells and not on CD45- cells, we filtered out genes that were expressed with FPKM >25 in the Cancer Cell Line Encyclopedia (https://portals.broadinstitute.org/ccle), 411 following a similar step as in Liu et al Nature 2020 6 . We next sought to validate the specificity of these signatures in an independent dataset of HGSC patients receiving bulk RNA sequencing. The populations used for sorting and validation were described in subsequent sections in the methods. Generating gene sets were later used in survival analysis using bulk transcriptomics. These genes were also considered signature genes for each cluster and used for bulk RNA-seq analysis as described in Figure 4G-H, Figure S5A-F and Figure 5H.

 Pathway enrichment analysis. To gain functional and mechanistic insights into a cell cluster, we performed Gene Ontology (GO) pathway enrichment analyses using the R package clusterProfiler to identify biological pathways that were enriched in a certain gene list more than that would be expected by chance. For non-malignant cells, the gene list included the DEGs with IogFC > 0.25 and P value <0.05 in clusters. P value <0.05 was considered to be a significant enrichment. To compare the difference in signaling pathway enrichment between two clusters (Sigelc-9+TAMs versus Sigelc-9-TAMs), we performed the gene set enrichment analysis (GSEA; version 3.0) using the selected molecular signatures database v7.070. To explore the heterogeneous expression of TAMs, we performed gene set variation analysis (GSVA, version 1.34.0), using 29 functional gene expression signatures (Fges)⁷ described in the molecular signature database.

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Motif enrichment analysis. Motif enrichment analyses were performed using Metascape⁸.

The motif enrichment analysis from Metascape was based on the TRRUST algorithm.

 Developmental trajectory inference. To characterize the potential process of immune cell functional changes and determine the potential lineage differentiation among diverse immune cells, we performed trajectories analyses for monocytes and macrophages, using 436 Monocle2⁹ (version 2.8.0; http://cole-trapnell-lab.github.iol/monocle-release/monocle2/). 437 The data of the indicated clusters calculated in Seurat was fed directly into Monocle2. Next, 438 we carried out density peak clustering (Monocle2 dpFeature procedure) to order cells based on the genes with differential expression between clusters, using the differentialGeneTest 440 function in Monocle2. Genes with a q-value \lt 1e-4 were used to order the cells in pseudotime analysis were used for ordering in all instances. The dimensional reduction was performed by the Monocle2 function reduceDimension using the DDRTree method and cell order with 443 the default parameters of Monocle2.

 Receptor-ligand interaction analysis. For malignant cells and myeloid clusters, we 446 identified all significant pair-wise interactions using CellChat¹⁰. Using the 6 myeloid clusters, we generated the required metadata and count files (using log-normalized counts). For CellChat analysis, this cleaned object was fed into the CellChat workflow, using the built-in human ligand-receptor database, and tri-mean thresholding for the significance of interaction.

Reference

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