

Figure S1. CSF IL-3 in RRMS and *II*3 expression, gating strategy and enumeration of leukocytes in WT and $II3^{-/-}$ EAE mice.

(A) IL-3 amount in the CSF of male and female control and RRMS subjects (n=17 control females, 12 control males, 30 RRMS females, 7 RRMS males; Mann–Whitney *U*-tests).

(B) CSF IL-3 in male and female RRMS patients during relapse or remission (n=21 remission, 15 relapse; Mann–Whitney *U*-tests).

(C) CSF IL-3 amount in male and female converter and non-converter CIS patients (n=19 non-converter females, 9 non-converter males, 17 converter females, 5 converter males; Mann–Whitney *U*-tests).

(D) *II3* expression in lymph nodes and spleen of control and EAE mice at peak (n=4-5 mice/group).

(E) Representative flow cytometric peripheral leukocyte gating strategy during the peak of EAE.

(F) Quantification of immune cell subsets in the blood, spleen, and bone marrow of WT and *II3^{-/-}* mice (n=5 mice/group).

(G) Representative flow cytometric CNS leukocyte gating strategy during the peak of EAE. Mean±s.e.m.

CSF, cerebrospinal fluid; EAE, experimental autoimmune encephalomyelitis; ns, not significant. Supplemental Figure 1 – related to Figure 1



Figure S2. IL-3 is dispensable for the peripheral priming of myelin-reactive CD4⁺ T cells.

(A) Schematic diagram of the experimental design. WT and *II3^{-/-}* mice by administering MOG₃₅₋₅₅ peptide emulsified in CFA by subcutaneous injection on day 0. Peripheral organs were collected for analyses on 8 dpi.
(B) Flow-based quantification of CD4⁺ T cells in the spleen and peripheral lymph nodes of in WT and *II3^{-/-}* mice and flow cytometric analysis of CD4⁺ T cell proliferation via Ki67 staining in WT and *II3^{-/-}* mice (n=7 mice/group).

(C) Flow cytometric analysis of spleen and lymph node CD4⁺ T cell phenotypes based on IFN- γ and IL-17A staining in WT and *II3^{-/-}* mice (n=7 mice/group).

(D) Flow cytometric analysis of GM-CSF-producing CD4⁺ T cell numbers in WT and $II3^{-/-}$ mice (n=7 mice/group).

(E) Flow cytometry gating strategy and quantification for resident DCs, migratory DC, and moDC populations in lymph nodes (n=7 mice/group).

(F) MFI of MHCII, CD80, CD86, and OX40L among resident DC, migratory DC, and moDC populations in lymph nodes (n=7 mice/group).

(G) Flow cytometry gating strategy and quantification for CD11b⁻CD11c⁺ and CD11b⁺CD11c⁺ cells in the spleen (n=7 mice/group).

(H). MFI of MHCII, CD80, CD86, and OX40L among splenic CD11b⁻CD11c⁺ and CD11b⁺CD11c⁺ cells (n=7 mice/group).

(I) Schematic of splenocyte *ex vivo* recall response and quantification of CD4⁺ T cells and their positivity for Ki67, IFN γ , and IL-17A at increasing doses of MOG₃₅₋₅₅ re-stimulation (n=3 mice/group).

(J) Measurement of cytokines in the media of *ex vivo* splenocytes re-stimulated with 20µg MOG₃₅₋₅₅ (n=3 mice/group).

Mean±s.e.m.

WT, wildtype; MOG, myelin oligodendrocyte glycoprotein; dpi, days post injection; DC, dendritic cell; MFI, mean fluorescence intensity.

Supplemental Figure 2 – related to Figure 1.



Figure S3. Astrocytes and CD4⁺ CD44^{hi} effector T_H cells produce IL-3 in the CNS.

(A) *II3* transcript expression, presented as Δ Ct, in SC tissue homogenate and CD44^{hi}CD4⁺ T cells and astrocytes sorted from the SC of WT mice at peak disease (n=4 mice).

(B) IL-3 and GFAP immunofluorescent staining of $I/3^{-/-}$ EAE mice.

(C) lgg control immunofluorescent staining.

(D) Representative image and per cell quantification of IL-3⁺GFAP⁺ astrocytes in plaques and adjacent tissue in the SC of WT EAE mice. Scale bars represent 250 µm (8 regions from 3 mice/group).

(E) Strategy of tamoxifen injection and EAE induction in *II3^{GFPfl/fl}* and *II3^{GFPfl/fl}Aldh1l1cre^{Ert2}* mice.

(F) Astrocyte IL-3 in *II3^{GFP1/fl}* and *II3^{GFP1/fl}Aldh1I1cre^{Ert2}* mice injected with tamoxifen.

(G) Measurement of *II3* mRNA expression in CD44^{hi}CD4⁺ T cells sorted from the SC of *II3*^{GFPfl/fl} and *II3*^{GFPfl/fl} Aldh111cre^{Ert2} at peak disease (n=6 mice/group; Mann–Whitney *U*-test).

(H) IL-3 protein abundance in SC homogenates and plasma of diseased *II3^{GFP1/II}* and *II3^{GFP1/II}* Aldh111cre^{Ert2} mice (n=9-10 mice/group; Mann–Whitney *U*-test and two-way ANOVA).

(I) Mean clinical disease scores of male and female $II3^{GFPfl/fl}$ and $II3^{GFPfl/fl}$ Aldh111cre^{ERT2} mice exposed to EAE (n=9 $II3^{GFPfl/fl}$ males, 4 $II3^{GFPfl/fl}$ Aldh111cre^{ERT2} males, 13 $II3^{GFPfl/fl}$ females, 7 Aldh111cre^{ERT2} females; two-way ANOVA).

(J) Characterization and backgating of IL-3-producing T cells in the spinal cord during EAE.

(K) Association of IL-3-producing T cell abundance and disease severity (n=3-5 mice/group).

(L) Measurement of *II3* mRNA expression in CD44^{hi}CD4⁺ T cells and astrocytes sorted from the SC of *II3*^{GFPfl/fl} and II3^{GFPft/fl}CD4cre mice at peak disease (n=4-5 mice/group; Mann–Whitney U-tests).

(M) Flow cytometry analysis of T cell IL-3 deletion in II3 GFP1/11 and CD4crell3 GFP1/11 mice at peak disease (n=4-5 mice/group; one-way ANOVA).

(N) IL-3 protein abundance in SC homogenates and plasma of diseased II3^{GFPfl/fl} and II3^{GFPfl/fl}Cd4cre mice (n=6-

 12 mice/group; Mann–Whitney *U*-test and two-way ANOVA).
 (O) Mean clinical disease scores of male and female *II3^{GFPfI/fl}* and *II3^{GFPfI/fl}Cd4cre* mice exposed to EAE (n= 12 *II3^{GFPfI/fl}Cd4cre* males, 8 *II3^{GFPfI/fl}Cd4cre* males, 13 *II3^{GFPfI/fl}* females, 9 *II3^{GFPfI/fl}Cd4cre* females; two-way ANOVA). Mean±s.e.m., *p<0.05, **p<0.01, ***p<0.001.

ΔCt, delta CT; GFAP, glial fibrillary acidic protein; DAPI, 4',6-diamidino-2-phenylindole; SC, spinal cord. Supplemental Figure 3 – related to Figures 2 and 3



Figure S4. IL-3Ra⁺ myeloid cells and the generation of *II3ra^{-/-}* mice.

(A) Analysis of IL-3Ra⁺ microglia in the SC of healthy (naïve) and EAE WT mice (n=4-8 mice/group; Mann– Whitney *U*-test).

(B) Analysis of IL-3Ro⁺ cells and disease score (n=2-3 mice/group; Pearson correlation).

(C) Schematic of the endogenous *II3ra* locus and nuclease-based dual guide RNA (gRNA) editing strategy to generate *II3ra* knockout mice.

(D) IL-3Ra production by bone marrow monocytes isolated from WT or *II3ra*^{-/-} mice quantified by flow cytometry.

(E) qPCR analysis of *II3ra* mRNA expression in BM monocytes isolated from WT or *II3ra*^{-/-} mice (n=3 mice/group).

(F) Analysis of gene expression for APC-related genes in monocytes stimulated for 24 hr in the presence of rIL-3 (n=3 mice/group; one-way ANOVA).

(G) MFI of MHCII, CD86, CD80, CD11c, and Ly6C^{hi} in monocytes cultures left untreated or stimulated with rIL-3 (n=4-5 mice; Mann–Whitney *U*-tests). (H) Frequency of MHCII⁺CD11c⁺ cells among CD45⁺CD11b⁺ cells in WT and *II3ra^{-/-}* monocyte culture after stimulation with rIL-3 (n=5-8 mice/group; one-way ANOVA).

(I) Co-culture of polarized T cell subsets with WT or *ll3ra*^{-/-} monocytes and measurement of CCL2 in the media by ELISA (n=3 mice/group; one-way ANOVA).

(J) Enumeration of B cells in the brain of mice 24 hours after stereotactic injection of 0, 1, 10, or 100 ng of rIL-3 (n=3-8 mice/group).

Mean±s.e.m., *p<0.05, **p<0.01, ***p<0.001.

SC, spinal cord; WT, wildtype; EAE, experimental autoimmune encephalomyelitis; BM, bone marrow; rIL-3, recombinant interleukin-3; MFI, Mean fluorescence intensity.

Supplemental Figure 4 – related to Figure 4.



Figure S5. IL-3:IL-3RA signaling in human MS.

(A) Proportion of each CNS cell type across tissue regions and disease states.

(B) Binary strategy to identify IL3RA expressing cells.

(C) Umap visualization of *IL3RA* expressing cells in all CNS cells across all regions and conditions.

(D) Umap showing expression of *IL3RA* among myeloid cells in each tissue and condition.

(E) Quantification of IL3RA⁺ cells among each CNS population across all regions and disease status.

(F) IL3RA expression among each CNS population across all regions and disease status.

(G) Analysis of human scRNAseq data of CSF leukocytes from Schafflick et al. 2020 showing expression of *IL3RA* amongst all CSF leukocyte populations in control subjects and *IL3RA* expression in pDCs of control and MS subjects (Mann–Whitney *U*-test).

(H) Pathway analysis of the 5 plaque myeloid cell clusters.

(I) Schematic summarizing the role of astrocyte- and T cell-derived IL-3 promoting monocyte differentiation into APCs and the generation of migratory, motility, and chemotactic cues by resident and peripherally-derived myeloid cells that further recruit monocytes and CD4⁺ T cells to the CNS.

n=6 unaffected controls and 6 MS patients

Mean±s.e.m. ***p<0.001.

CNS, central nervous system; CSF, cerebrospinal fluid. Supplemental Figure 5 – related to Figure 5.