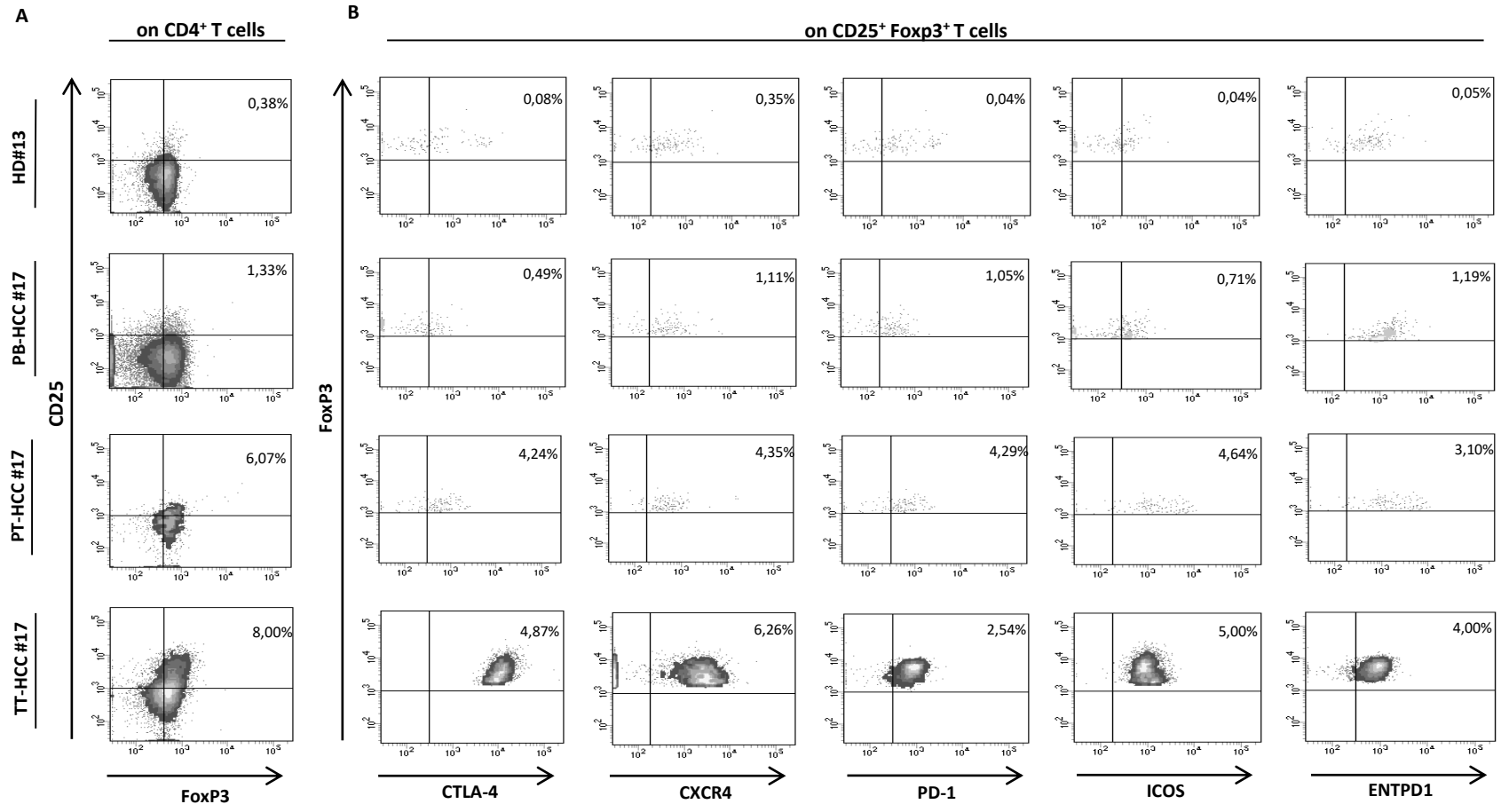
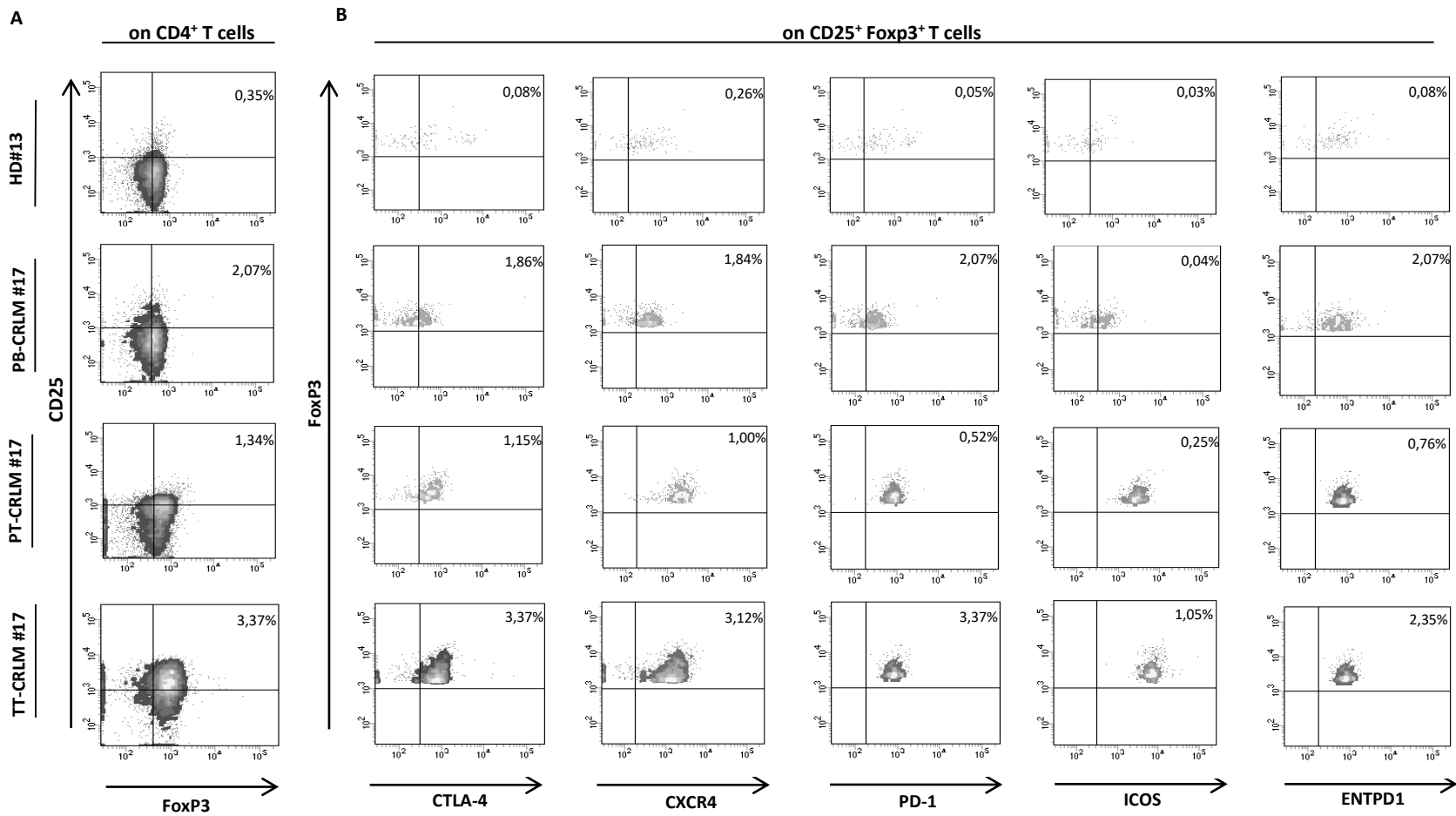


**Supplementary Figure 1. Representative plot of Treg cells from PB-HD and PB-HCC, PT-HCC and TT-HCC patient**

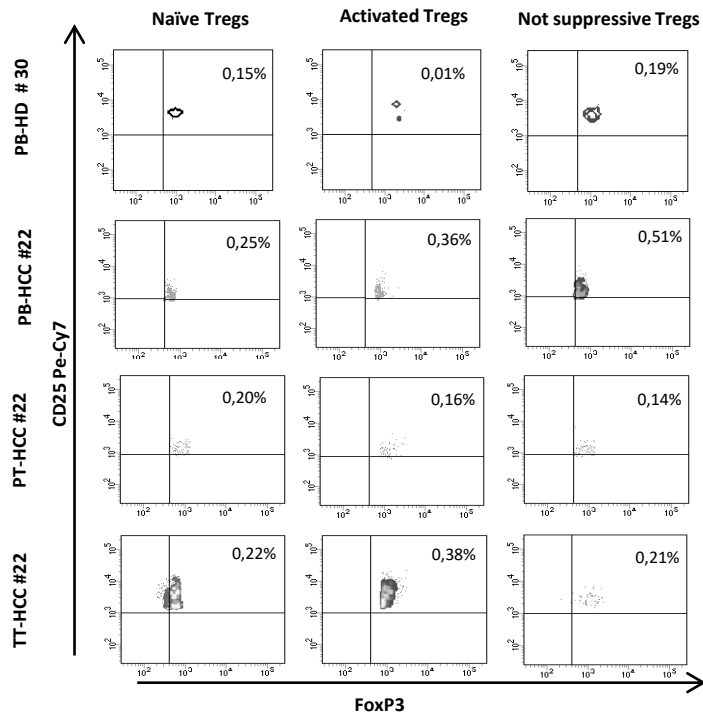


**Supplementary Figure 2. Representative plot of Treg cells from PB-HD and PB-CRLM, PT-CRLM and TT-CRLM patient**

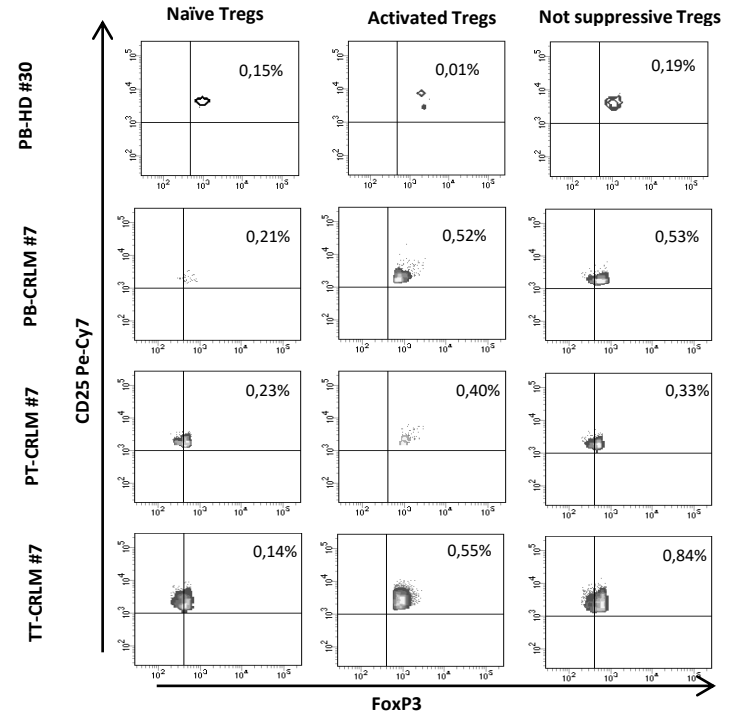


**Supplementary Figure 3. Representative plot of Naïve, Activated and Not suppressive Treg cells from HCC and CRLM**

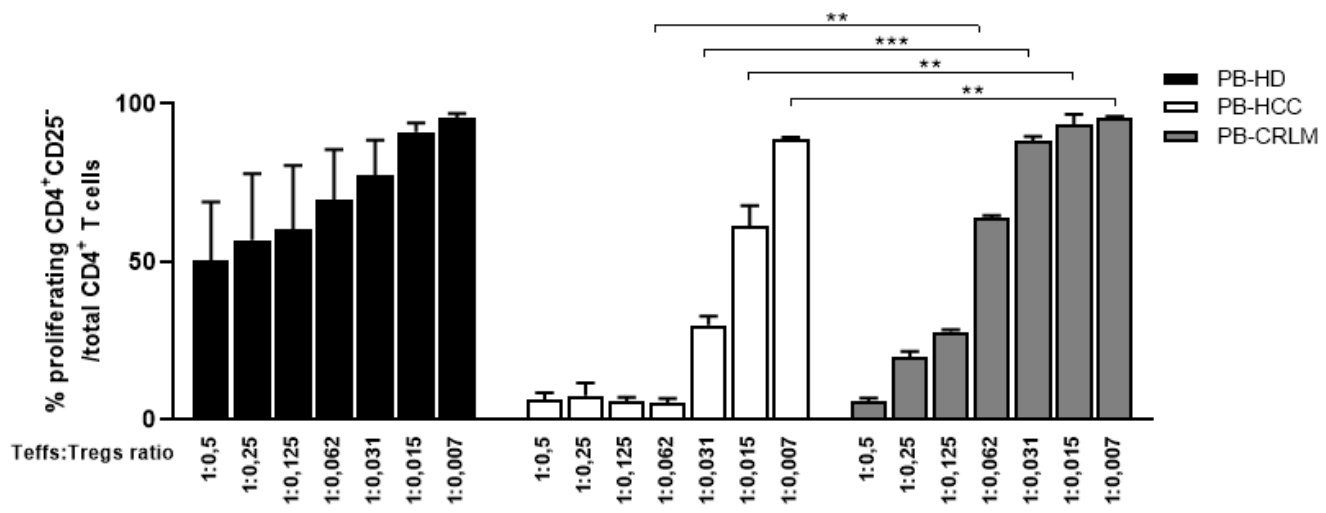
**A**



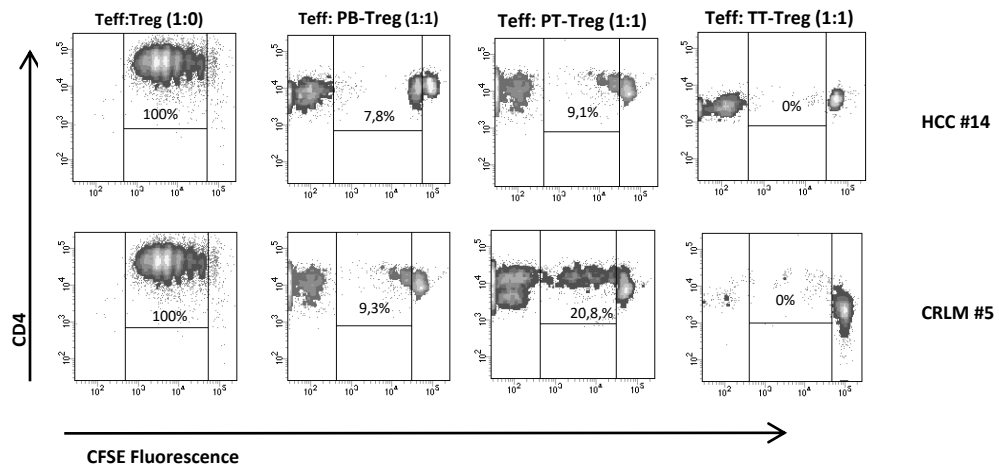
**B**



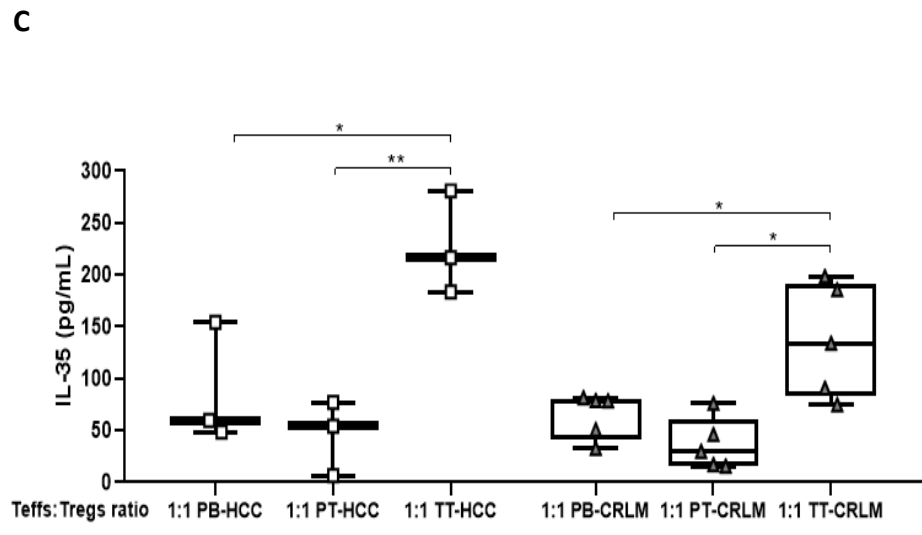
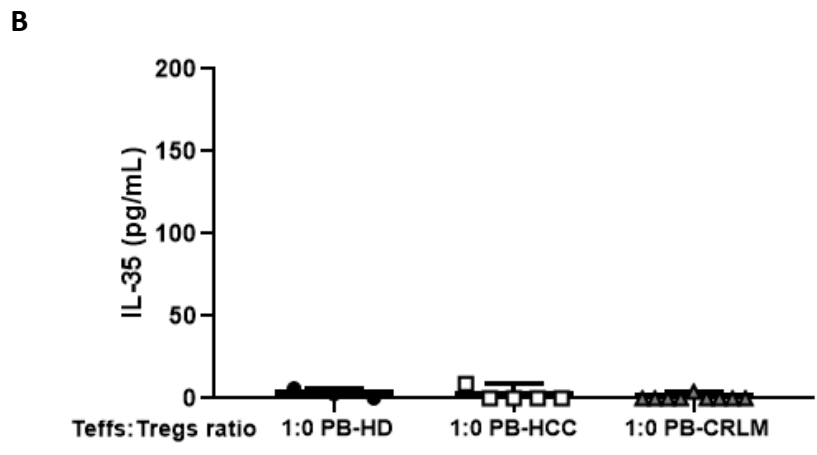
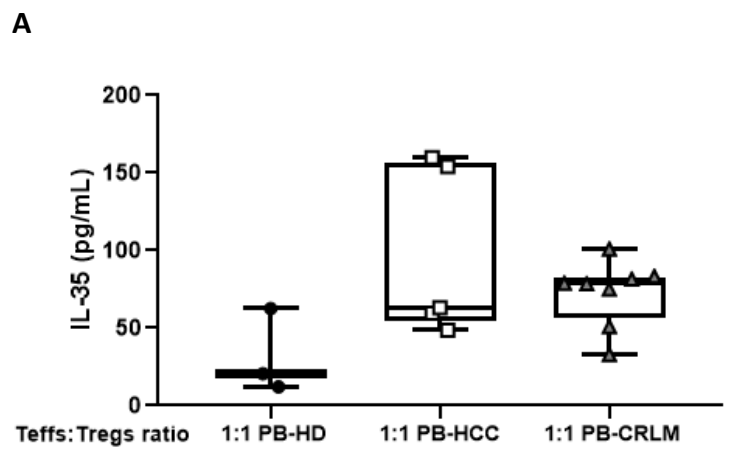
Supplementary Figure 4. Dose escalation functional assay of Tregs suppressive activity in PB of HD subjects, HCC and CRLM patients.



**Supplementary Figure 5. Representative functional analysis of Tregs suppressive activity in PB/PT/TT of HCC and CRLM patients.**

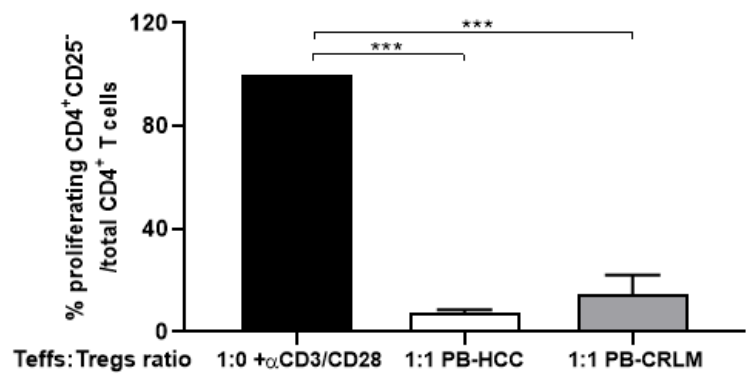


**Supplementary Figure 6. IL-35 secretion by Tregs and Teffs of PB-HD, -HCC and -CRLM**

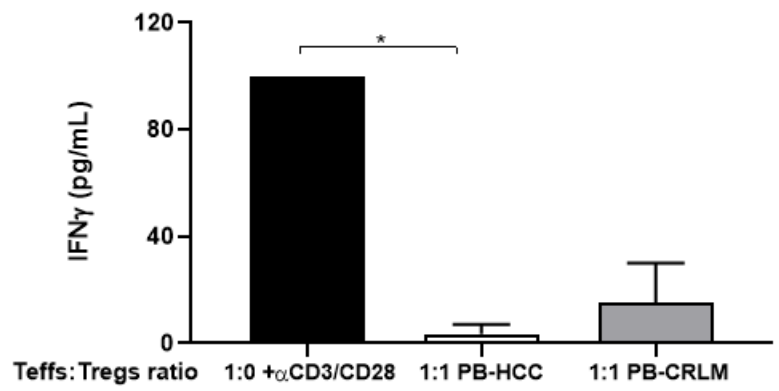


Supplementary Figure 7. Proliferation and IFN- $\gamma$  secretion in Tregs of HCC and CRLM

A

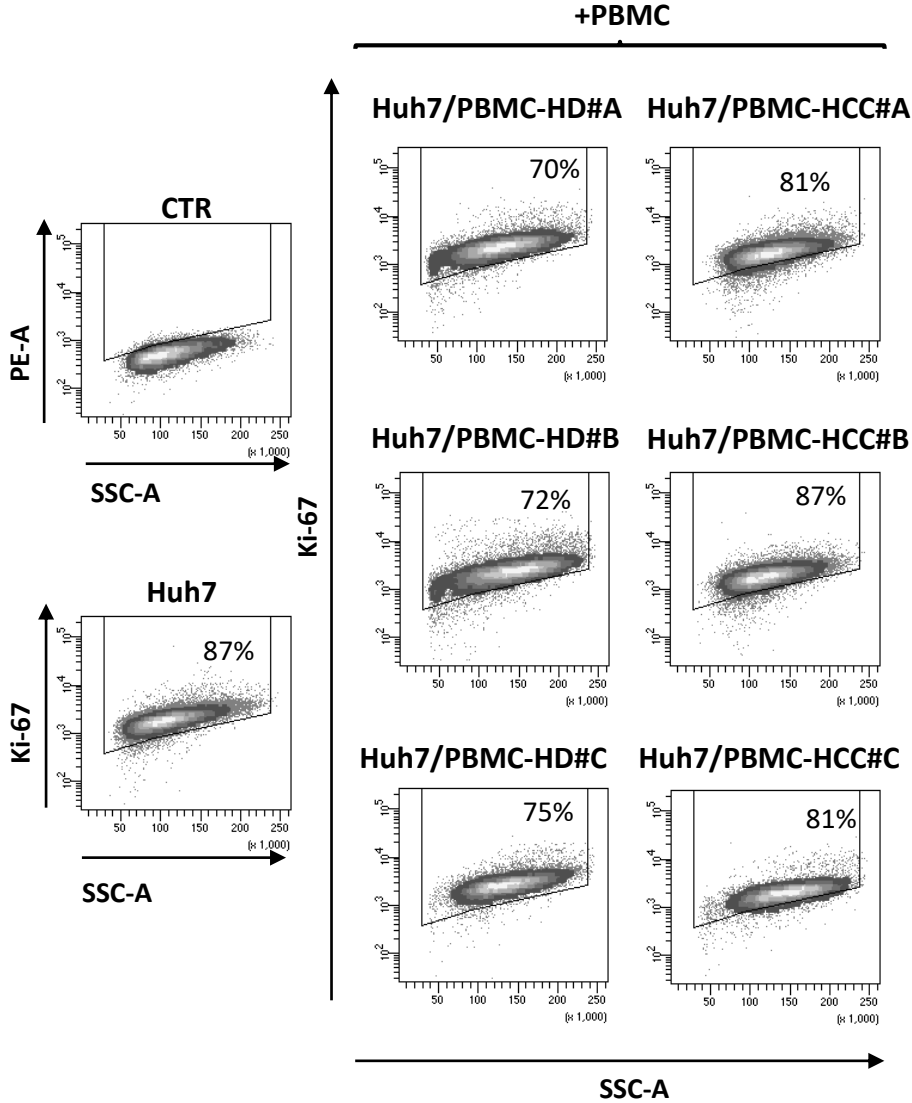


B

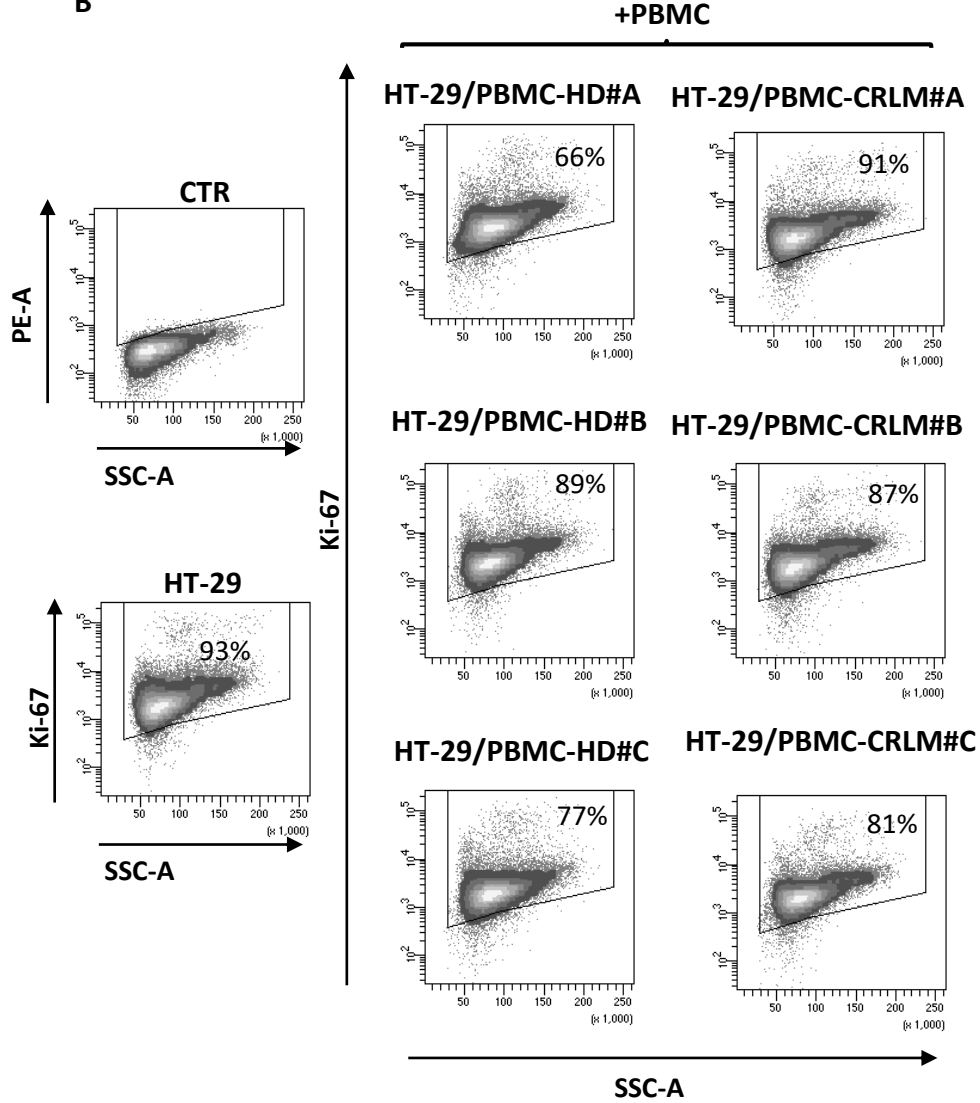


**Supplementary Figure 8. Ki67 frequency of positive cells in coculture of tumor cells and PBMC from HCC and CRLM patients**

**A**



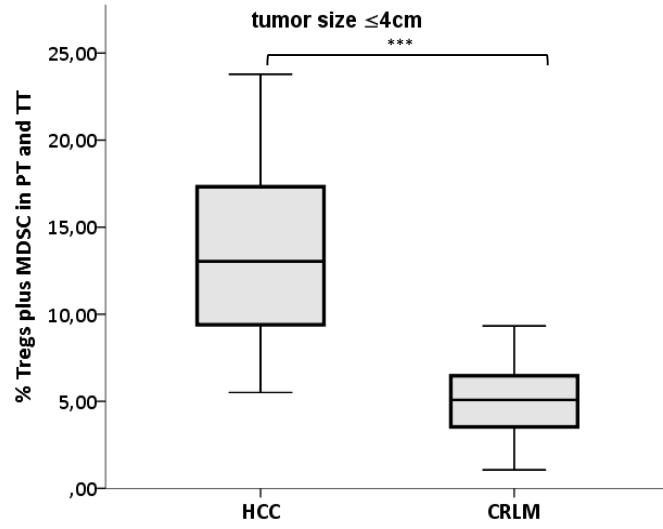
**B**



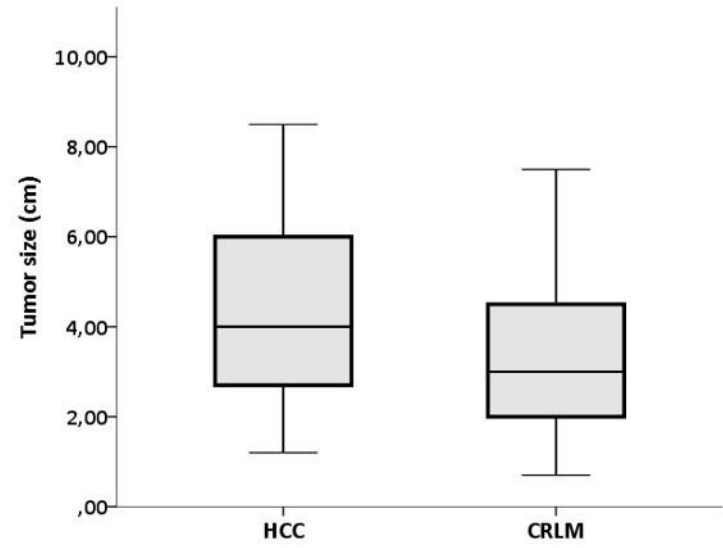


# Supplementary Figure 9. Higher percentage of PT-TT-Tregs and MDSCs in HCC tumors

**A**

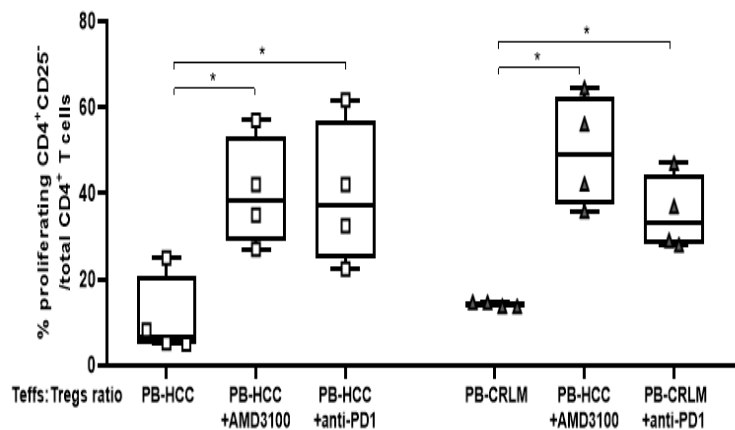


**B**

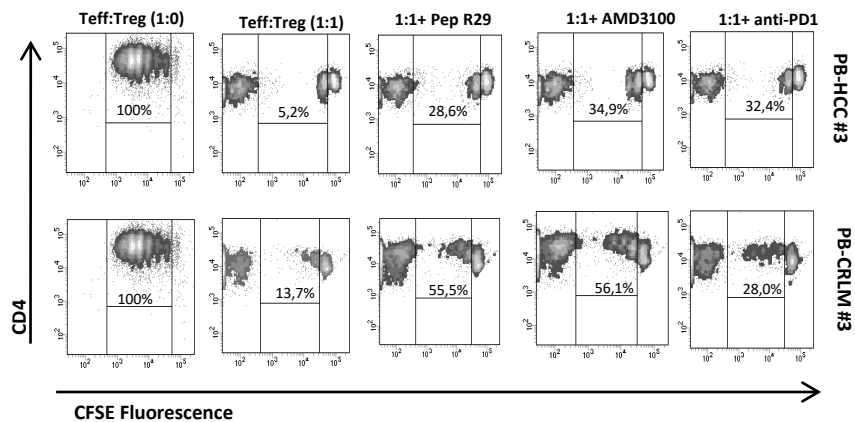


**Supplementary Figure 10. Effect of CXCR4 inhibition in PB-HCC/CRLM derived Tregs**

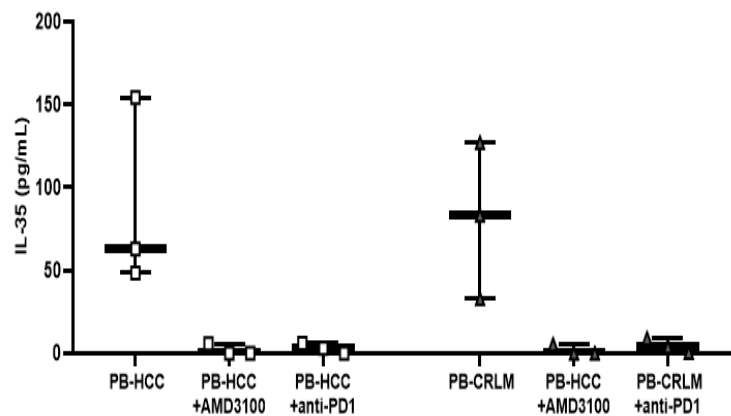
**A**



**B**



**C**



**D**

