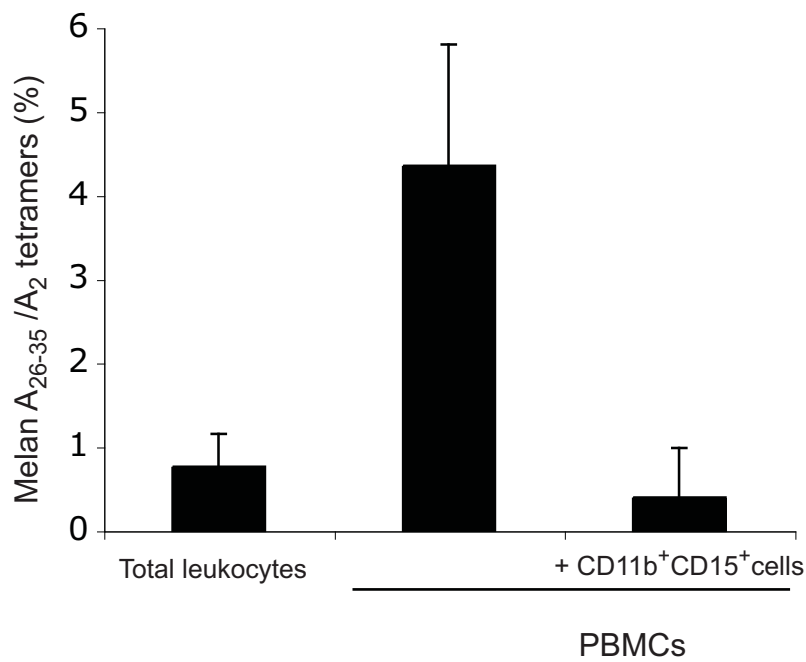
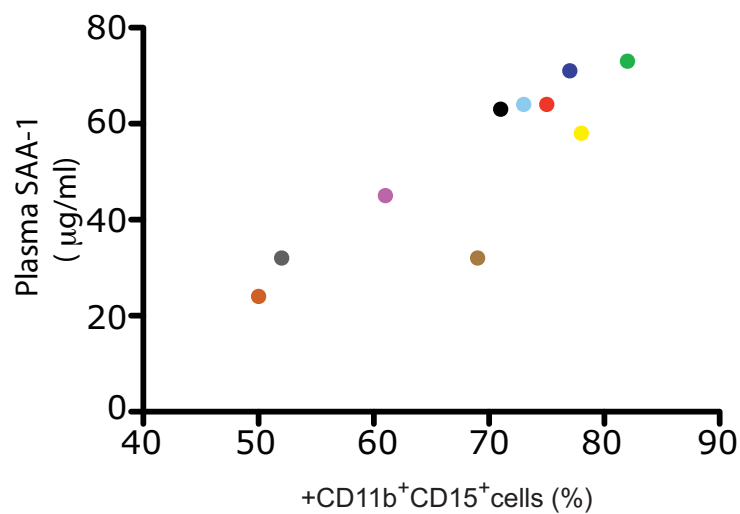


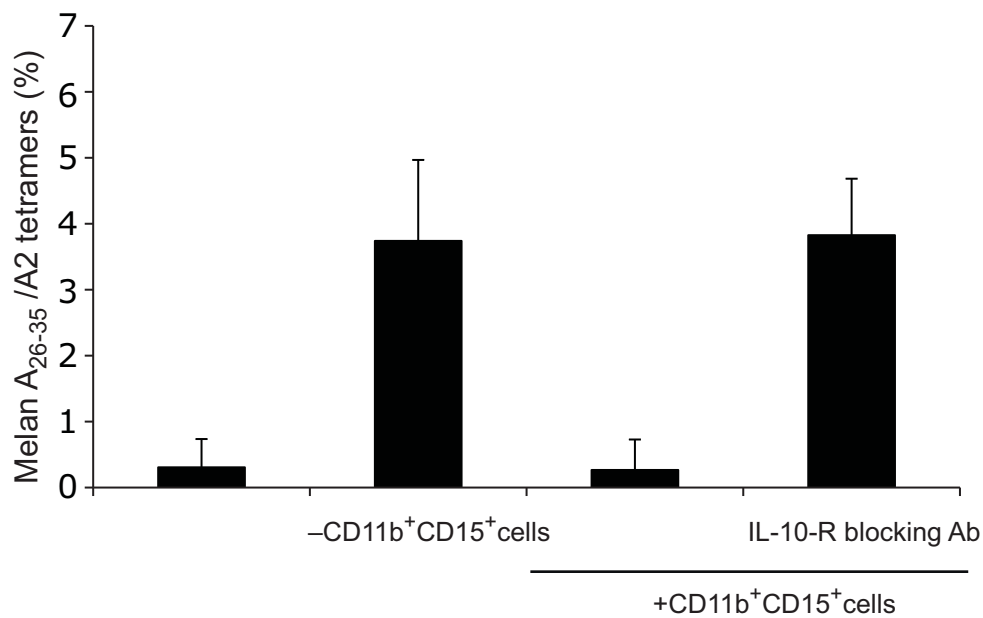
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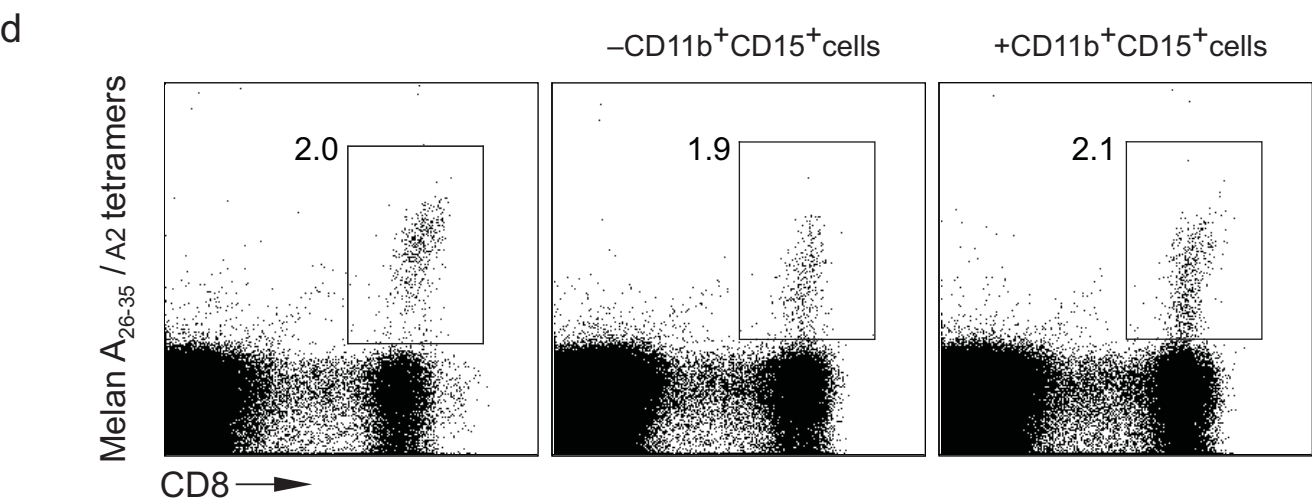
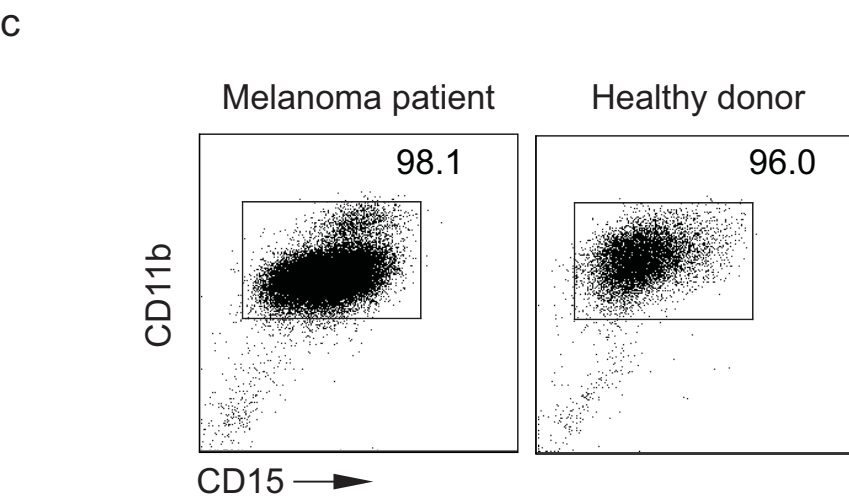
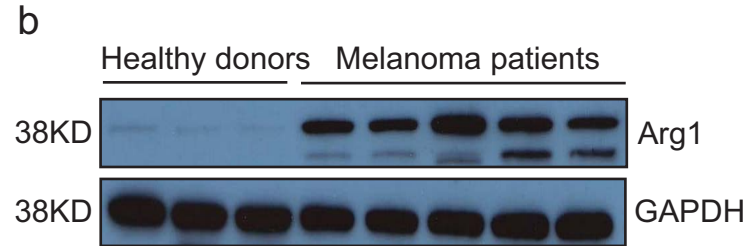
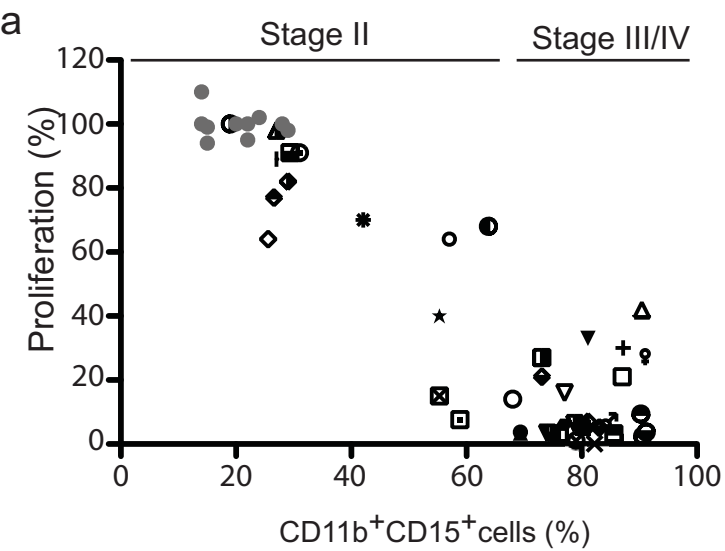


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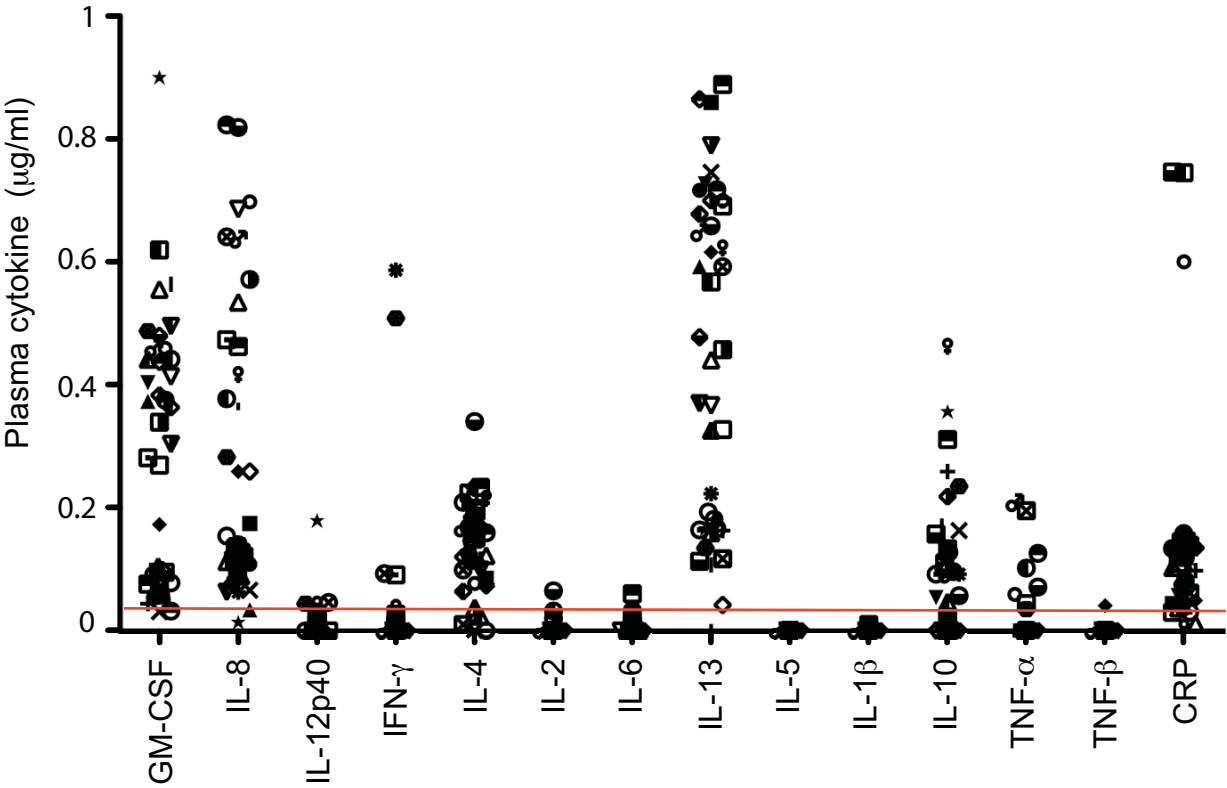
Supplementary Figure 1. Cumulative melan- A_{26-35} CD8⁺ T cell priming results obtained in the presence or absence of CD11b⁺CD15⁺ cells.

(a) Cumulative data showing expansion of melan- A_{26-35} specific CD8⁺ T cells from PBMC or total leukocytes of seven HLA-A2⁺ melanoma patients cultured for 10 days with autologous DC pulsed with melan- A_{26-35} peptide (error bars, SD). (b) Correlation between frequency of CD11b⁺CD15⁺ cells and SAA-1 plasma levels in samples from the same melanoma patients characterized for Melan- A_{26-35} specific CD8⁺ T cell priming in (a). Each patient is represented by a unique color-coded symbol. (c) Cumulative data showing expansion of melan- A_{26-35} specific CD8⁺ T cells from total leukocytes of three HLA-A2⁺ melanoma patients (left). The same samples were depleted of CD11b⁺CD15⁺ cells and incubated with 10% autologous DC pulsed with melan- A_{26-35} peptide –CD11b⁺CD15⁺ cells, middle-left). Frequency of melan- A_{26-35} specific CD8⁺ T cells after adding 10% purified CD11b⁺CD15⁺ cells to CD11b⁺CD15⁺ depleted total leukocytes (+CD11b⁺CD15⁺ cells) with (right) or without (middle-right) of blocking anti-IL10R antibody. Patients correspond to those in (b) shown in gray, brown and magenta (error bars, SD).



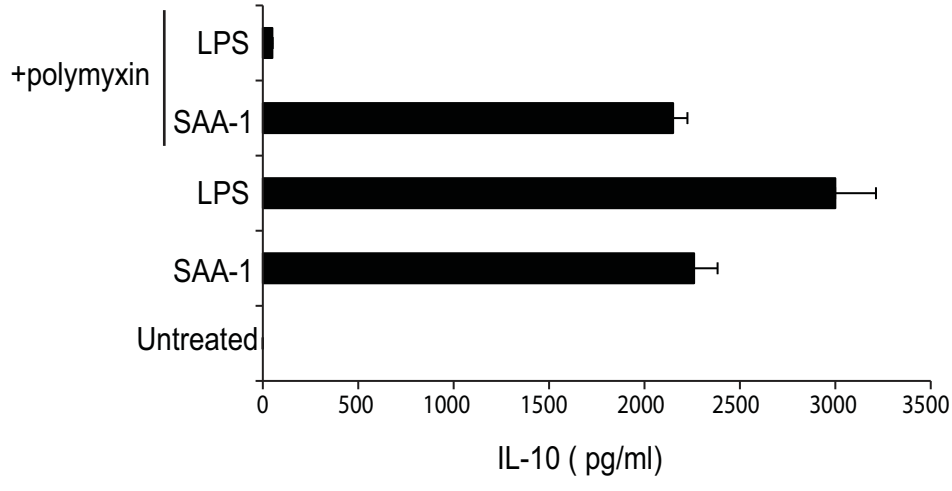
Supplementary Figure 2. High frequency of CD11b⁺CD15⁺ cells in melanoma patients correlate with their suppressive activity.

(a) Correlation between frequency of CD11b⁺CD15⁺ cells and their ability to suppress proliferation of alloreactive T cells (MLR) from 40 additional melanoma patients and 10 healthy volunteers (gray closed symbols). Each patient is represented by a unique symbol corresponding to those in **Fig. 2a** and **Supplementary Fig. 3**. Stage of disease is indicated. (b) Western blot with anti-arginase-1 antibody of lysates of CD11b⁺ CD15⁺ cells purified from healthy donors and melanoma patients. A loading control with GAPDH is shown. Patients analyzed correspond to patients identifiable in panel (a) by the unique symbols ⊗, △, ▲, ▣, ○. (c) Percentage CD11b⁺CD15⁺ cells shown by staining with CD11b and CD15 antibodies of human neutrophils purified by magnetic sorting. (d) Percentage melan-A₂₆₋₃₅ specific CD8⁺ T cells after culturing total leukocytes from one healthy donor either depleted (middle) or not depleted (left) of CD11b⁺CD15⁺ cells and incubated with autologous DC pulsed with the melan-A₂₆₋₃₅ peptide. Addition of purified CD11b⁺CD15⁺ cells to CD11b⁺CD15⁺ depleted total leukocytes does not reduce the expansion of melan-A₂₆₋₃₅ specific CD8⁺ T cells (right).



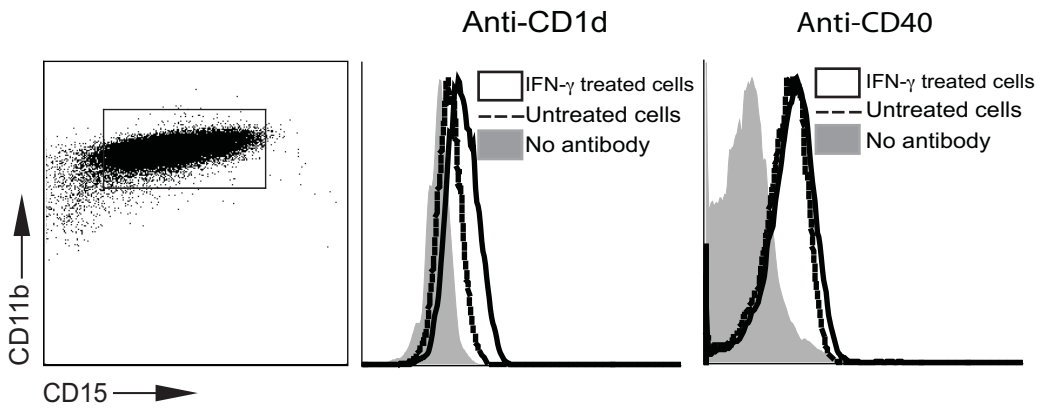
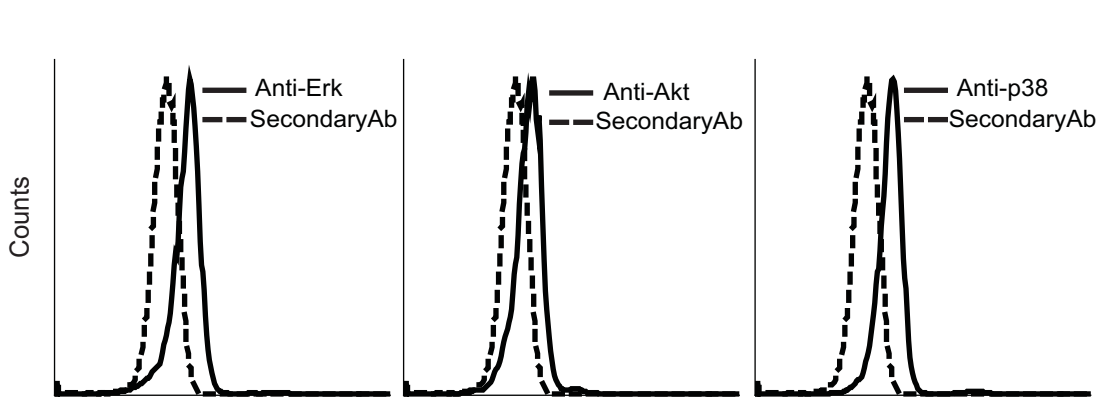
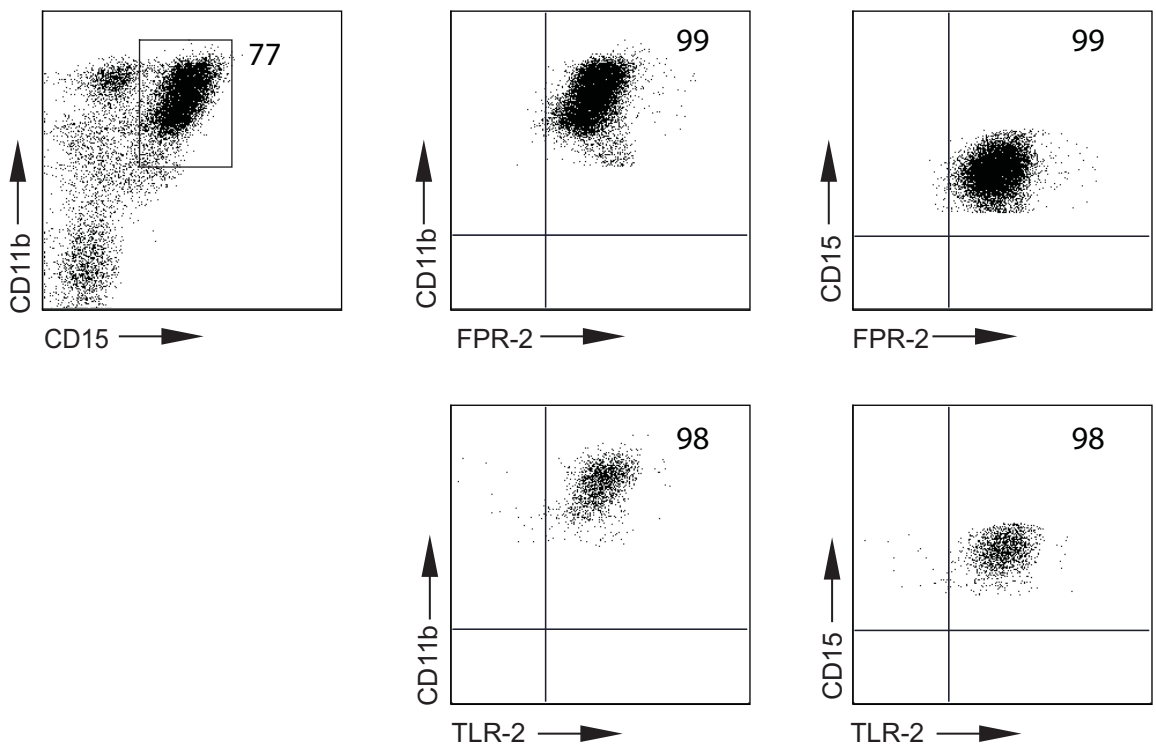
Supplementary Figure 3. Concentration of several cytokines in the plasma of melanoma patients.

Plasma samples from 40 melanoma patients analyzed by MLR (**Supplementary Fig. 2a** and **Fig. 2a**) were tested by ELISA for a range of cytokines (red line, cytokine levels in plasma from healthy donors). Each patient is represented by a unique symbol.



Supplementary Figure 4. Incubation of SAA-1 with polymyxin does not reduce the IL-10 inducing effect of SAA-1.

IL-10 secretion from CD11b⁺CD15⁺ cells from healthy donors incubated with SAA-1 (250 ng/ml) with or without the endotoxin removing compound polymyxin (10 µg/ml). As a control, CD11b⁺CD15⁺ cells were incubated with lipopolysaccharide (1 µg/ml) mixed with polymyxin. After 24 h, supernatants were collected and IL-10 secretion was measured by ELISA.

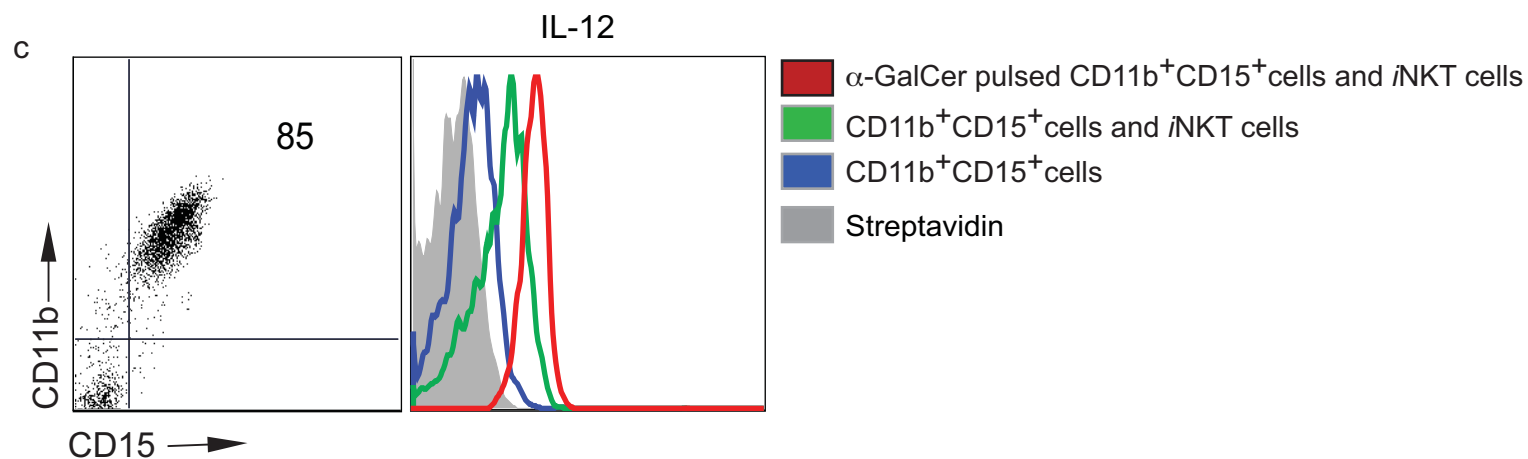
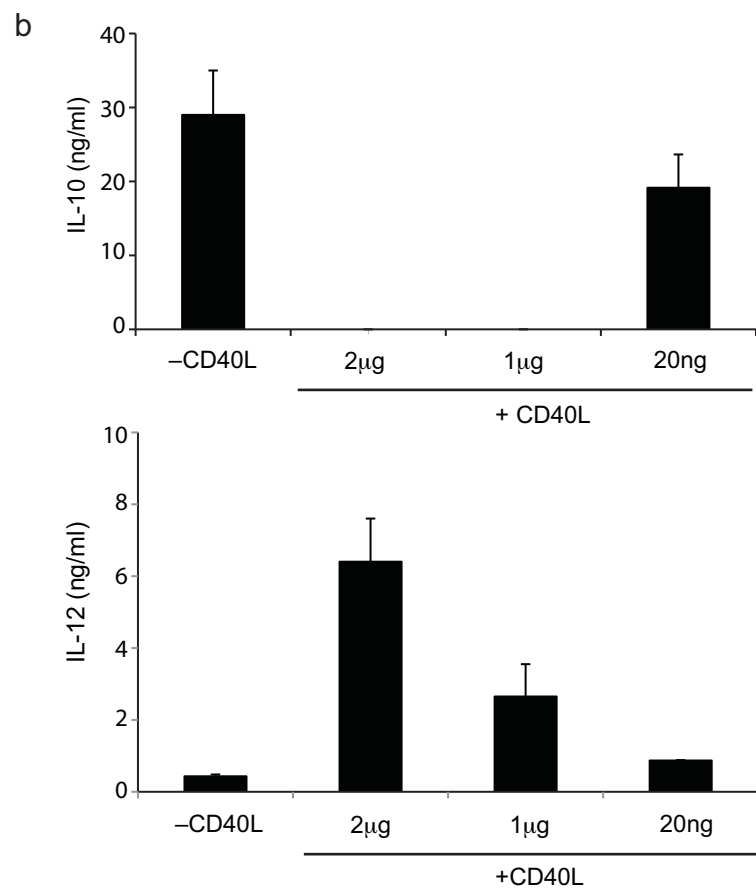
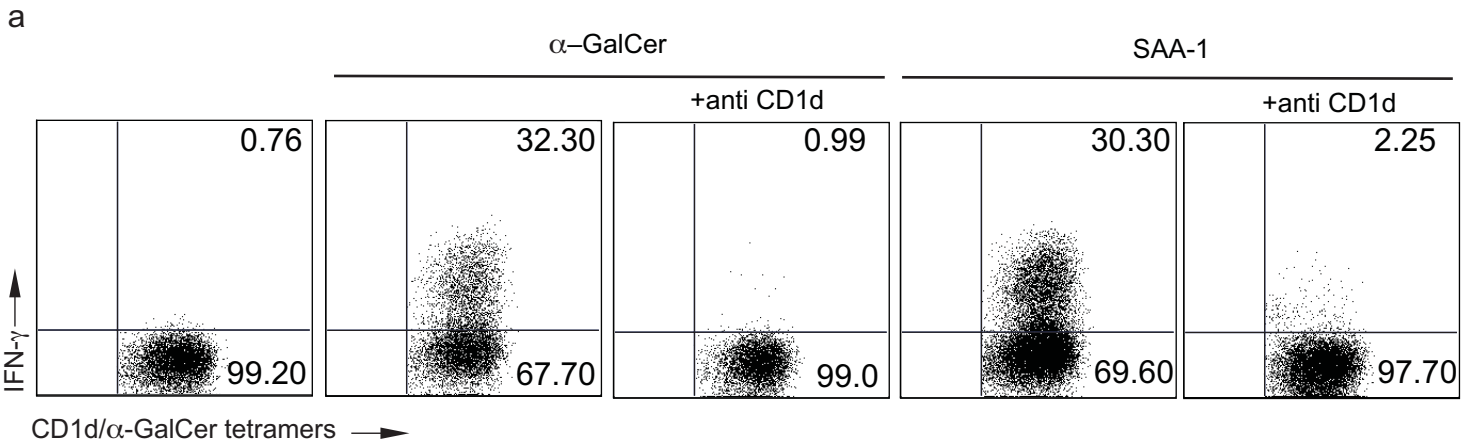


Supplementary Figure 5. TLR-2 and FPR-2 expression on CD11b⁺CD15⁺ cells. **(a)**

Total blood from melanoma patients was stained either with CD11b/CD15 and with anti-FPR-2 (top) or with anti-TLR-2 antibodies (bottom). **(b)** Intracellular staining of

CD11b⁺CD15⁺ cells purified from melanoma patients with Erk, p38 and Akt specific antibodies. **(c)** CD11b⁺CD15⁺ cells purified from one melanoma patient stained with

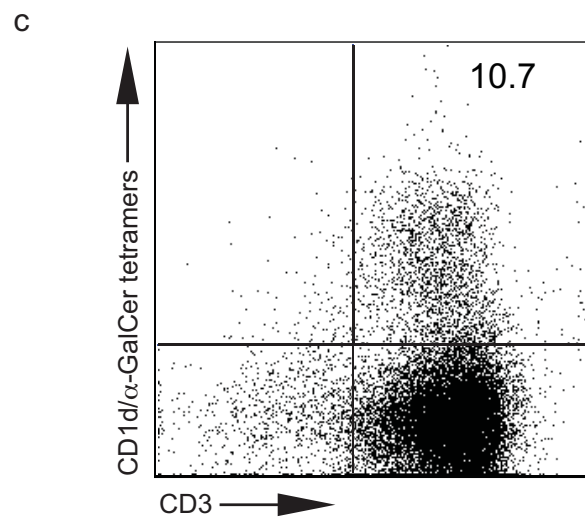
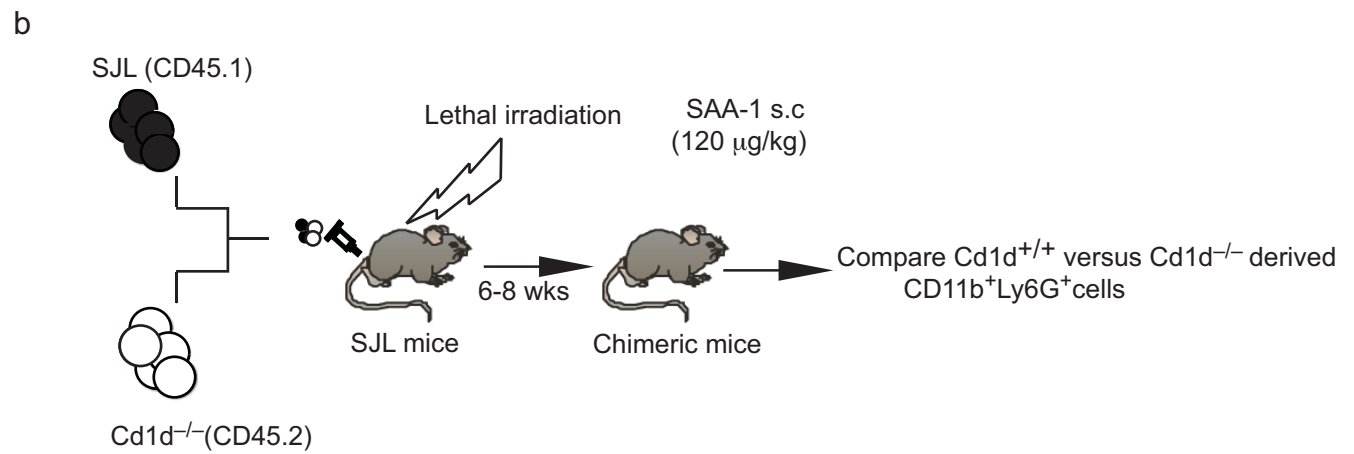
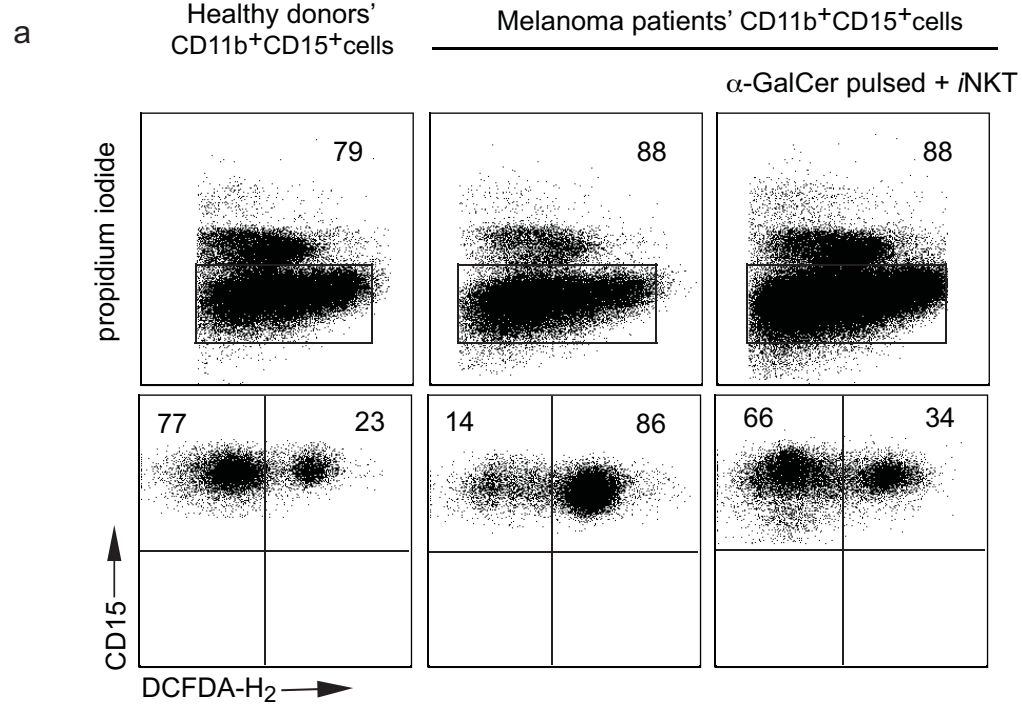
CD11b/CD15 antibodies and either with anti-CD1d, or anti-CD40 antibodies with or without IFN- γ for 24 h.



Supplementary Figure 6

Supplementary Figure 6. Co-incubation of SAA-1 treated CD11b⁺CD15⁺ cells with *i*NKT cells inhibits IL-10 production.

(a) Intracellular staining with anti IFN- γ antibody of CD1d/ α -GalCer tetramer positive human *i*NKT cells co-cultured for 12 h with either α -GalCer or SAA-1 pulsed-CD11b⁺CD15⁺ cells from healthy donors. Incubation with a blocking CD1d antibody abolished *i*NKT cell activation. (b) IL-10 and IL-12 secretion from CD11b⁺CD15⁺ cells purified from melanoma patients and incubated with different concentrations of soluble CD40L for 24 h. Secretion of IL-10 and IL-12 in the absence of CD40 L (-CD40L) is shown. The patient analyzed in this experiment corresponds to the patient identifiable in **Fig. 2a** and **Supplementary Fig. 3** by the unique symbol \blacklozenge . (c) Intracellular staining with anti IL-12 antibody of α -GalCer pulsed or unpulsed CD11b⁺CD15⁺ cells purified from one representative melanoma patient and then incubated with *i*NKT cells at the ratio of 1:10 (*i*NKT : CD11b⁺CD15⁺ cells) for 24 h.



Supplementary Figure 7. (a) Ability of *i*NKT cells to abolish ROS production from neutrophils from melanoma patients. Viability (as determined by propidium iodide staining) of α -GalCer pulsed or unpulsed CD11b⁺CD15⁺ cells (2×10^5) from one representative melanoma patient incubated with *i*NKT cells (10%). A control with CD11b⁺CD15⁺ cells from one healthy donor is shown. ROS production (as defined by the staining with DCFDA-H₂⁵⁹) by α -GalCer pulsed or un-pulsed CD11b⁺CD15⁺ cells and incubated with *i*NKT cells. (b) Experimental design for engineering *Cd1d*^{+/+}/*Cd1d*^{-/-} mixed bone marrow chimeric mice. (c) Selection of *i*NKT cells in *Cd1d*^{+/+}/*Cd1d*^{-/-} mixed bone marrow chimeric mice. Frequency of *i*NKT cells in splenocytes of *Cd1d*^{+/+}/*Cd1d*^{-/-} mixed bone marrow chimeric mice stained with CD1d/ α -GalCer tetramers, anti-CD3 and anti-B220 antibodies. The frequency of CD3⁺/ α -GalCer CD1d tetramer⁺ cells gated on the B220 negative population is shown.