

Fig. S1. ATRA enhances the expression of mucosal-homing molecules on activated human CD8<sup>+</sup> T cells. Naïve human CD8<sup>+</sup> T cells isolated from PBMC of healthy HLA- A\*0201<sup>+</sup> donors were stimulated with anti-CD3/CD28 beads. (A) Representative flow cytometric plots depicting surface expression of CCR9 on CD8<sup>+</sup> T cells on day7. Numbers indicates the percentage of cells in each quadrant. (B, C, D) Mean Fluorescence Intensity (MFI) of (B) CCR9, (C)  $\alpha$ 4 integrin and (D)  $\beta$ 7 integrin on anti- $\alpha$ 4 and anti- $\beta$ 7 dual-positive CD8<sup>+</sup> T cells. Data shown as mean $\pm$ SEM of two experiments with triplicate/sample/experiment. Student *t* test: \*\*  $p < 0.01$ , \*\*\*  $p < 0.001$

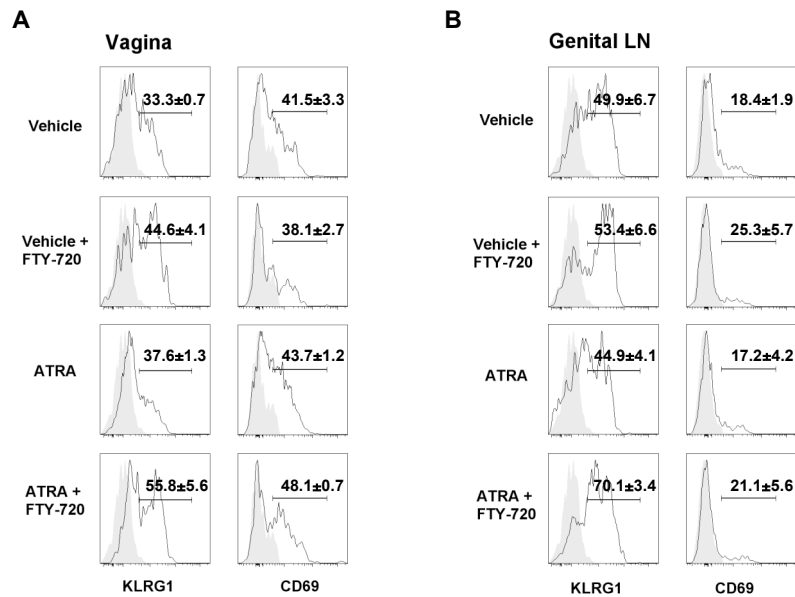


Fig. S2. T cells in vaginal sites from ATRA-treated and control immunized mice were more activated following vaginal viral challenge and FTY-720 treatment. Mice immunized with Ad5gp in the presence of ATRA or vehicle were menstrually synchronized on day35 for 5 days and then infected with VVgp intravaginally followed by FTY-720 treatment for 4 days. The phenotype of gp33/D<sup>b</sup>-tetramer<sup>+</sup>CD8<sup>+</sup> T cells was assessed in (A) vagina and (B) gLN. Solid line represents gp33/D<sup>b</sup>-tetramer<sup>+</sup>CD44<sup>hi</sup>CD8<sup>+</sup> T cells overlaid on naïve CD8<sup>+</sup> T cells shown as grey area. Number indicates the percentage of cells positive for stained surface markers shown as mean±SEM of 3~5 mice/group.