

**Table S1. Combinations of fluorochrome-conjugated antibodies used in panels for this study**

<b>Fluorochrome</b>	<b><i>T-cell differentiation/activation</i></b>	<b><i>T cell function</i></b>	<b><i>Apoptosis</i></b>
<b>FITC</b>	Ki-67	Ki-67	CD45RA
<b>CY7 APC</b>	CD3	CD3	CD3
<b>Alexa 680</b>	CD38	CCR7	CCR7
<b>APC</b>	BrdU	CD95	
<b>Qdot 800</b>	CD8	CD8	CD8
<b>Qdot 655</b>	CD45RA	CD45RA	
<b>Qdot 605</b>	CD28		
<b>Qdot 585</b>	CD4	CD4	CD4
<b>Qdot 545</b>	CD14		
<b>ViViD Pacific Blue</b>	ViViD	ViViD	ViViD
<b>CY7 PE</b>	CD25	TNF- $\alpha$	CD25
<b>Alexa 700-PE</b>	HLA-DR	CD11a	HLA-DR
<b>CY5 PE</b>	CD95	CD28	CD95
<b>Alexa 594</b>	CCR7	IFN- $\gamma$	
<b>PE</b>	CCR5	IL-2	Annexin V

**Figure S1. IL-15 combined with ART expands T<sub>N</sub> cells.** Fold change in CD4<sup>+</sup> and CD8<sup>+</sup> T<sub>N</sub> absolute counts in the peripheral blood during treatment with IL-15, ART or ART+IL-15. The horizontal grey line indicates no change vs. baseline. Data were expressed as in Fig. 1b.

**Figure S2. No effect of treatment on the turnover of memory T-cell subsets.** Fold change in BrdU<sup>+</sup> T<sub>CM</sub> and T<sub>TM</sub> CD4<sup>+</sup> or T<sub>CM</sub> and T<sub>EM</sub> CD8<sup>+</sup> T cells in the peripheral blood after treatment initiation. Data were expressed as in Fig. 1b.

**Figure S3. Baseline plasma IL-15 levels do not influence T-cell responsiveness to IL-15 therapy.** a) Plasma IL-15 levels as measured by ELISA at d-7 and in SIV-uninfected macaques. The median of the distribution is indicated; b) correlation between plasma IL-15 levels at d-7 and SIV load; c) correlation between plasma IL-15 levels at d-7 and fold expansion of CD4<sup>+</sup> (left) and CD8<sup>+</sup> (right) T cells at d46 after treatment with ART+IL-15.

**Figure S4. IL-15 promotes CD8<sup>+</sup> T-cell expansion in peripheral tissues.** a) Percent of total CD8<sup>+</sup> T cells in the lymphocyte gate in the ILN, BAL and jejunum at pre-therapy (d-13) and at d28 after therapy initiation. Each line corresponds to a single animal.

**Figure S5. ART or IL-15 treatments do not shape the quality of CMV-specific CD4<sup>+</sup> T-cell responses.** a) Pie charts and bars representing the quality of the CMV-specific CD4<sup>+</sup> response at baseline and at d46 after ART treatment. Data were expressed as in Fig. 4b. c) As in b) but in the different treatment groups at d46 after treatment initiation. IL-15 group is not shown because only one animal had detectable CMV-specific CD4<sup>+</sup> T cell response.

**Figure S6. Previous IL-15 administration does not shape the quality of the SIV-specific response upon treatment interruption.** Bar graph representing the quality of the SIV-specific (Gag and Env averaged) CD8<sup>+</sup> response at d-7, 7 and 46 in the different treatment groups. Data were expressed as in Fig. 2b. # = P < 0.05 vs. d46; Wilcoxon rank sum test. Colors of the # symbol refers to the group whose mean is statistically significant when compared to the reference group.

**Figure S7. Dynamics in differentiation phenotype of SIV-specific CD4<sup>+</sup> T cells after treatment interruption.** Percentage of SIV-specific (Gag and Env averaged) CD4<sup>+</sup> T cells with T<sub>CM</sub>, T<sub>TM</sub> or T<sub>EM</sub> phenotype out of total memory cells before treatment interruption (d46) and at d59 and 70. Data were expressed as in Fig. 1b. # = P < 0.05 vs. d46; Wilcoxon rank sum test.

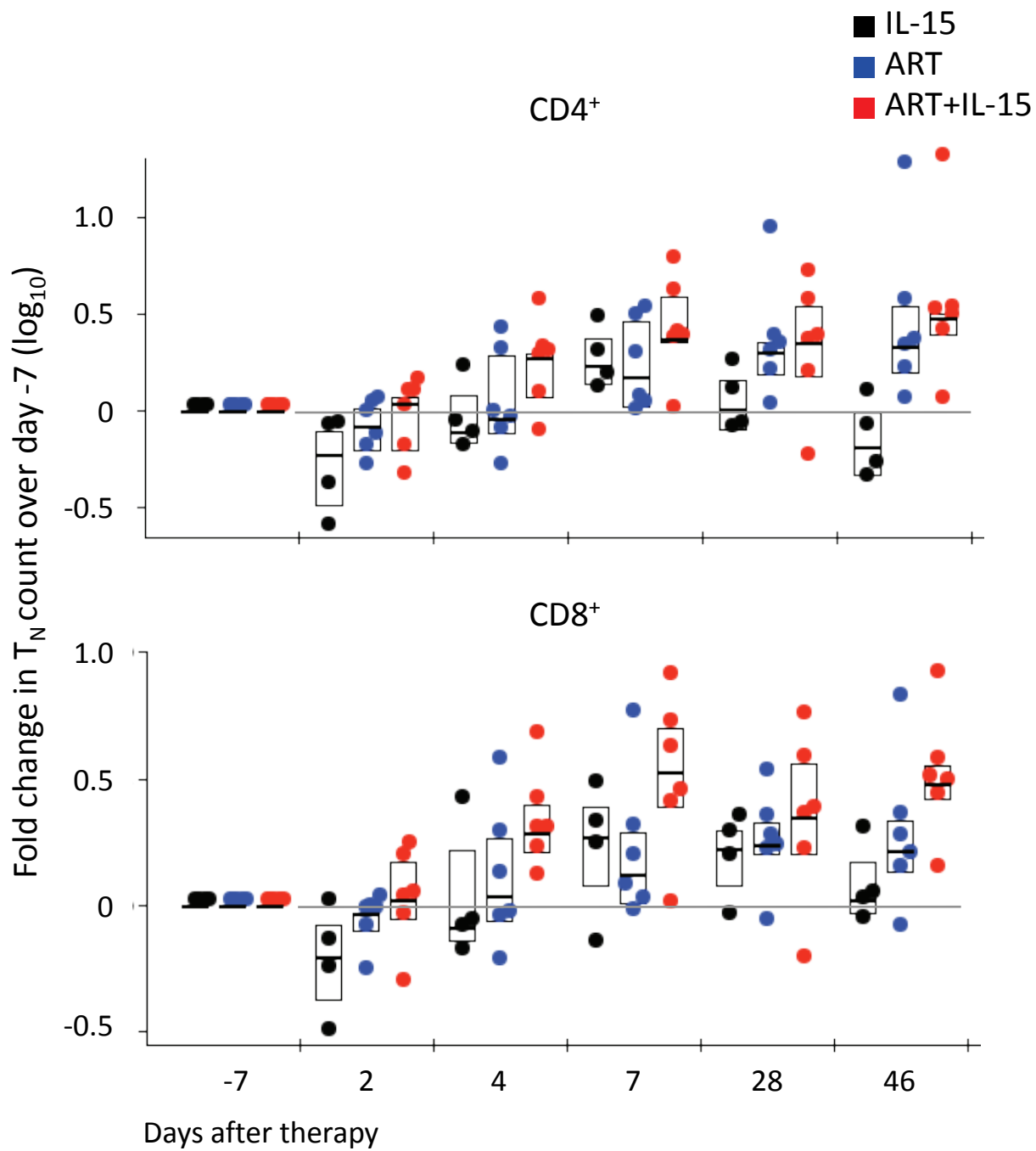


Figure S1

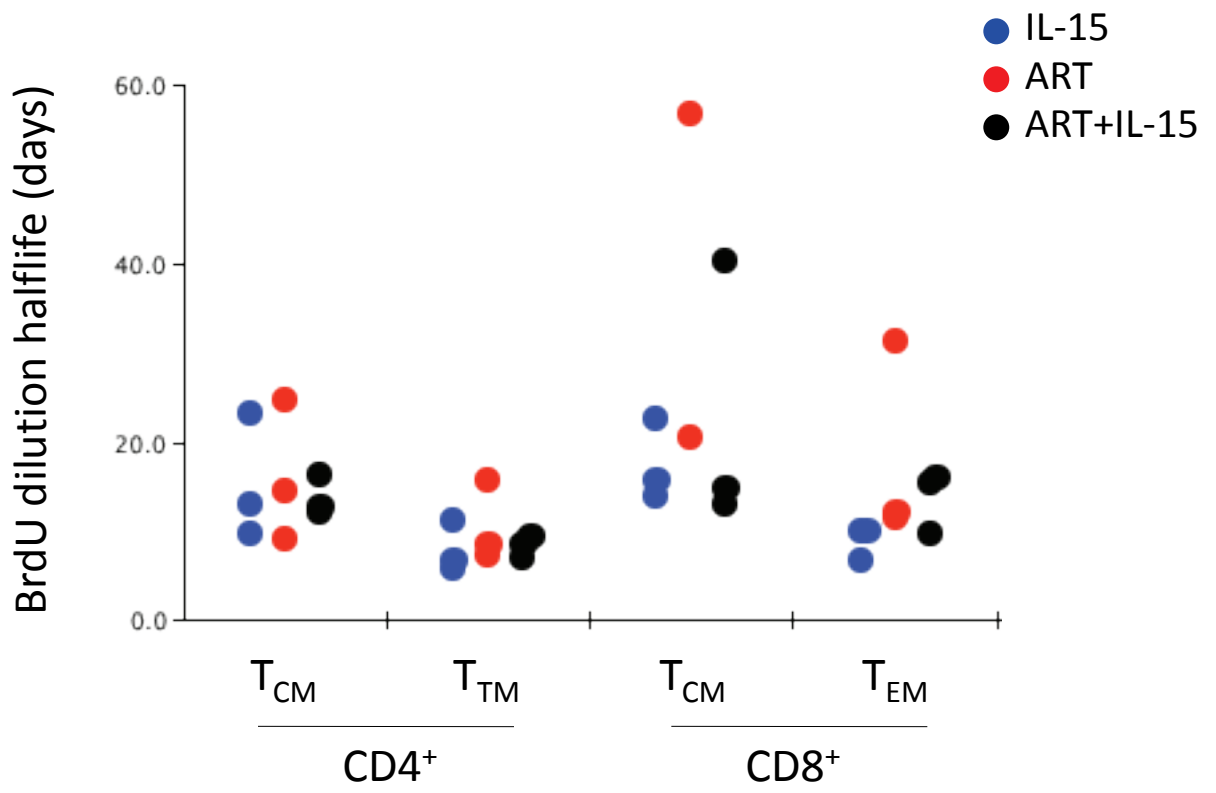


Figure S2

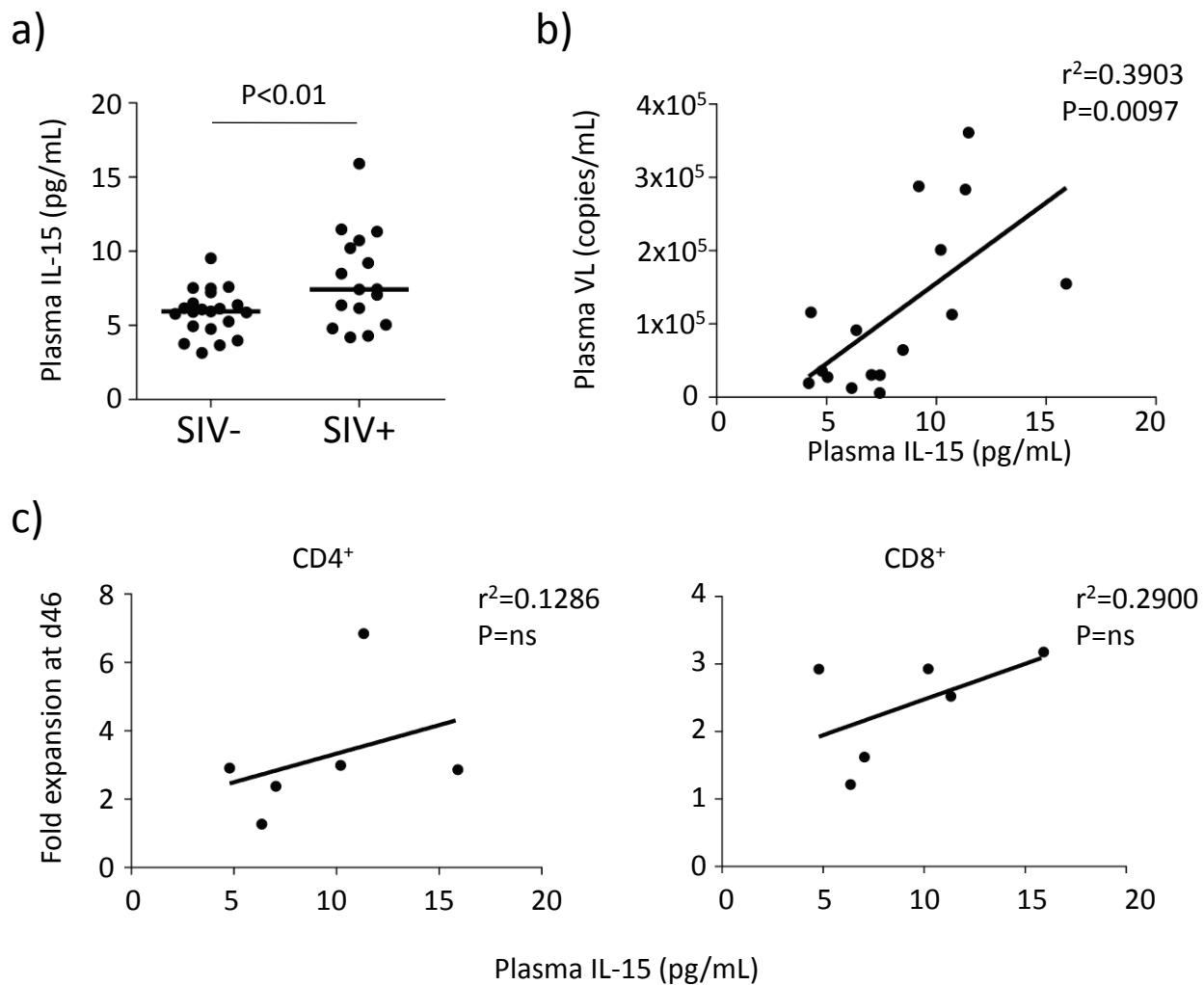


Figure S3

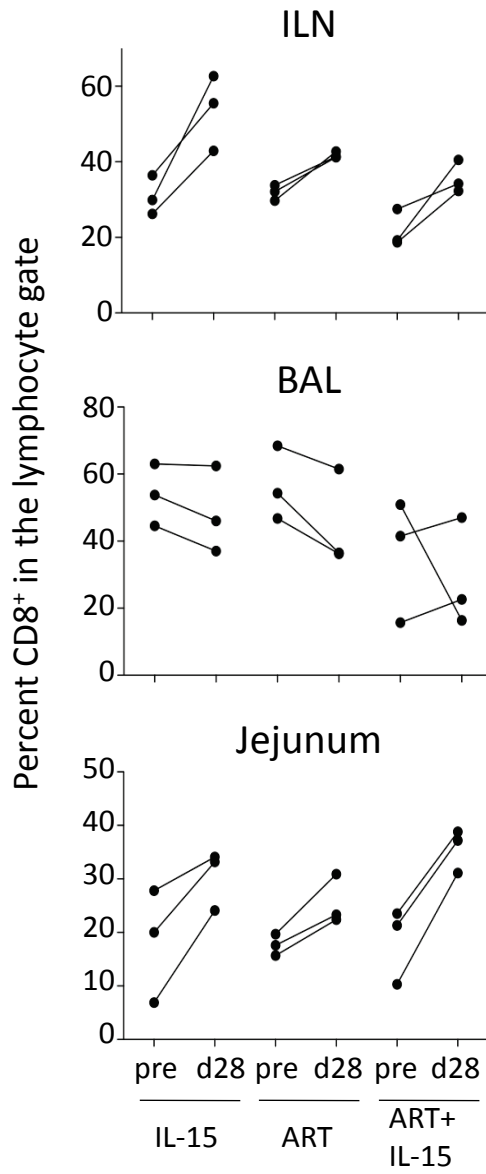


Figure S4

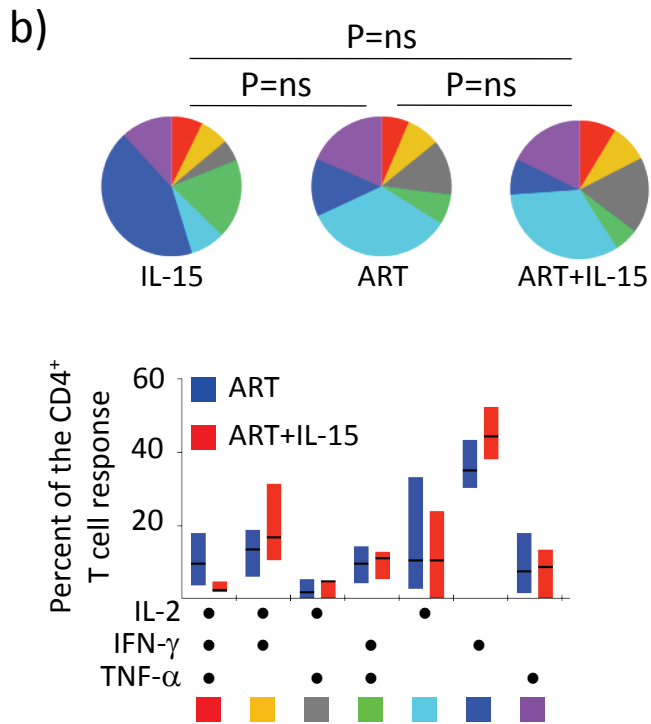
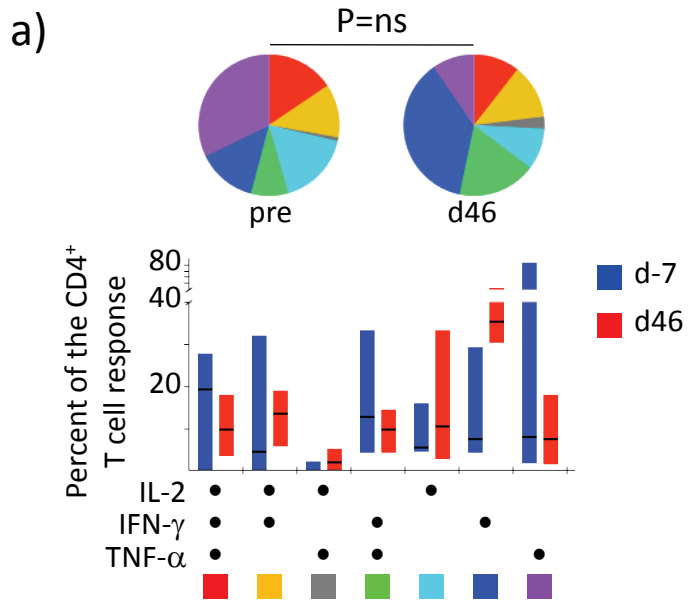


Figure S5



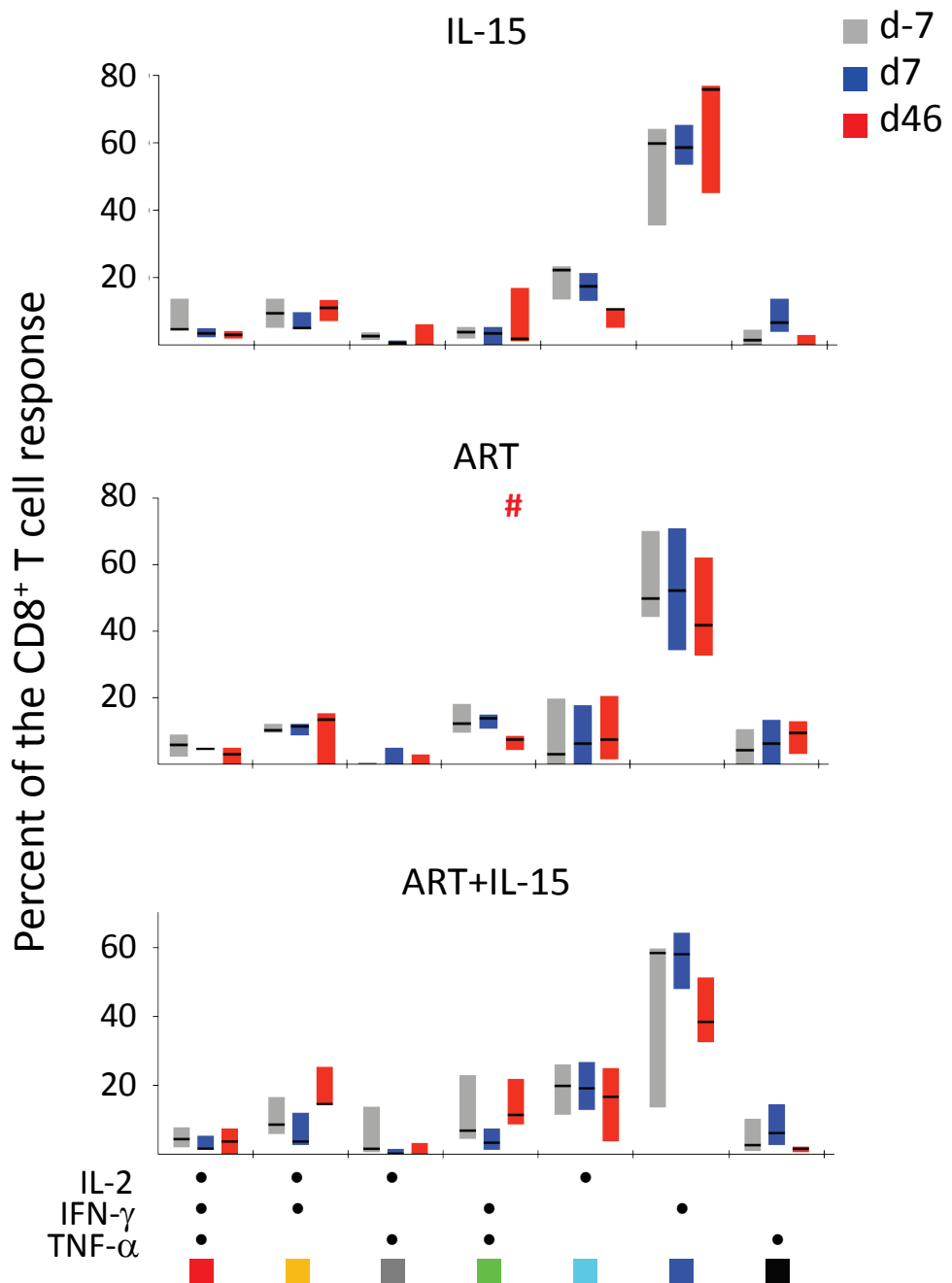


Figure S6

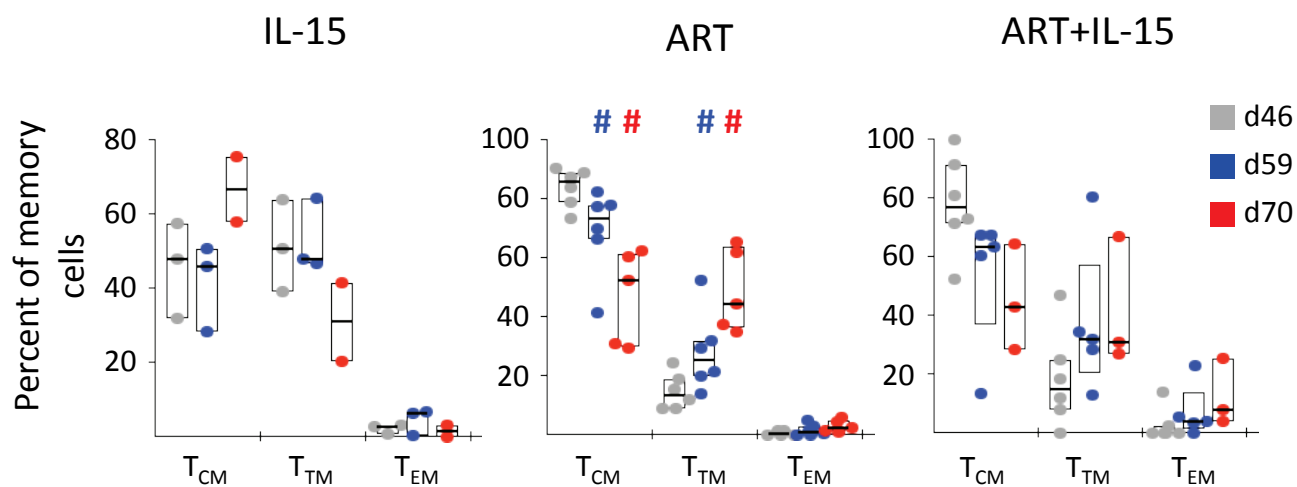


Figure S7