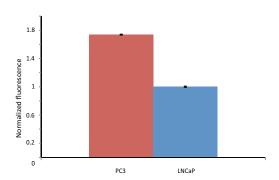
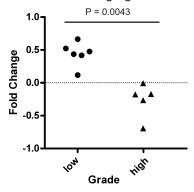
Supplementary Figure 1: PI-9 protein levels in prostate cancer cell lines



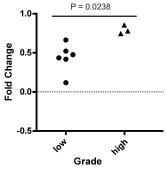
PI-9 levels from each cell line were measured by labeling cells with an anti-PI-9 antibody or isotype control, then measuring fluorescent intensity from 100,000 cells. Fluorescent intensity was normalized to the PI-9 staining intensity of LNCaP cells, and background fluorescence was measured using an isotype control.

Supplementary Figure 3: High grade tumors grouped by PI-9 expression are statistically distinct from low grade tumors

Low grade tumors vs. high grade tumors expressing low PI-9

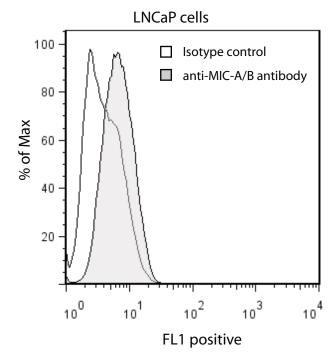


Low grade tumors vs. high grade tumors expressing high PI-9



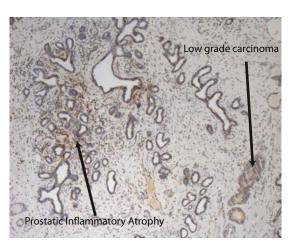
High grade tumors were grouped by expression level, then compared to low grade tumors using the Mann-Whitney rank sum test. High expressing samples have more PI-9 in the tumor than in benign tissue, and low expressing samples have less PI-9 than in benign tissue. The high and low grade tumor populations are statistically different when grouped by PI-9 expression.

Supplementary Figure2: MIC-A/B protein levels in



LNCaP cells were stained with either an isotype control or an anti-MIC antibody, then fluoresent cells were counted by flow cytometry

Supplementary Figure 4: PI-9 staining in prostatic inflammatory atrophy



Immunohistochemistry for PI-9 was performed on slices of prostate tissue, and staining was consistently positive in regions of atrophy, including PIA.