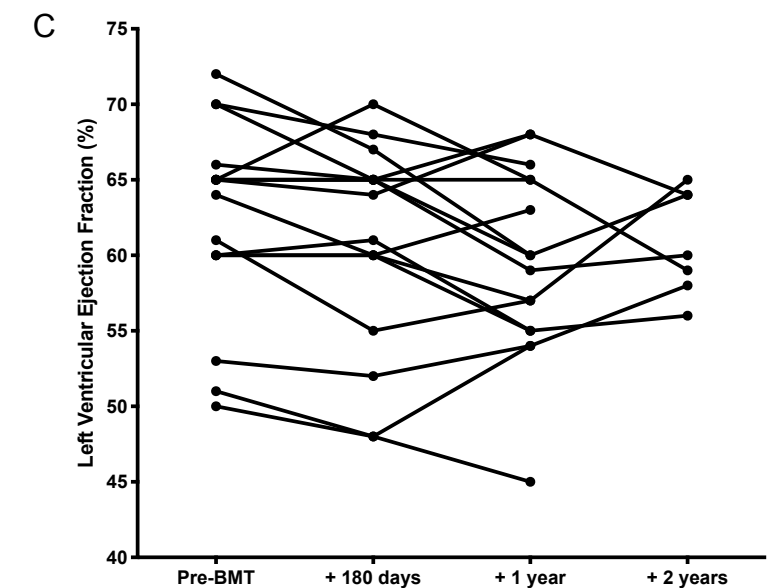
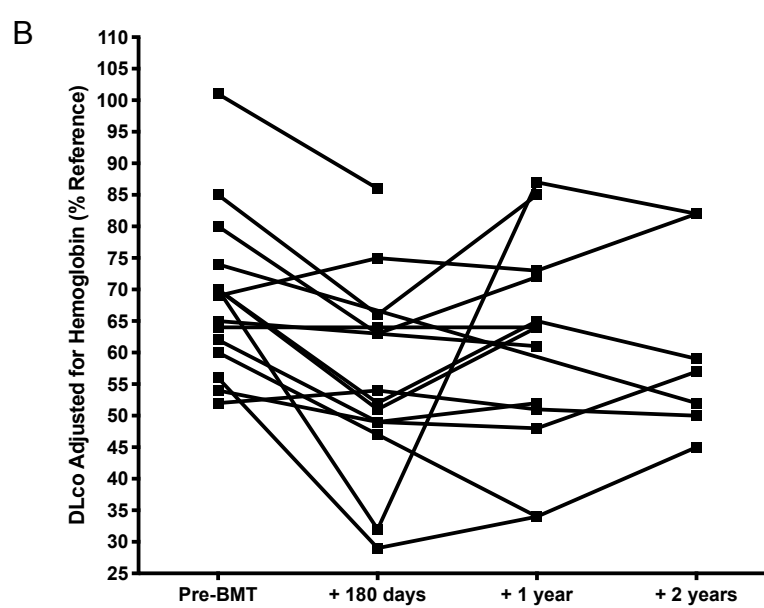
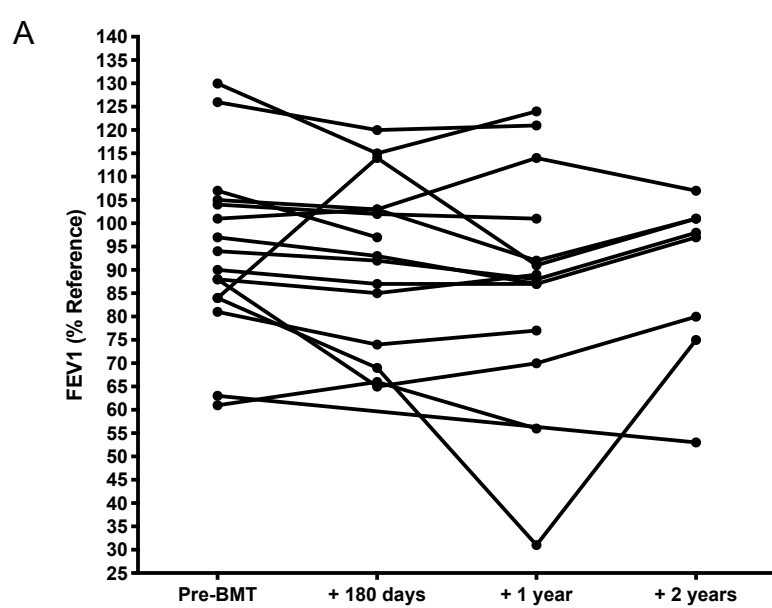
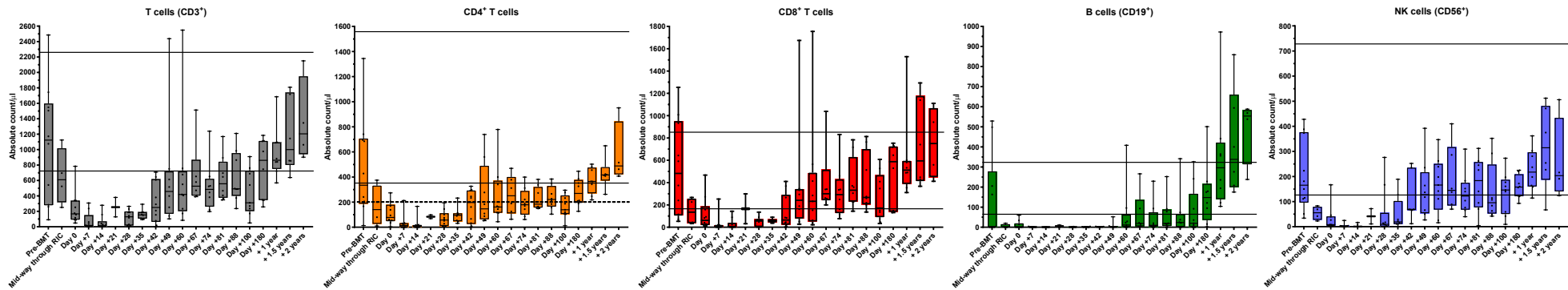


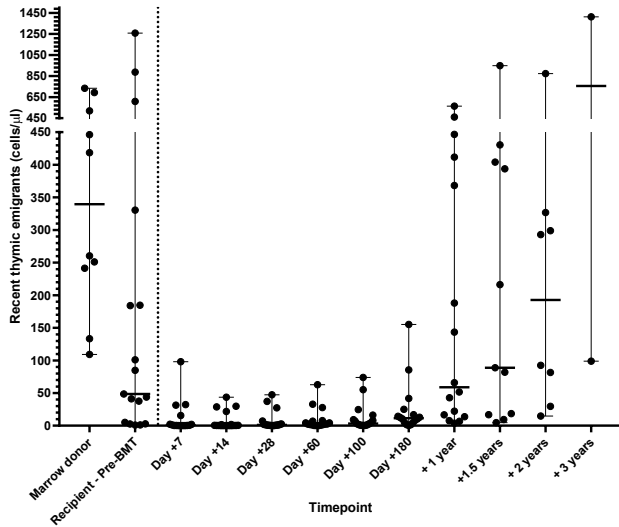
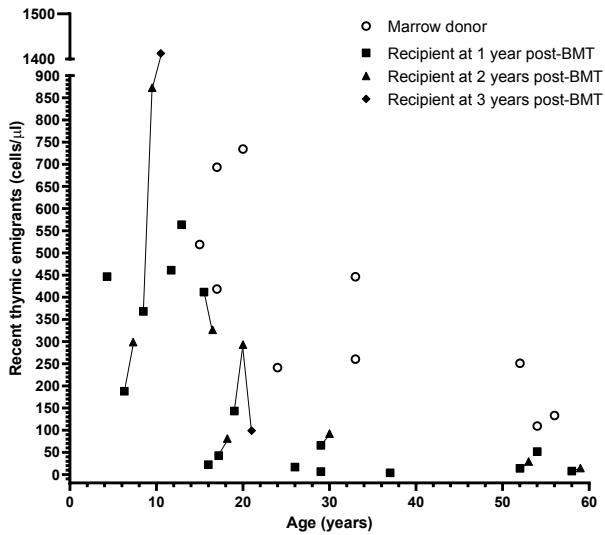
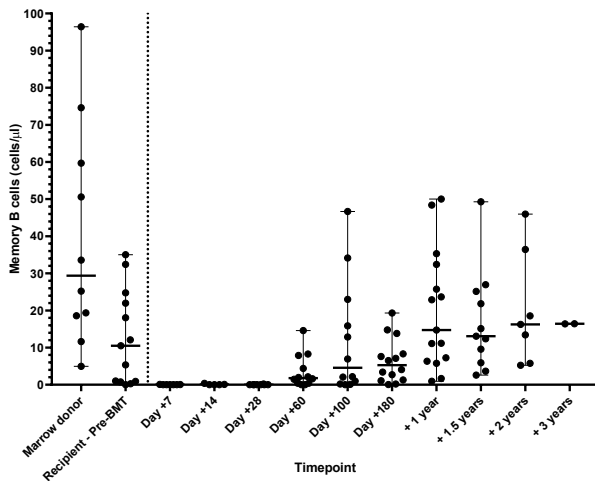
**Supplemental Figure 1. Lineage-specific chimerism trends.** A) Median and interquartile range of CD8<sup>+</sup> T-cell, CD4<sup>+</sup> T-cell, CD14<sup>+</sup> (monocyte), CD56<sup>+</sup> (NK-cell), and CD19<sup>+</sup> (B-cell) subsets for engrafted patients (n=18). B-F) Median and individual chimerism values for CD8<sup>+</sup> T cells (B), CD4<sup>+</sup> T cells (C), CD14<sup>+</sup> cells/monocytes (D), CD56<sup>+</sup>/NK cells (E), and CD19<sup>+</sup>/B cells (F) over time. The ability to assess donor chimerism in lineage subsets was contingent on sufficient cells for analysis, thus certain subsets (namely B cells) were not assessable in some patients, particularly at early timepoints.



**Supplemental Figure 2: Individual patient trends in pulmonary and cardiac function.** A) Forced expiratory volume in 1 second on pulmonary function testing pre-BMT and serially after BMT. Transient declines were noted at times of acute infection. B) Diffusing capacity of the lungs for carbon monoxide, corrected for hemoglobin, on pulmonary function testing pre-BMT and serially after BMT. Transient decline was noted in most patients at day +180 or infrequently at times of acute illness. C) Left ventricular ejection fraction by 2D echocardiogram pre-BMT and serially after BMT. A single patient (P20) had mild but sustained decline in left ventricular ejection fraction; of note, his pre-BMT echocardiogram showed borderline low ejection fraction along with global hypokinesia, of unknown etiology.

### Adults, >18 years, n=10



**A****B****C**

**Supplemental Figure 4.** Recent thymic emigrant ( $CD4^+CD45RA^+CCR7^+CD31^+$ ) numbers by timepoint (**A**) and recipient age (**B**) and memory B cell ( $CD19^+CD20^+CD27^+CD10^-IgD^-$ ) numbers by timepoint (**C**).