

Figure S1. NaCl promotes an anti-inflammatory phenotype in human T cell clones. **a**, Resting T cell clones were generated from CD45RA⁻ memory T helper cells and restimulated with CD3 and CD28 mAbs for 5 days (48 hours plate-bound) in low and high NaCl concentrations. Intracellular cytokine staining FACS analysis is shown. **b**, CD4⁺CXCR3⁻CCR4⁺CCR6⁺ Th17 cells were sorted and cloned by limiting dilution plating. T cell clones expressing >20% IL-17A were restimulated and analyzed as in (a). Each circle represents an individual T cell clone. Student's two-tailed t test was used for comparisons between two groups.

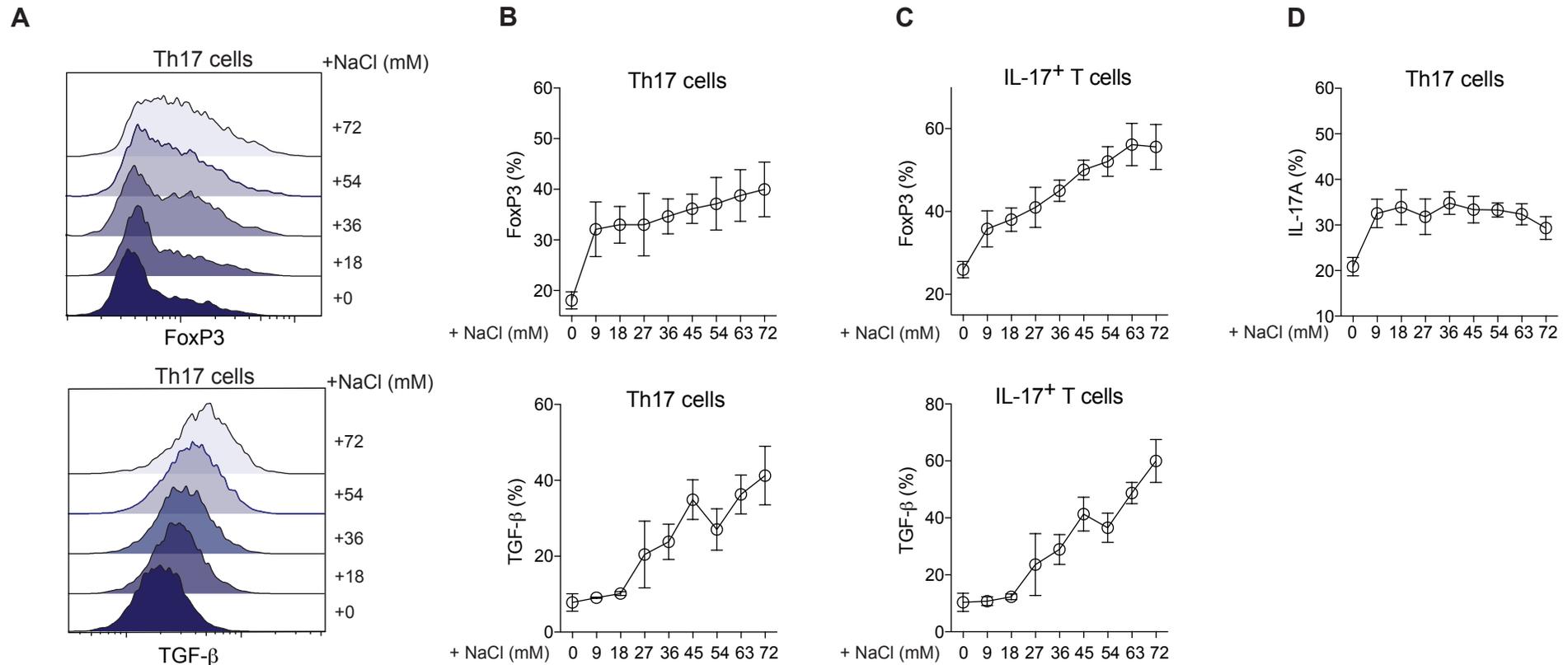


Figure S2. NaCl exerts its anti-inflammatory effects on Th17 cells in a dose-dependent manner over a wide range of NaCl concentrations, whereas IL-17 upregulation reaches a plateau after only small increments of extracellular NaCl. a-d, Th17 cells (CD4⁺CXCR3⁻CCR4⁺CCR6⁺) were sorted from human PBMC *ex vivo* and restimulated for 48 hours with CD3 and CD28 mAbs (48 hours plate-bound) in the presence of titrated concentrations of additional NaCl for a culture period of 5 days. Cytokine and transcription factor expression was determined by intracellular staining and FACS analysis after PMA and ionomycin restimulation for 5 hours. **a**, One representative experiment and **(b-d)** cumulative data for Th17 cells that were sorted according to their differential expression of chemokine receptors and that were gated on IL-17 positive T cells (c) are shown. Data show the mean \pm SEM of four independent experiments (for the conditions +0 mM and +67.5 mM NaCl, n= 15).

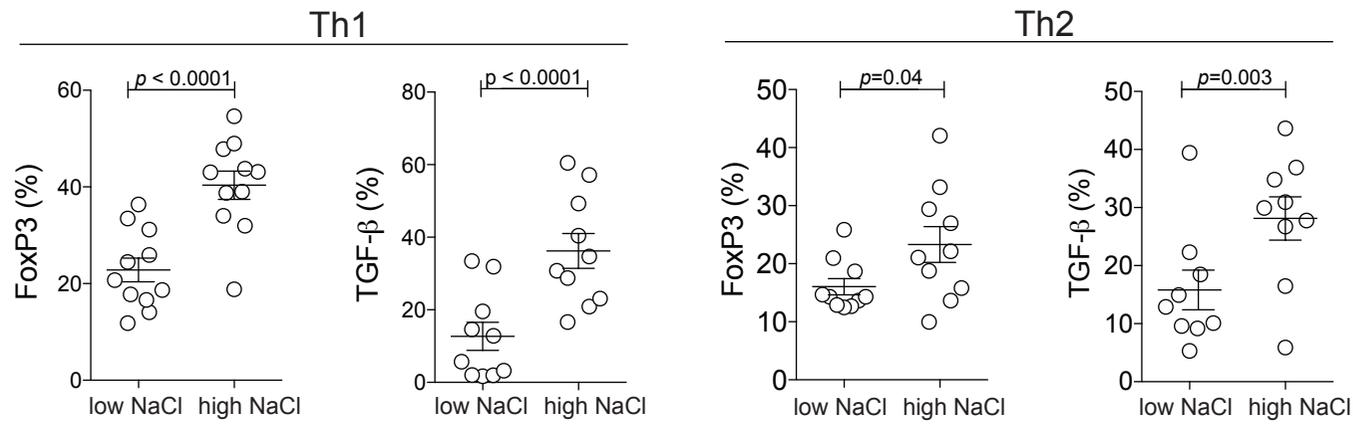


Figure S3. NaCl increases anti-inflammatory T cell effector functions across human T helper cell subsets. Th1 (CXCR3⁺CCR4⁻CCR6⁻) and Th2 cells (CXCR3⁻CCR4⁺CCR6⁻) were isolated *ex vivo* from human PBMC by flow cytometry and restimulated with CD3 and CD28 mAbs for 5 days (48 hours plate-bound) in low or high NaCl conditions before intracellular staining and FACS analysis after PMA and ionomycin restimulation. Each circle represents an individual blood donor. Student's two-tailed t test was used for comparisons between two groups.

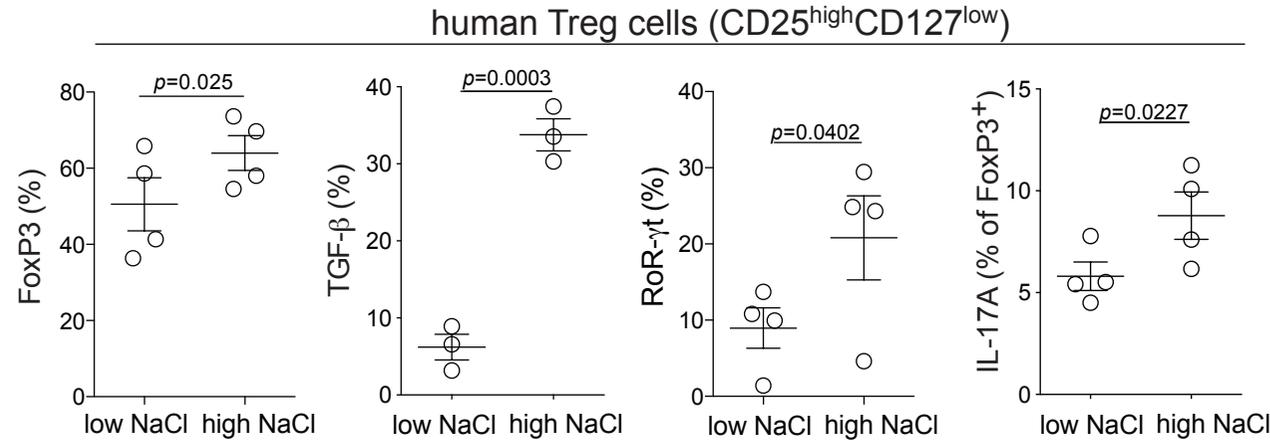


Figure S4. Treg cells acquire Th17 cell properties upon restimulation in high NaCl conditions despite maintaining an anti-inflammatory Treg signature. Human Treg cells were sorted as CD25^{hi}CD127^{low} T cells and stimulated for 5 days with CD3 and CD28 mAbs (48 hours plate-bound) in high or low NaCl conditions before intracellular staining and FACS analysis after PMA and ionomycin restimulation for 5 hours. Each circle represents an individual blood donor. Student's two-tailed t test was used for comparisons between two groups.

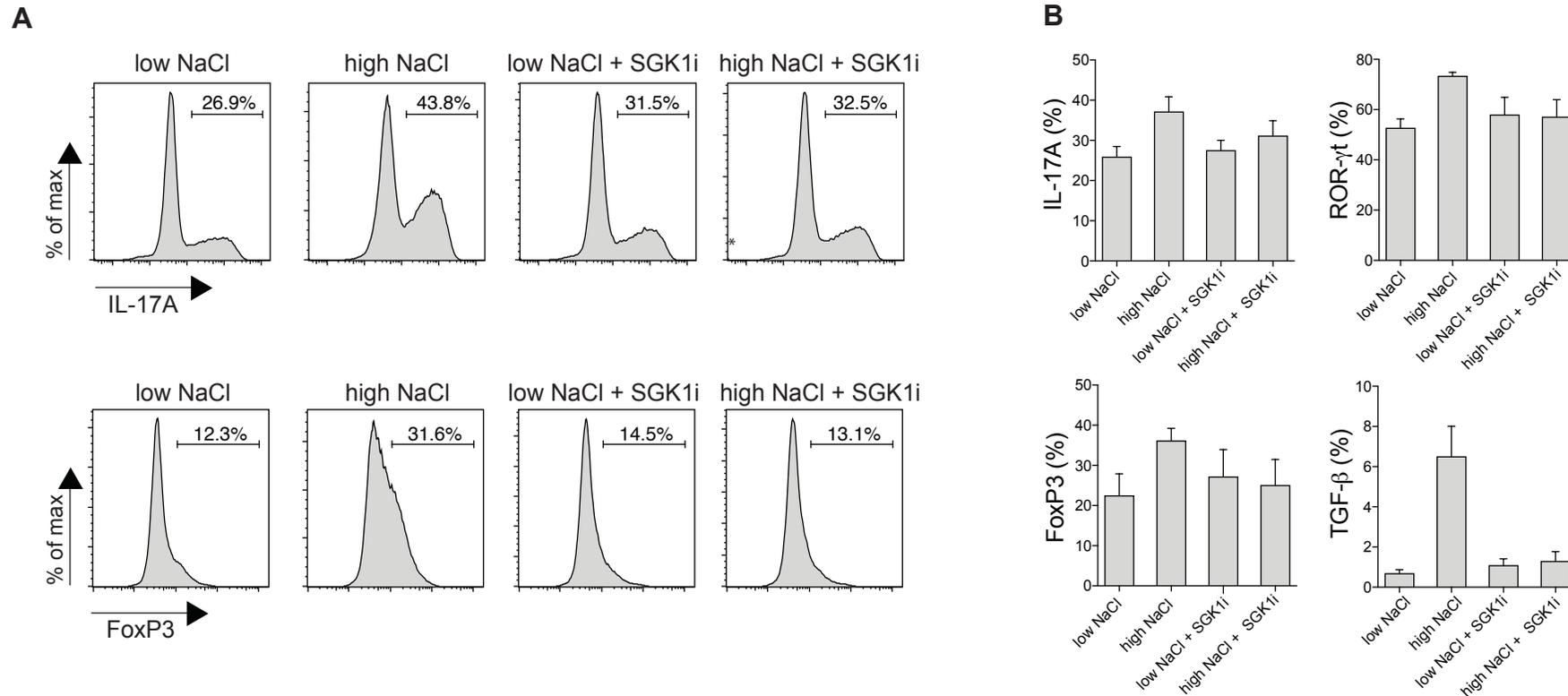


Figure S5. NaCl-mediated upregulation of IL-17 and FoxP3 expression in Th17 cells is abrogated by pharmacological inhibition of SGK1. Human Th17 cells (CXCR3⁻ CCR4⁺CCR6⁺CD45RA⁻) were isolated *ex vivo* by flow cytometry and stimulated for 48 hours with CD3 and CD28 mAbs in low or high NaCl conditions with or without the presence of the SGK1 inhibitor GSK650394 (SGK1i) at a concentration of 1×10^{-6} M. After PMA and ionomycin restimulation on day 5, intracellular staining and FACS analysis were performed. **a**, One representative experiment is shown. **b**, Data show the mean \pm SEM of three to four independent blood donors ($p < 0.05$ for IL-17A, FoxP3, TGF- β ; n.s. for ROR- γ t, one-way ANOVA).

Supplementary figure 6

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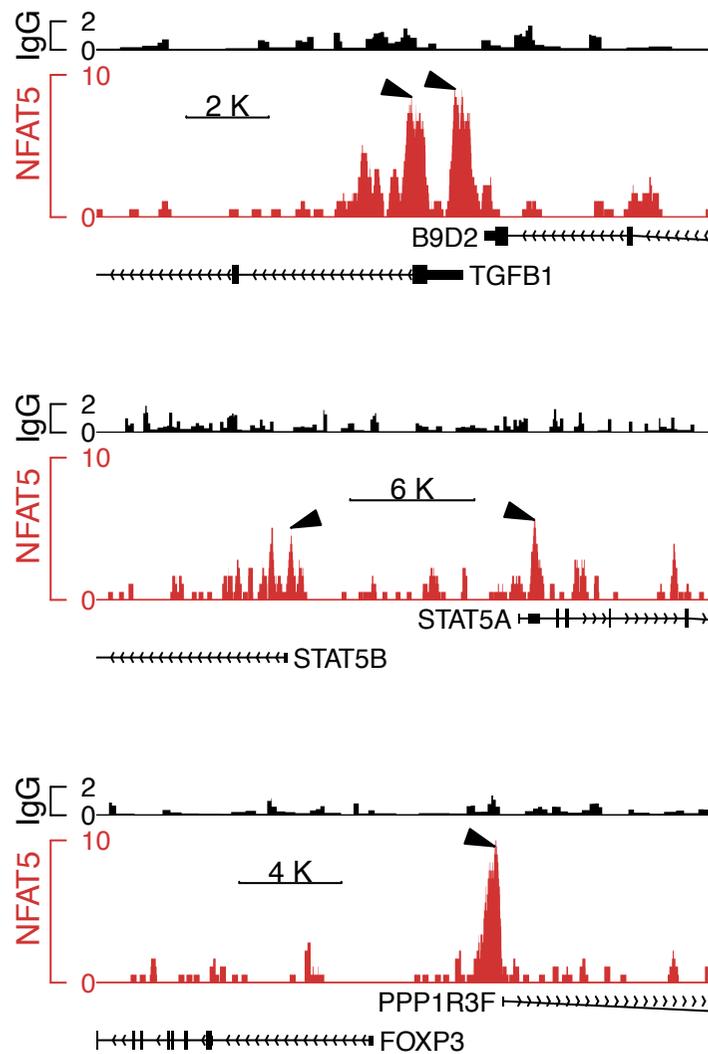


Figure S6. NFAT5 binds to the promoter regions of Treg-associated genes. ChIP-Seq analysis of NFAT5 binding sites in Treg-associated promoter regions. The arrowheads indicate the areas identified after peak calling, which show significant enrichment over the control experiment with IgG. The raw ChIP-Seq data for NFAT5 and IgG in the LoVo colon adenocarcinoma cell line were obtained from previously published work (GSE49402) (35). Reads were mapped to the human primary assembly genome hg38 (GRCh38.p12, Gencode release 30) with bowtie excluding multimapped reads and reporting only best alignments (62). Peaks were called using Homer v4.10 findPeaks tool in factor mode and the IgG experiment as the input control (63). Downstream analyses were performed with the statistical framework R. Genome browser tracks were produced with the help of the Bioconductor package trackViewer v1.18.3 (64).

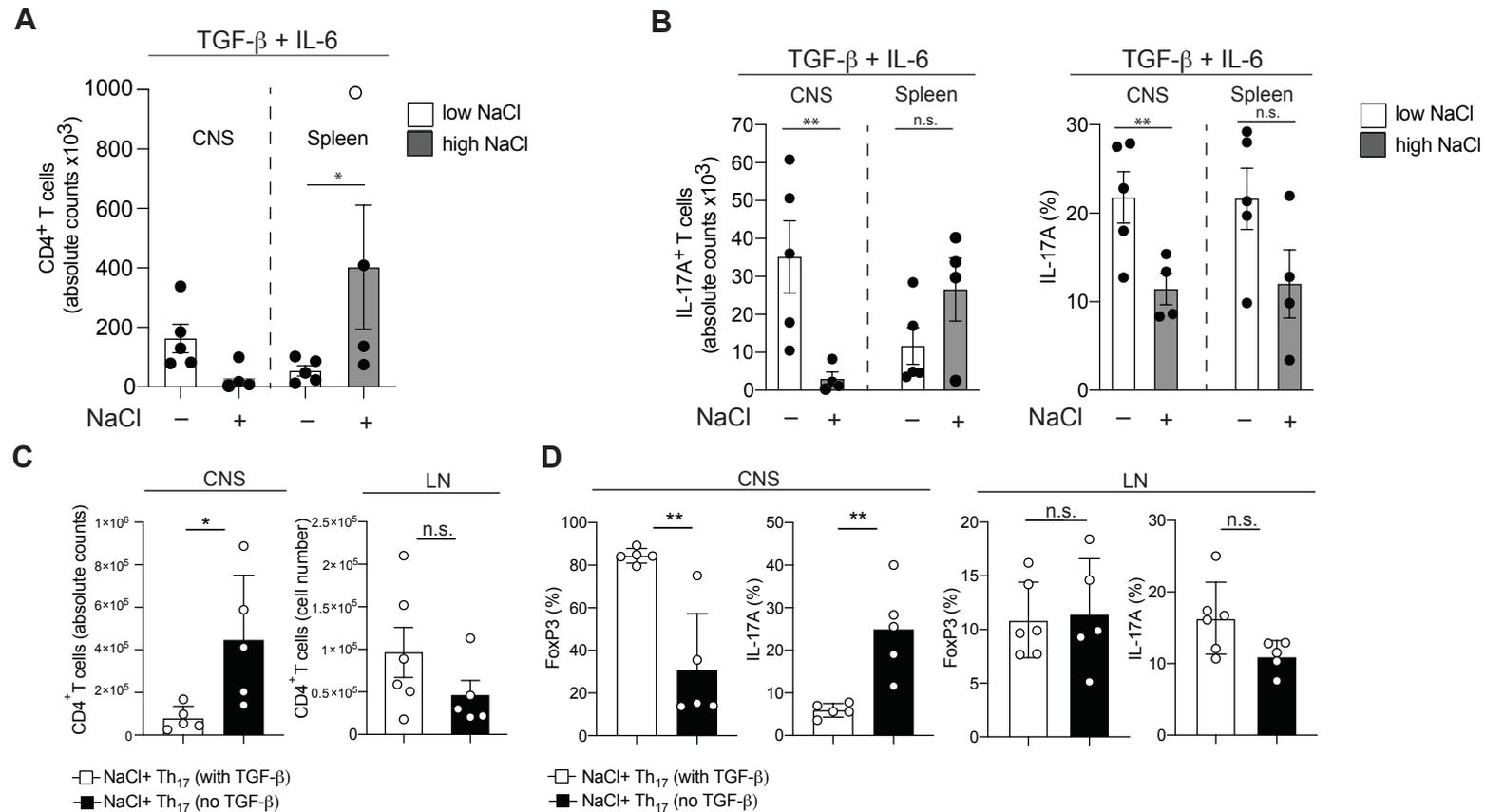


Figure S7. NaCl-induced enhancement or reduction in EAE disease scores correlates with the distribution of T cells in the CNS versus lymphoid organs and with their *ex vivo* phenotype. **a**, Absolute CD4⁺ T cell numbers in the CNS and spleen of mice at peak of disease after adoptive T cell transfer (mean \pm SEM, n=4-5, in high NaCl group one mouse died of disease before day 29). Two-way ANOVA with Sidak's multiple comparisons test (*p<0.05). **b**, The absolute numbers (left) and relative frequencies (right) of CD4⁺ T cells producing IL-17 were determined by intracellular cytokine staining and flow cytometry at the peak of disease after 5 hours of PMA (50ng/ml) and ionomycin (1 μ g/ml) restimulation in the presence of monensin (1 μ g/ml). **c**, *Ex vivo* analysis of absolute numbers of T cells in the CNS and draining lymph nodes (LN) isolated at the peak of disease after adoptive transfer of T cells that were stimulated with high NaCl in TGF- β , IL-6 and IL-1 β containing conditions (Th17 with TGF- β) versus with high NaCl in IL-6, IL-1 β and IL-23 (Th17 no TGF- β) containing conditions. **d**, Analysis of FoxP3 and IL-17 expression by flow cytometry after PMA and ionomycin restimulation of T cells isolated as in c). Data show mean \pm SEM. Student's two-tailed t test (n=5) was used for comparisons between two groups.

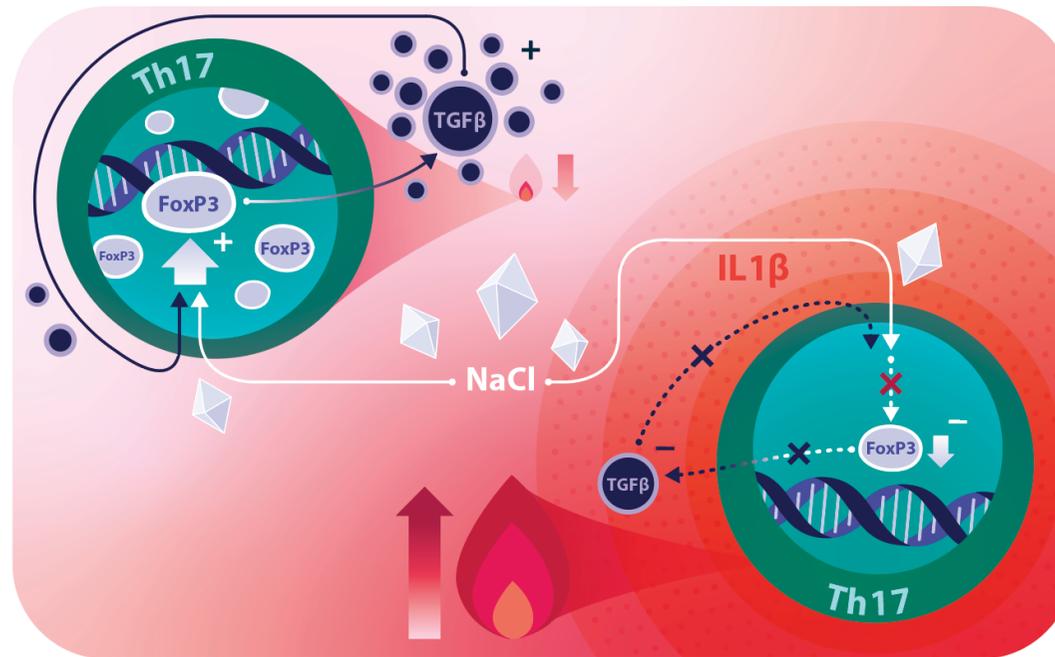


Figure S8. Model –pro- versus anti-inflammatory Th17 cell responses are promoted by NaCl through TGF- β regulation via the IL-1 β switch. NaCl amplifies the anti-inflammatory Th17 cell fate in steady state conditions by enhancing the autocrine TGF- β loop, which promotes and stabilizes FoxP3 expression. A pro-inflammatory cytokine microenvironment including IL-1 β abrogates the anti-inflammatory effect of NaCl by dominantly inhibiting FoxP3 expression and TGF- β production, thus promoting Th17 cell pathogenicity in settings of infection or inflammation. NaCl can therefore promote both the pro- and anti-inflammatory Th17 cell fate depending on cytokine switch factors in the microenvironment.