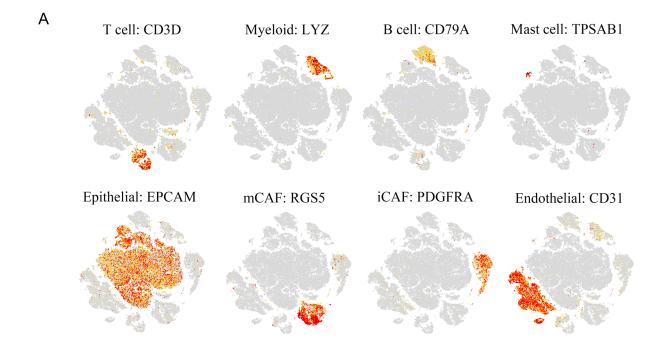
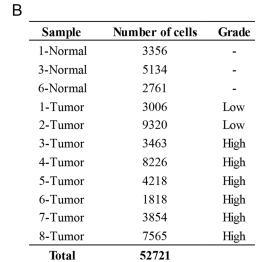
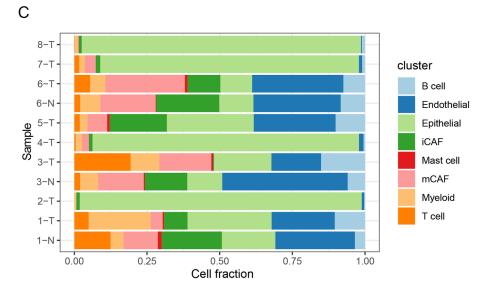
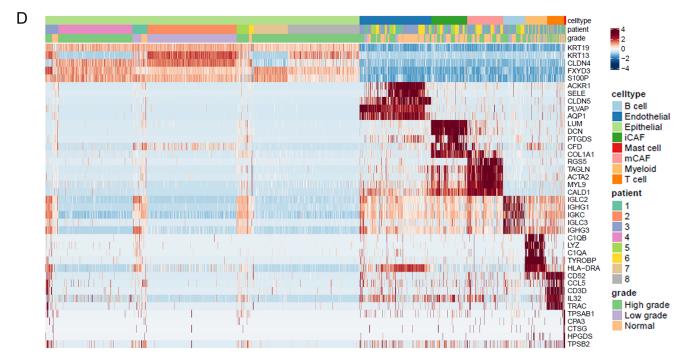


Supplementary Figure 1: Quality control of single cell sequencing data. 1A: Removing batch effect between batches. 3000 variable features (middle) and 2000 variable features (right) were used respectively. 1B: Scree plot show top50 PCs of principle component analysis. Top30 PCs were used in downstream analysis. 1C: Vlnplot show number of UMI (nUMI), number of genes (nGene) detected and percent of mitochondrial derived transcripts (percent.mito) per single cell after quality control. 1D: tSNE plot of single cells profiled here colored by nUMI, nGene detected, and percent.mito.

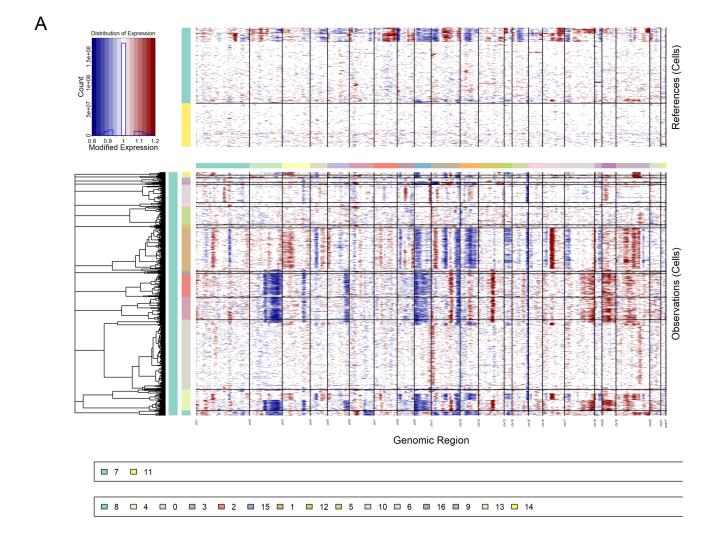


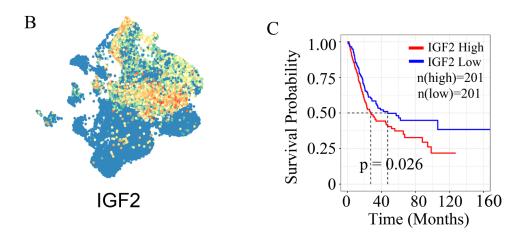




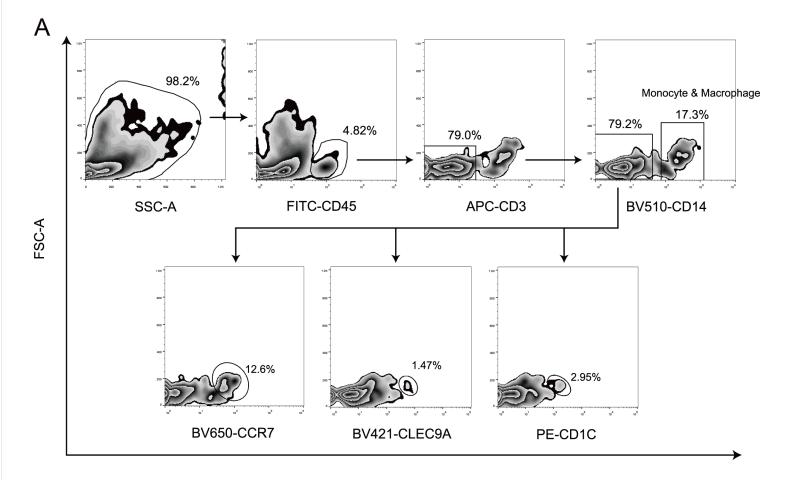


Supplementary Figure 2: Identification of major cell types in BC TME. 2A: Expression of marker genes for major cell types. Eight major cell types were identified: epithelial (EPCAM+) cells; endothelial (CD31+) cells; two types of fibroblasts (COL1A1+) – inflammatory cancer-associated fibroblasts (iCAFs) (PDGFRA+) and myo-CAFs (mCAFs) (RGS5+); B cells (CD79A+); myeloid cells (LYZ+); T cells (CD3D+); and mast cells (TPSAB1+). 2B: Clinical information and number of cells profiled of every sample involved in the presenting work. 2C: The fraction of major cell types originated from the 3 non-malignant samples and 8 tumor samples. 2D: Heatmap of top 5 marker genes of every major cell types. Shown are row z-score.

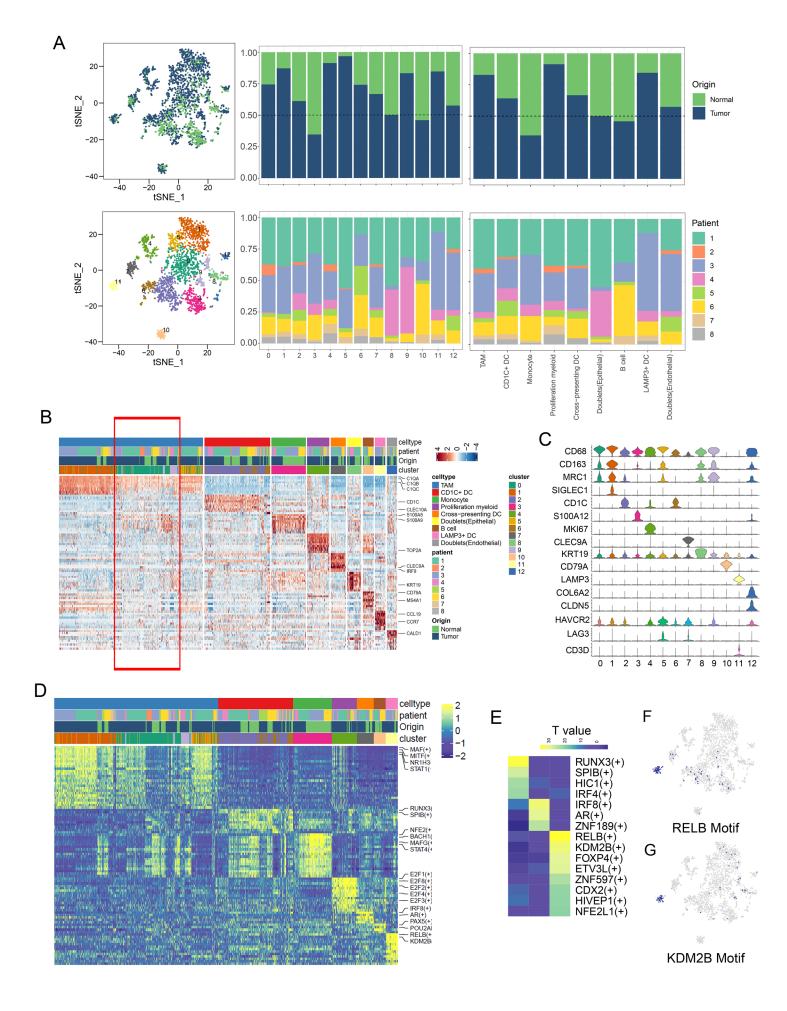




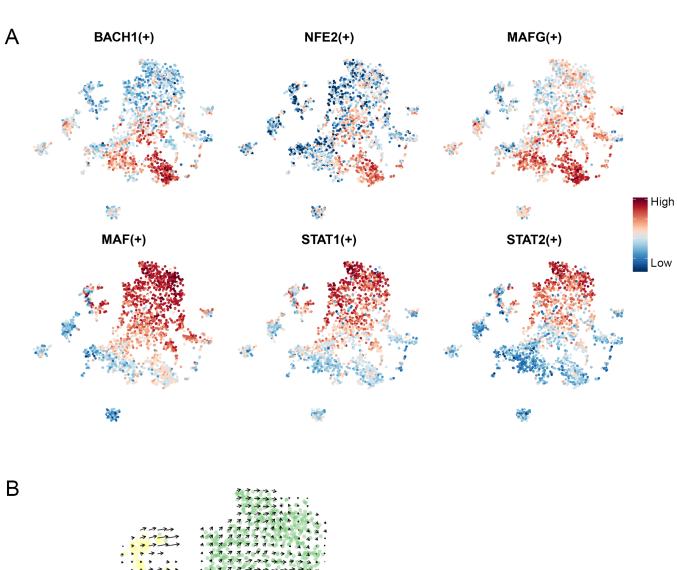
Supplementary Figure 3A: Copy number variations (CNVs) evaluated per cell by InferCNV. Two normal-derived epithelial clusters were used as control group. **3B:** Expression of IGF2 for epithelial cells. **3C:** Kaplan-Meier survival curve for IGF2 in TCGA BLCA cohort, expression of IGF2 was corrected by EPCAM expression level with GEPIA2 method. P value: log-rank p value.

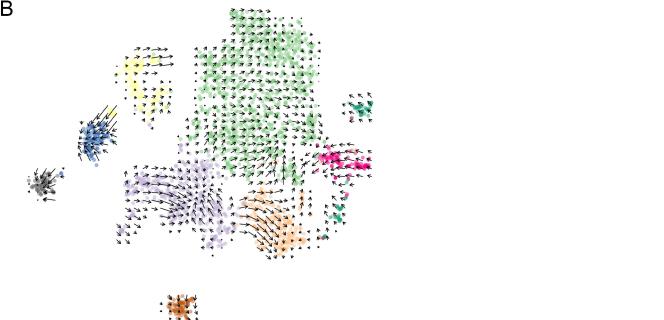


Supplementary Figure 4A: Flow cytometry confirmed the Monocyte and DC subgroups in bladder carcinoma microenvironment.

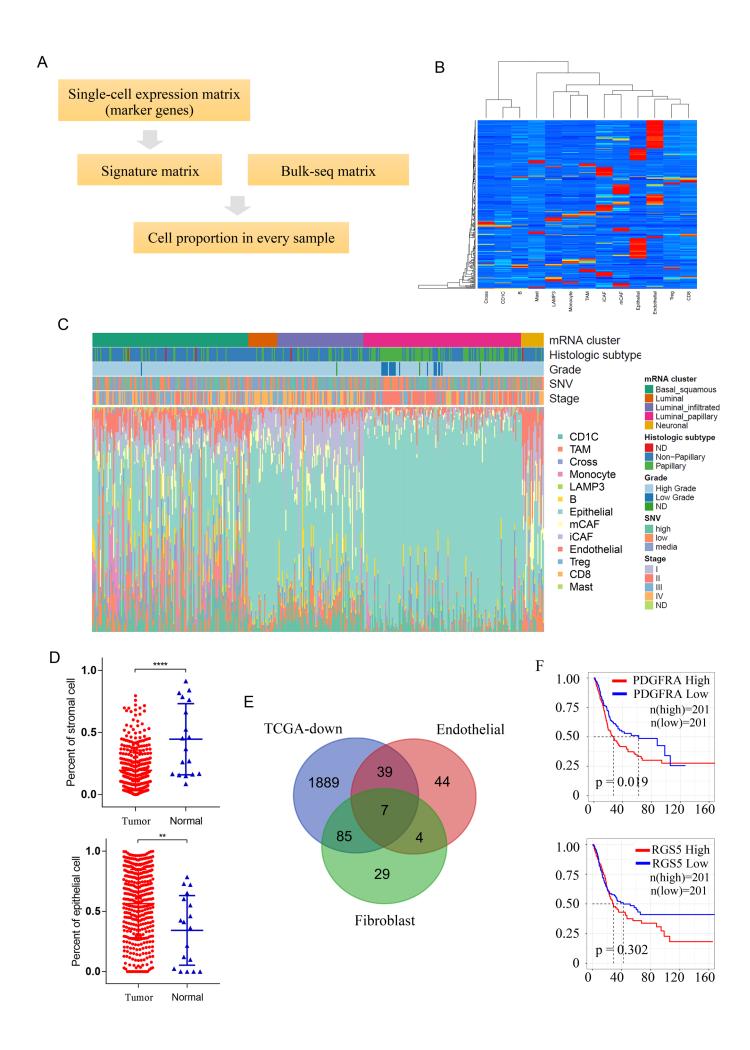


Supplementary Figure 5A: tSNE plot of LYZ+ cells colored by origin (left, up) and clusters (left, down). For cell clusters or cell subgroups, fractions of cells originating from tumor or non-malignant tissues and different patients were also offered in the right. **5B:** Heatmap of top 5 marker genes of every cell subgroups. Shown are row z-score. **5C:** Violin plots of selected cell type-specific genes. **5D:** Activation of TF motifs evaluated by SCENIC could also identify cell subgroups. Shown are row z-score. **5E:** Top differentially activated TF motifs between DC subgroups. Shown are t-values from a linear model. **5F-5G:** AUC of top 2 LAMP3+ DC specific TF motifs.

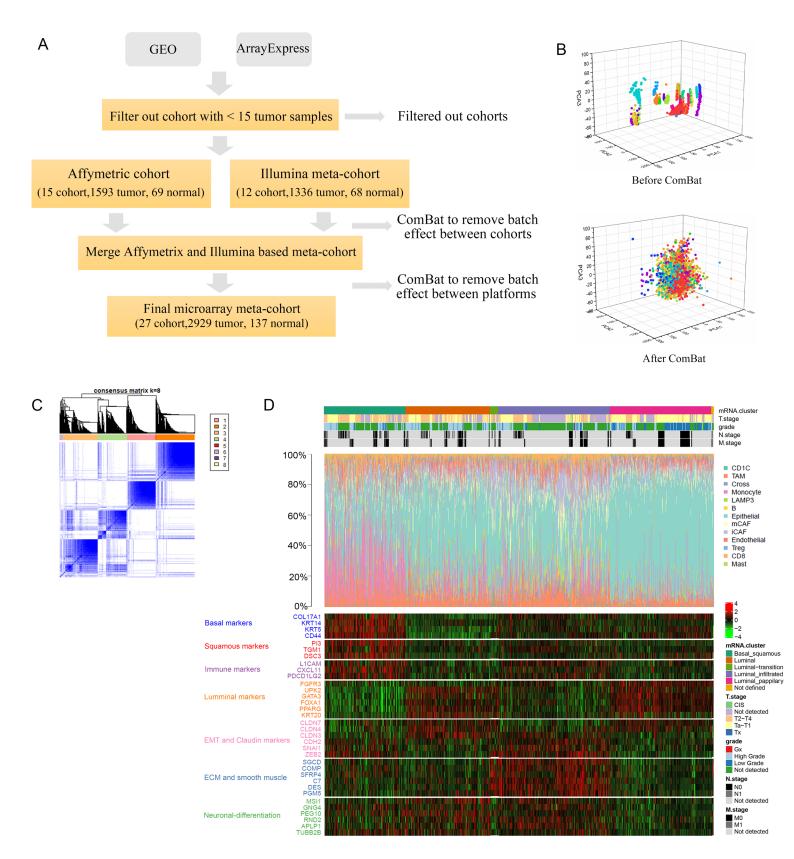




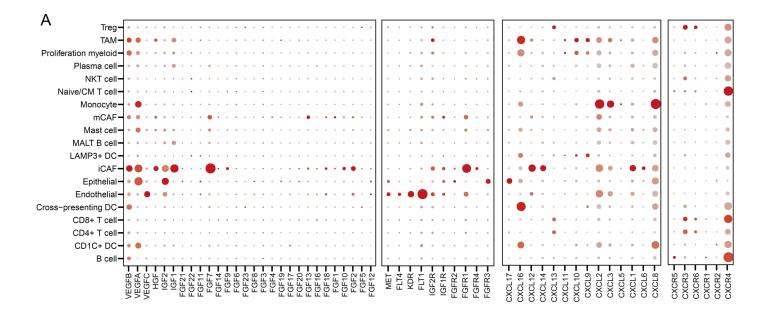
Supplementary Figure 6A: AUC of potential regulons take part in polarization of monocyte. 6B: RNA velocity analysis of Myeloid lineage.



Supplementary Figure 7A: Workflow of the estimation of relative cell abundance with CIBERSORTx. **7B:** Signature matrix created by CIBERSORTx. **7C:** Fraction of tumor infiltrated cells was associated with molecular subtypes. **7D:** Tumor sample contains less stromal cells and more epithelial cells in TCGA BLCA cohort. Two side student's t-test was conducted. **: p < 0.01, ****: p < 0.0001. **7E:** Venn plot shown overlapped DEGs between TCGA down-regulated genes, endothelial markers and Fibroblast markers. **7F:** Kaplan-Meier survival curve of iCAFs and mCAFs specific genes. P: logrank p value.



Supplementary Figure 8A-8B: Workflow of elimination of batch effect between different BC cohort. 8**C:** Clustering of tumor samples with ConsensusClusterPlus identified 5 different molecular subtypes. 8**D:** Fraction of cells in every sample (up) and expression of known marker genes of molecular subtypes.



Supplementary Figure 9: Expression of growth factors, chemokines and their receptors across cell subgroups.

Supplementary Table 1: Clinical information of bladder carcinoma and non-malignant tissues

SampleID	PatientID	Cell Num before QC	Cell Num after QC	gender	age	Grade	Invasiveness	Type of surgery	Tumor size	Therapy
L-T1	1	3267	3006	M	67 ys	low	Noninvasive	TURBT	1.9 cm	Primary tumor without pretreatment
L-T2	2	10049	9320	M	70 ys	low	Noninvasive	TURBT	2.5 cm	primary tumor with no pretreatment
H-T1	3	3584	3463	M	63 ys	high	Noninvasive	Cystectomy	3.5 cm	primary tumor with no pretreatment
H-T2	4	8342	8226	F	59 ys	high	Noninvasive	Cystectomy	4.7 cm	primary tumor with no pretreatment
H-I-T1	5	4467	4218	M	57 ys	high	Invasive	Cystectomy	5.1 cm	primary tumor with no pretreatment
H-I-T2	6	3180	1818	M	75 ys	high	Invasive	Cystectomy	4.3 cm	primary tumor with no pretreatment
H-I-T3	7	4270	3854	M	77 ys	high	Invasive	Cystectomy	4.5 cm	primary tumor with no pretreatment
H-I-T4	8	8123	7565	F	72 ys	high	Invasive	Cystectomy	4.1 cm	primary tumor with no pretreatment
N1	1	3459	3356	M	67 ys	-	-	TURBT	-	-
N2	6	3334	2761	M	75 ys	-	-	Cystectomy	-	-
N3	3	5310	5134	M	63 ys	-	-	Cystectomy	-	-

Supplementary Table 2: Top Cell type Specific Motifs of Myeloid Lineage

Celltype	TOP specific TF			
TAM	MAF(+)			
TAM	MITF(+)			
TAM	NR1H3(+)			
TAM	STAT1(+)			
TAM	USF2(+)			
TAM	STAT2(+)			
TAM	CEBPA(+)			
TAM	ETV5(+)			
TAM	TFEC(+)			
TAM	MAFB(+)			
TAM	CREB3L2(+)			
TAM	ARNT(+)			
CD1C+ DC	RUNX3(+)			
CD1C+ DC	SPIB(+)			
CD1C+ DC	HIC1(+)			
CD1C+ DC	IRF4(+)			
Cross-presenting DC	IRF8(+)			
Cross-presenting DC	AR(+)			
Cross-presenting DC	ZNF189(+)			
Monocyte	NFE2(+)			
Monocyte	BACH1(+)			
Monocyte	CREB5(+)			
Monocyte	MAFG(+)			
Monocyte	STAT4(+)			
Monocyte	NFKB2(+)			
LAMP3+ DC	RELB(+)			
LAMP3+ DC	KDM2B(+)			
LAMP3+ DC	FOXP4(+)			
LAMP3+ DC	ETV3L(+)			
LAMP3+ DC	ZNF597(+)			
LAMP3+ DC	CDX2(+)			
LAMP3+ DC	HIVEP1(+)			
LAMP3+ DC	NFE2L1(+)			