## **Supplemental Data**



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Supplemental Figure 1. Depletion of *ARID1A* does not affect *CHK2* mRNA level or RNF8 protein level. (A) Left, western blots of ARID1A, Chk2, and p-Chk2 in U2OS cells after exposure to 10 Gy ionizing radiation (IR). Right, quantitative analysis from normalization to loading control represent the mean  $\pm$  SD (ARID1A, P<0.0001; Chk2, p<0.0001; p-Chk2, p<0.0001 by one-way ANOVA with Dunnett's multiple comparisons test). (B) Left, qPCR analysis of *CHK2* mRNA expression in U2OS cells. Right, western blots indicate effective ARID1A knockdown. si-Ctrl, si-Nontarget; Quantitative analysis represents the mean  $\pm$  SD of three independent experiments. (C) *CHK2* mRNA expression in HCT116-WT and *ARID1A*-KO cells from RNA SEQ analysis. Quantitative analysis represents the mean  $\pm$  SD of three independent experiments. Two-tailed unpaired Student's *t* test (B and C). (D) Western blots of ARID1A and RNF8 in transient and stable *ARID1A*-knockdown U2OS cells. NT, Nontreated; si-Ctrl, si-Nontarget. (E) Immunoblot of U2OS cells transfected with indicated plasmid and siRNA, SFB-tagged (S-tag, Flag epitope tag, and streptavidin-binding peptide tag) RNF8 (SFB-RNF8), si-Nontarget, or siRNA targeting *ARID1A* along with His-ubiquitin (His-Ub) 48 or His-Ub 63 constructs.



Supplemental Figure 2. Chk1 expression is not affected by *ARID1A* deficiency. (A) Left, western blots of Chk2 in ovarian cancer cell lines HOC8 and FUOV1 treated with MG132 (1  $\mu$ M) for 6 hours. Right, quantitative results represent the mean  $\pm$  SD of three independent experiments. \*\*, P < 0.01; \*\*\*\*, P < 0.0001. (B) Western blots of Chk2 in ovarian cancer cell lines HOC8 (left) and OAW42 (middle) treated with cycloheximide (CHX) (25  $\mu$ g/ml). Right, quantitative results represent the mean  $\pm$  SD of three independent experiments. \*\*, P < 0.01; \*\*\*\*, P < 0.001. Two-tailed unpaired Student's *t* test (A and B).

Chk2 protein sequence, red indicate the mutant K.

MSRESDVEAQQSHGSSACSQPHGSVTQSQGSSSQSQGISSSSTSTMPNSSQSSHSSSGTLSSLETVSTQE LYSIPEDQEPEDQEPEEPTPAPWARLWALQDGFANLECVNDNYWFGRDKSCEYCFDEPLLKRTDKYRTYSK KHFRIFREVGPKNSYIAYIEDHSGNGTFVNTELVGKGKRRPLNNNSEIALSLSRNKVFVFFDLTVDDQSVYPKA LRDEYIMSKTLGSGACGEVKLAFERKTCKKVAIKIISKRKFAIGSAREADPALNVETEIEILKKLNHPCIIKIKNFFD AEDYYIVLELMEGGELFDKVVGNKRLKEATCKLYFYQMLLAVQYLHENGIIHRDLKPENVLLSSQEEDCLIKITD FGHSKILGETSLMRTLCGTPTYLAPEVLVSVGTAGYNRAVDCWSLGVILFICLSGYPPFSEHRTQVSLKDQITS GKYNFIPEVWAEVSEKALDLVKKLLVVDPKARFTTEEALRHPWLQDEDMKRKFQDLLSEENESTALPQVLAQ PSTSRKRPREGEAEGAETTKRPAVCAAVL



**Supplemental Figure 3. Identification of Chk2 poly-ubiquitination sites.** (**A**) Predictive Chk2 poly-ubiquitination sites. (**B**) Immunoblot of 293T cells transfected with indicated plasmid and siRNA, SFB-tagged (S-tag, Flag epitope tag, and streptavidin-binding peptide tag) Chk2 WT, SFB-Chk2 Mut (K492R, K494R, K520R and K534R) along with His-ubiquitin (His-Ub) constructs. IB, Chk2.

A



Supplemental Figure 4. Inactivation of ATM-CHK2 axis sensitizes ovarian cancer cells with *ARID1A* depletion. (A)Western blots of Chk1 in ovarian cancer cell lines with different levels of ARID1A. (B-C) *ARID1A*-knockdown HOC8 cells were treated with DMSO, PV1019 (B), or KU-60019 (C) at indicated concentrations. Clonogenic assays were performed. Left, representative images of colony formation. Right, quantitative results represent the mean  $\pm$  SD from three independent experiments. \*\*, P < 0.01; \*\*\*, p<0.001 by two-tailed unpaired Student's *t* test. (D) Schematic diagram of the DR-GFP reporter assays.



## Supplemental Figure 5. ATM inhibitor stimulates cytosolic DNA in ID8 ARID1A-KO cells. (A) Representative images of PicoGreen staining in parental and Arid1a-depleted (sgRNA#1 and #2) ID8 cells treated with DMSO or KU-60019 (2 μM) for 48. DAPI (blue) was used to visualize the nuclei. Scale bar, 10 µm. (B) Left, western blots indicate effective Arid1a knockdown. Right, western blots of phosphorylated TBK1 (p-TBK1) and total TBK1 (TBK1) in parental and Arid1a-depleted (sgRNA#1 and #2) ID8 cells treated with KU-60019 (2 µM) for 48 hours. (C-D) Representative images of dsDNA (C) and ssDNA (D) immunostaining in control (sh-Luc) and *Arid1a*-depleted (sh-*Arid1a*#1 and #2) ID8 cells treated with DMSO, KU-60019 ( $2 \mu M$ ) for 48 hours. DAPI (blue) was used to visualize the nuclei. Scale bar, 10 µm. (E). Representative images of PicoGreen staining in control (sh-Luc) and Arid1a-depleted (sh-Arid1a#1 and #2) ID8 cells treated with DMSO, HU (2 mM), KU-60019 (2 µM) or combination treatment for 48 hours. DAPI (blue) was used to visualize the nuclei. Scale bar, 10 µm. (F) qPCR analysis of Ccl5 and Cxcl10 mRNA expression in Arid1a knockdown ID8 cells under DMSO, HU (2mM), KU-60019 (2 $\mu$ M) or combination treatment for 48 hours. Data represent mean $\pm$ SD of three independent experiments. \*\*\*, p<0.001; \*\*\*\*, p<0.0001. (G) Left, Representative images of co-staining of BrdU and PicoGreen in Arid1a knockdown ID8 cells under DMSO or KU-60019 treatment. Right, quantitative results represent the mean $\pm$ SD of three independent experiments. \*\*\*\*, p<0.0001. (n = 12). Scale bar, 10 µm. One-way ANOVA with Sidak's multiple comparisons test (E and F), two-tailed unpaired Student's *t* test (G).



Supplemental Figure 6. Inhibition of the ATM-Chk2 axis promotes TIL signatures. (A) Associations between different subsets of TIL signatures and *ARID1A* or *ATM* mRNA expression in TCGA ovarian (OV) tumors (n = 309). The figures show associations of increased Cytotoxic and STING mRNA with reduced *ARID1A* or *ATM* mRNA expression (*ARID1A*: Cytotoxic p=5.79e<sup>-05</sup>, STING p=0.016; *ATM*, Cytotoxic p=0.0408, STING p=0.0209). (B) Survival analysis for patients with esophagus or stomach cancer with *ARID1A*, *ATM*, and *CHK2* mutation (Mut). (Esophagus-Stomach, n = 518, *ARID1A*/ATM Mut (n = 19) vs *ARID1A* Mut (n = 63), p=0.0073; *ARID1A*/CHK2 Mut (n=5) vs *ARID1A* Mut (n = 101), p=0.6125). Two-tailed unpaired Student's *t* test (**A** and **B**).



Supplemental Figure 7. Proposed model by which inhibition of ATM-Chk2 potentiates the efficacy of ICB therapy in *ARID1A*-deficient cancers.