Donor	T cell source	Manufacturing methods1	CAR	CD4:CD8	PD1+/CD82	PD- L1>1%	CAR construct₃	Cytotoxicity +/-PD4 (P values)	In vivo activity +/-PD₅ (<i>P</i> values)
Patient 1-1	PBMC	Tissue	18%	71:24	96%	yes	RR	Yes	n.d.
(ATC)		culture						(<i>P</i> < 0.001)	
Patient 1-2	PBMC	Tissue	20%	71:24	96%	yes	RR	Yes	n.d.
(ATC)		culture						(P < 0.001)	
Patient 2	PBMC	Tissue	64%	59:39	99%	yes	mAS	No	n.d.
(ATC)		culture						(P > 0.5)	
Patient 3-1	PBMC	Tissue	61%	77:20	40%	no	mAS	No	n.d.
(PDTC)		culture						(P > 0.5)	
Patient 3-2	PBMC	Tissue	56%	77:20	40%	no	RR	No	n.d.
(PDTC)		culture						(P > 0.5)	
Patient 4	PBMC	Tissue	55%	65:26	16%	no	RR	Yes	n.d.
(WDPTC)		culture						(P < 0.05)	
Healthy 1	Leukopak	Prodigy	75%	85:12	41%	n.a.	mAS	Yes	Yes
		(CAR T-1)						(P < 0.05)	(P < 0.01)
Healthy 2	Leukopak	Prodigy	81%	45:51	24%	n.a.	mAS	No	No
		(CAR T-2)						(P > 0.5)	(P > 0.5)
Healthy 3	Leukopak	Prodigy	71%	42:53	26%	n.a.	mAS	No	No
		(CAR T-3)						(P > 0.5)	(P > 0.5)

Supplementary Table 1. Summary of donor T cells used for CAR T cell generation and response to anti-PD1 antibody treatment *in vitro* and *in vivo*.

1. Two different manufacturing methods. Refer to Methods for details.

2. Refer to Figures 2 and 4A

3. RR denotes R6.5 scFv based CAR design (1), and mAS denotes CAR design with LFA-1 I domain with F292A mutation (2).

4. Determined against 8505C cell line at 50% cell death. Refer to Fig. 3C.

5. Determined by the tumor burden reduction at weeks 3-4 post-xenograft.

n.a. = not applicable; n.d. = not determined.