

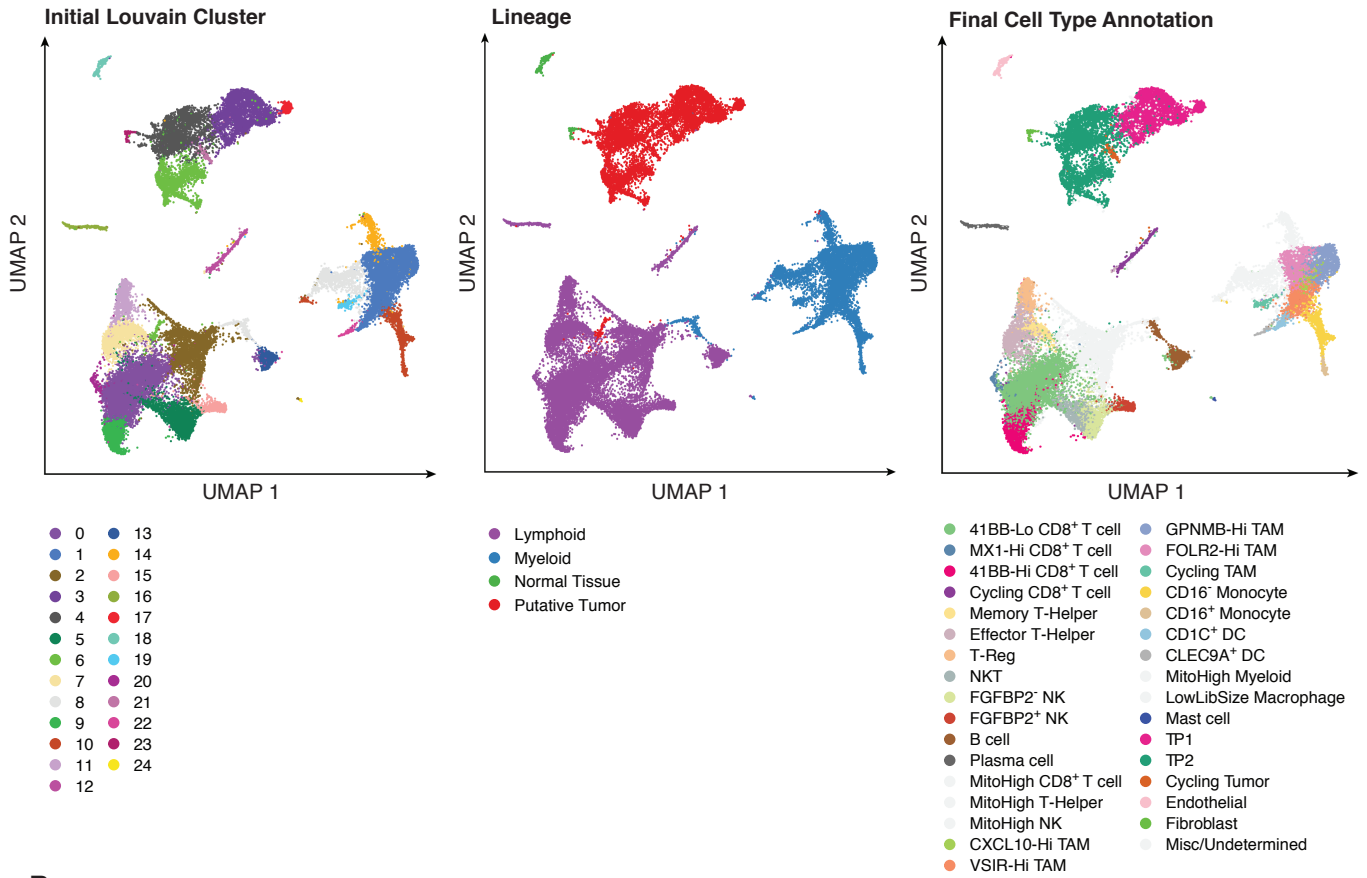
**Supplemental information**

**Tumor and immune reprogramming  
during immunotherapy  
in advanced renal cell carcinoma**

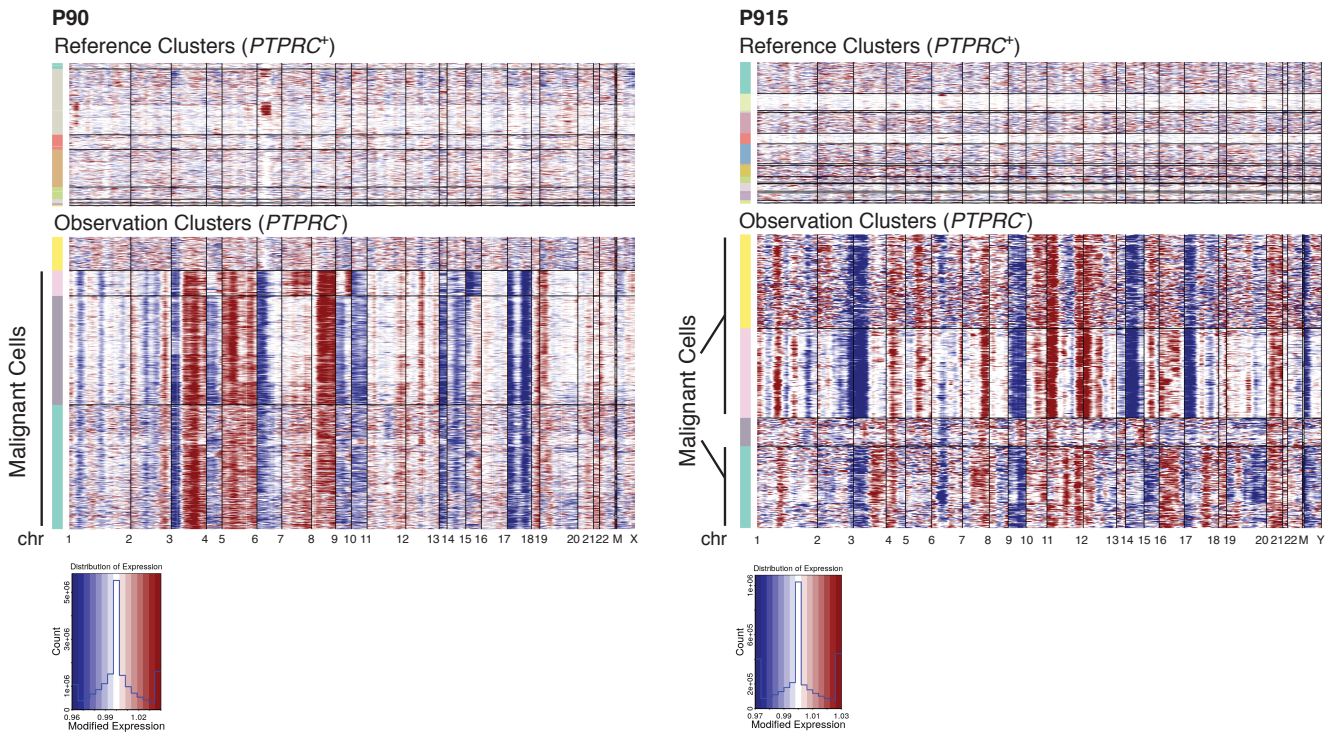
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**Figure S1**

**A**



**B**



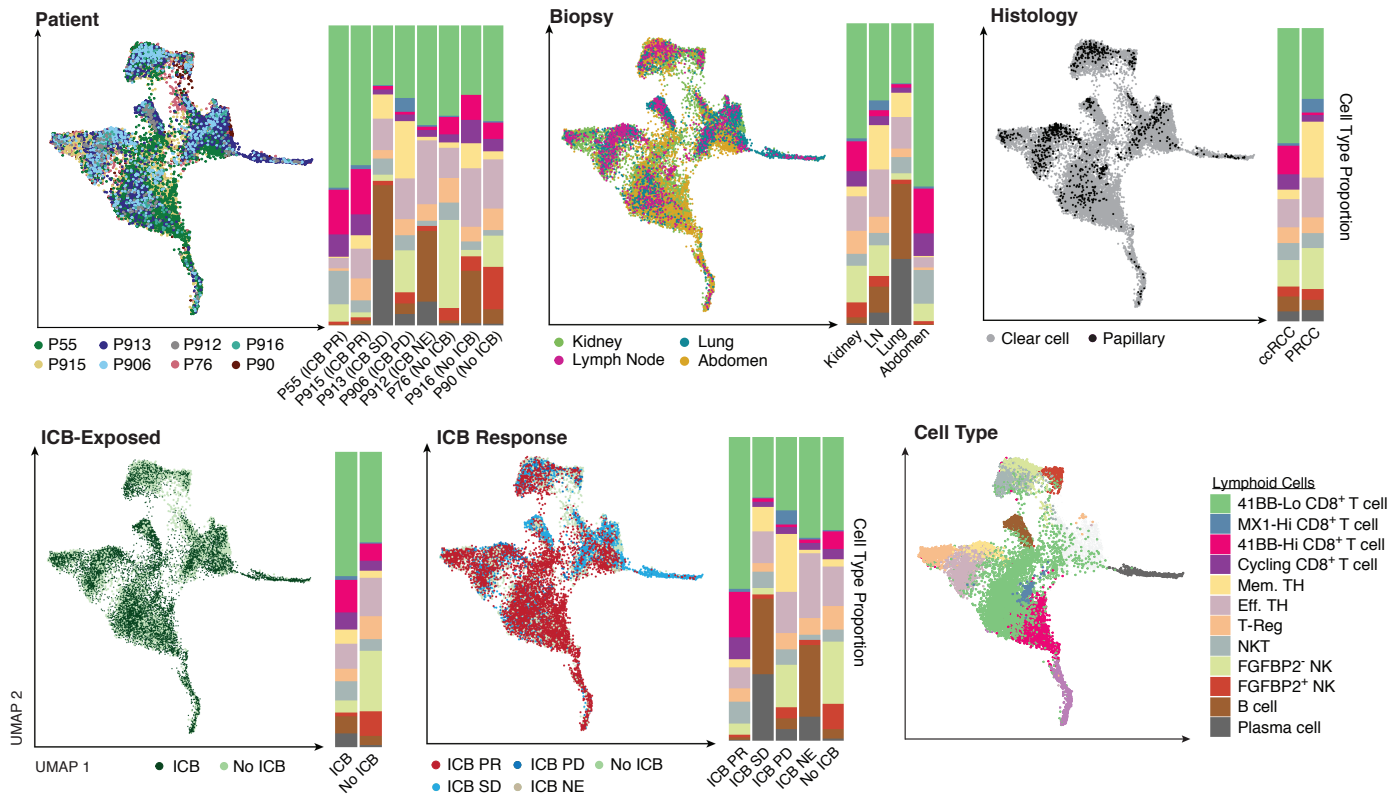
**Figure S1. Identification of clusters, lineage, and cell subsets. Related to Figure 1.**

(A) UMAP of all malignant and non-malignant cells captured across all lesions, colored by initial Louvain cluster (left), lineage (middle), and final cell type annotation following iterative reprojection and clustering within lineages (right).

(B) Heatmaps of inferred CNV for all cells from two representative samples (P90 and P915). Red indicates amplification, while blue indicates deletion. Malignant clusters were identified through broad copy number alteration profiles, including 3p loss characteristic of ccRCC.

**Figure S2**

**A**



**B**

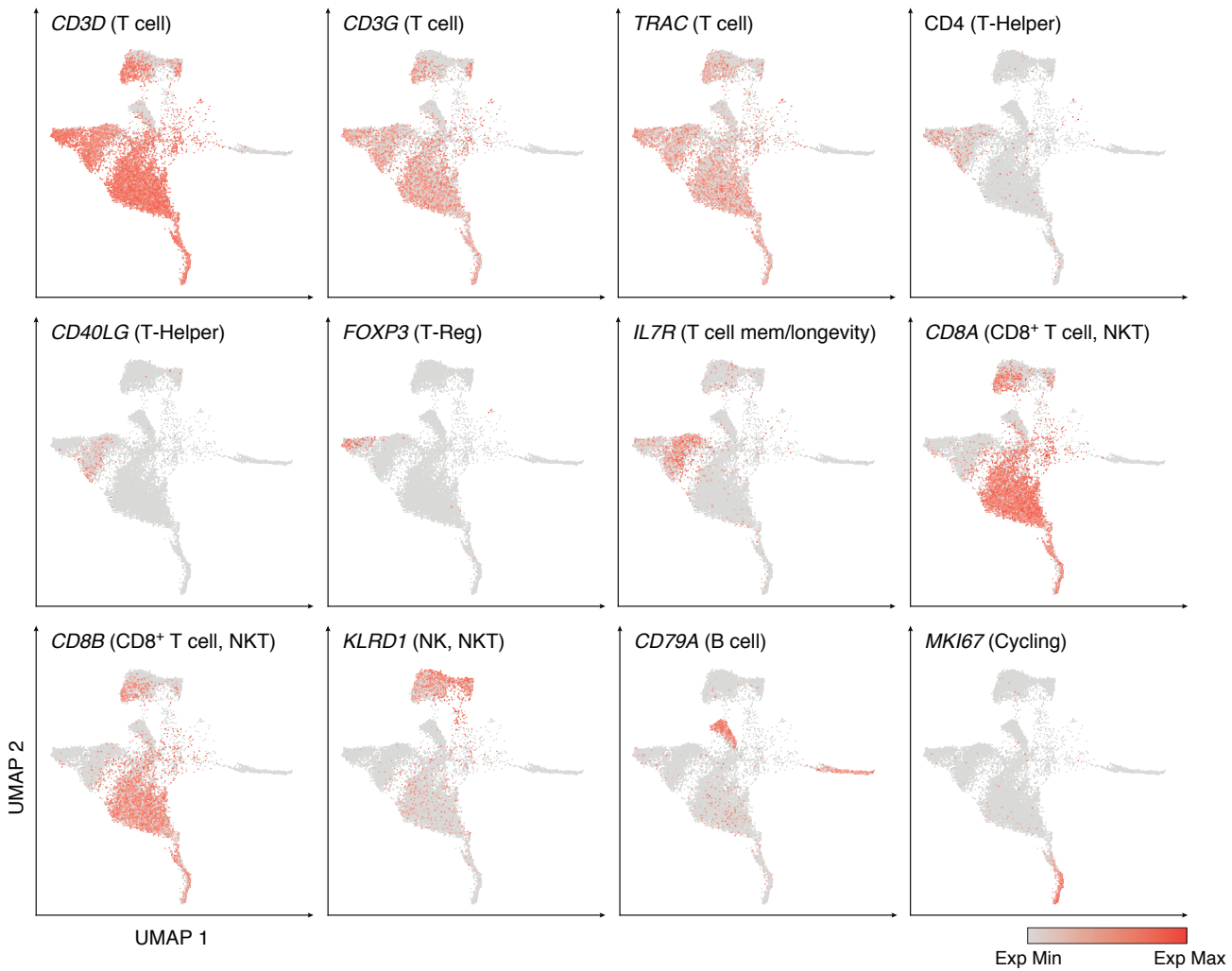
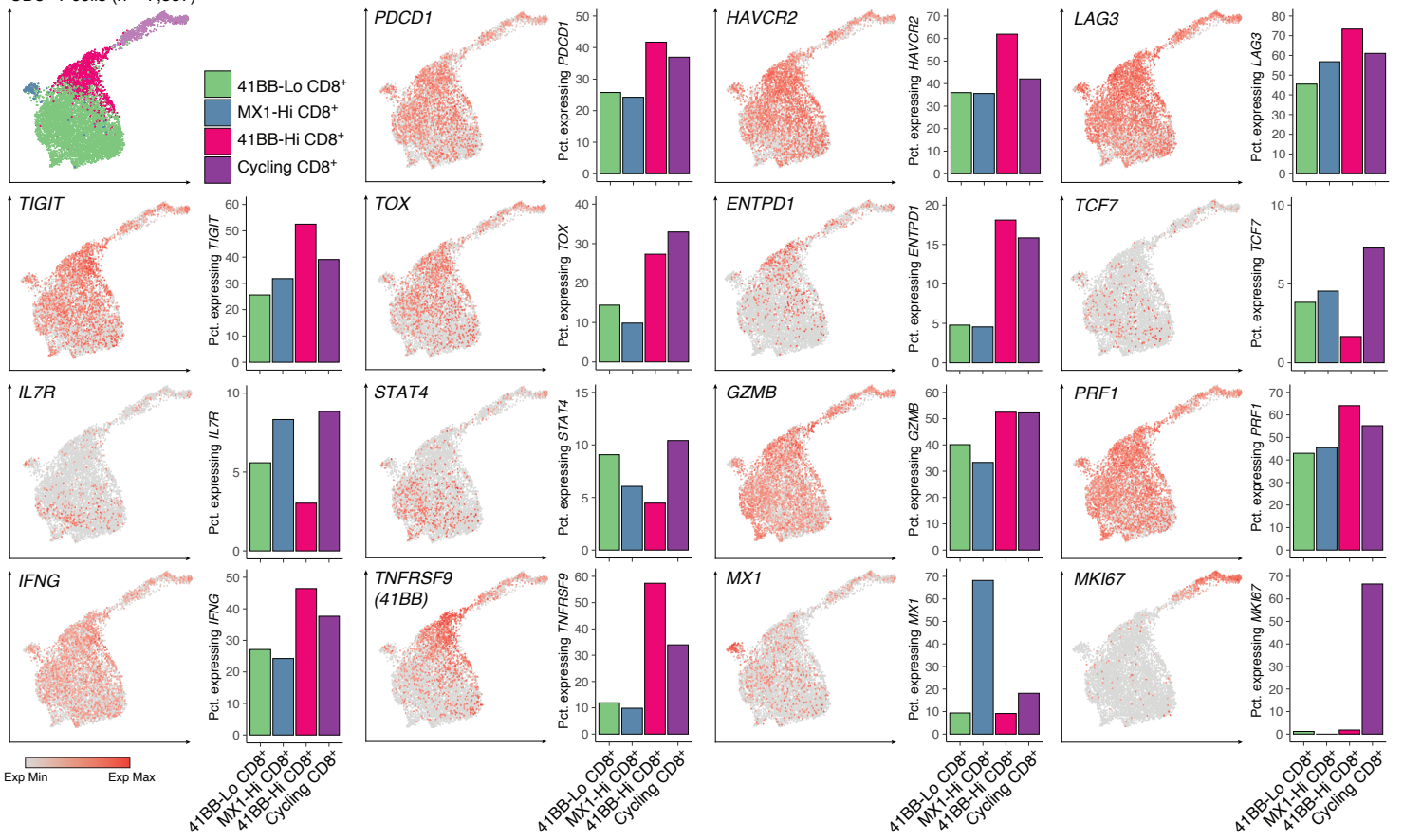




Figure S2

C

CD8<sup>+</sup> T cells (n = 7,557)



**Figure S2. Metadata and marker expression for all lymphoid cells and CD8<sup>+</sup> T cells. Related to Figure 2.**

(A) Visualization of metadata and associated cell type proportions across lymphoid cells.

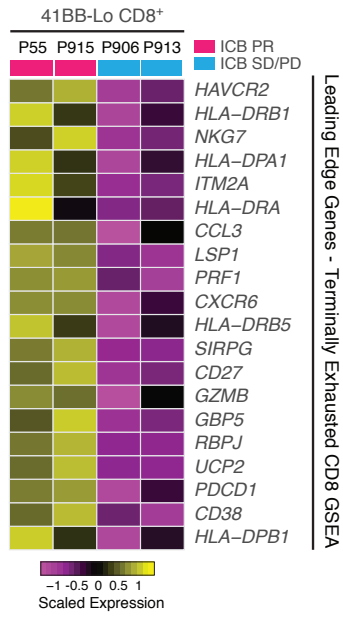
(B) Expression heatmaps in UMAP projection space of genes encoding cell type and phenotype markers across lymphoid clusters. MitoHigh cells are omitted.

(C) Expression heatmaps in UMAP projection space of genes encoding co-inhibitory receptors, progenitor and terminal exhaustion markers, effector molecules, and cluster-specific genes across CD8<sup>+</sup> T cell clusters. Bar plots quantify the percentage of cells in each cluster expressing a given gene.

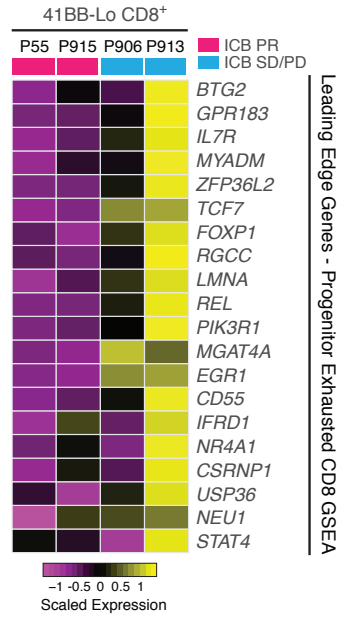


Figure S3

F



G



### Figure S3. Transcriptional characteristics of Progenitor and Terminally Exhausted CD8<sup>+</sup> T cells.

#### Related to Figure 2.

(A) Progenitor exhausted signature score versus terminally exhausted signature score for all CD8<sup>+</sup> T cells (n = 7,557), points colored by expression of genes of interest.

(B) Progenitor exhausted signature score versus terminally exhausted signature score for all CD8<sup>+</sup> T cells (n = 7,557), points colored by CD8<sup>+</sup> T cell cluster identity. Progenitor Exhausted and Terminally Exhausted Cells called based on mutually exclusive high/low signature scores. Percentage of total CD8<sup>+</sup> T cell is shown for each quadrant.

(C) Progenitor exhausted signature score versus terminally exhausted signature score for all CD8<sup>+</sup> T cells (n = 7,557), points colored by ICB response group.

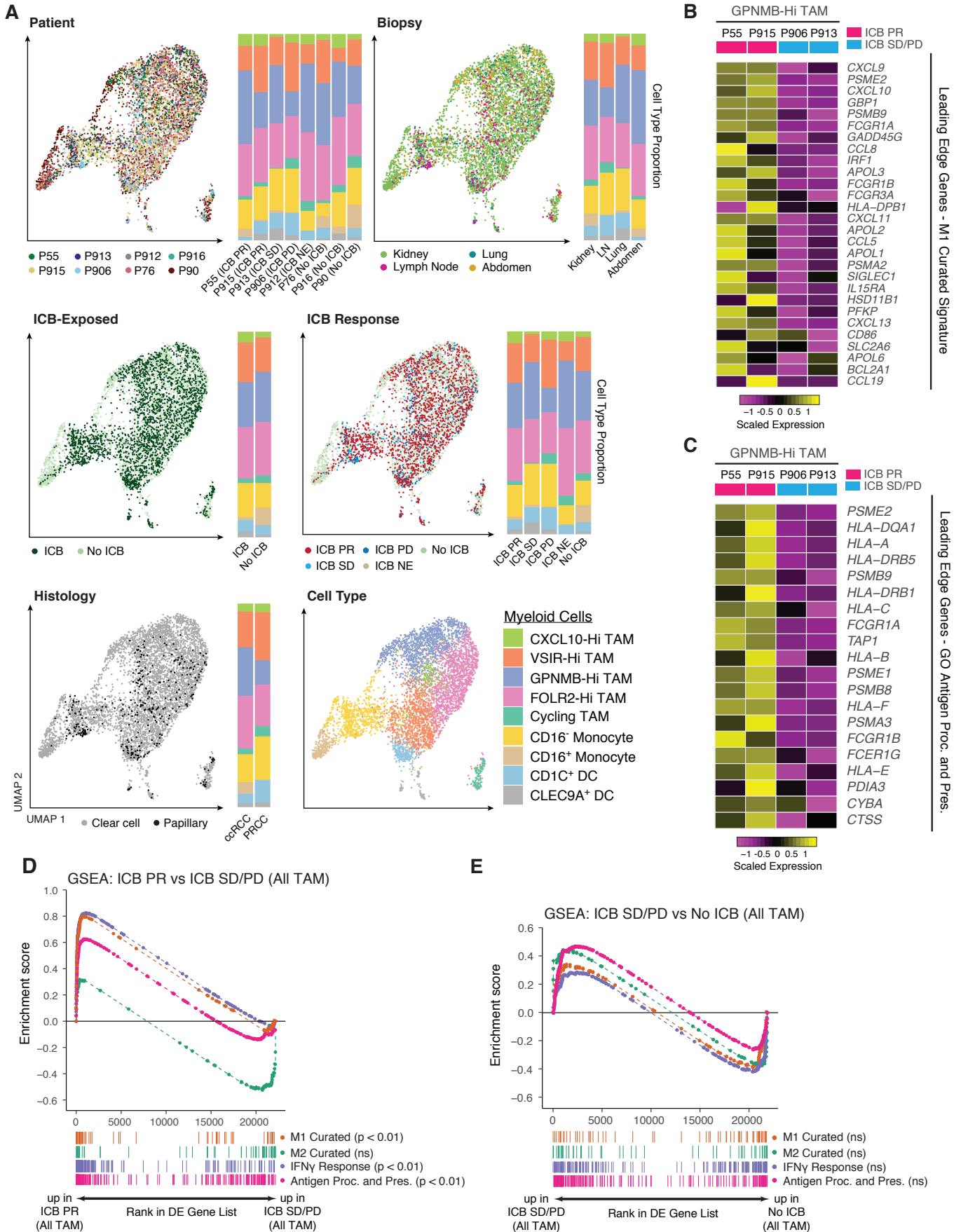
(D) Heatmap of scaled, normalized counts averaged within patients for genes differentially expressed between 4-1BB-Lo CD8<sup>+</sup> T cells from ICB PR and ICB SD/PD samples. Effector molecules and co-inhibitory receptors are uniformly upregulated in responding patients, while progenitor exhausted markers, including *TCF7*, are upregulated in non-responding patients.

(E) GSEA of progenitor and terminally exhausted signatures in only Progenitor Exhausted Cells from ICB PR patients compared to ICB SD/PD patients. Key leading edge genes are labeled.

(F) Heatmap of scaled, normalized counts averaged within patients for leading edge genes in GSEA of the terminally exhausted signature in 4-1BB-Lo CD8<sup>+</sup> T cells from ICB PR patients compared to ICB SD/PD patients.

(G) Heatmap of scaled, normalized counts averaged within patients for leading edge genes in GSEA of the progenitor exhausted signature in 4-1BB-Lo CD8<sup>+</sup> T cells from ICB PR patients compared to ICB SD/PD patients.

**Figure S4**





**Figure S4. Metadata for all myeloid cells and differential gene expression programs in tumor associated macrophages. Related to Figure 3.**

(A) Visualization of metadata and associated cell type proportions across myeloid cells.

(B) Heatmap of scaled normalized counts averaged within patients for leading edge genes in GSEA of the M1 Curated signature in GPNMB-Hi TAM from ICB PR patients compared to ICB SD/PD patients.

(C) Heatmap of scaled normalized counts averaged within patients for leading edge genes in GSEA of the GO Antigen Presentation and Processing signature in GPNMB-Hi TAM from ICB PR patients compared to ICB SD/PD patients.

(D) GSEA of M1 Curated, M2 Curated, Hallmark Interferon Gamma Response, and GO Antigen Presentation and Processing via MHC class I signatures in all TAM from ICB PR patients compared to ICB SD/PD patients.

(E) GSEA of M1 Curated, M2 Curated, Hallmark Interferon Gamma Response, and GO Antigen Presentation and Processing via MHC class I signatures in all TAM from ICB SD/PD patients compared to ICB-naive patients.

\*ns: not significant

Figure S5

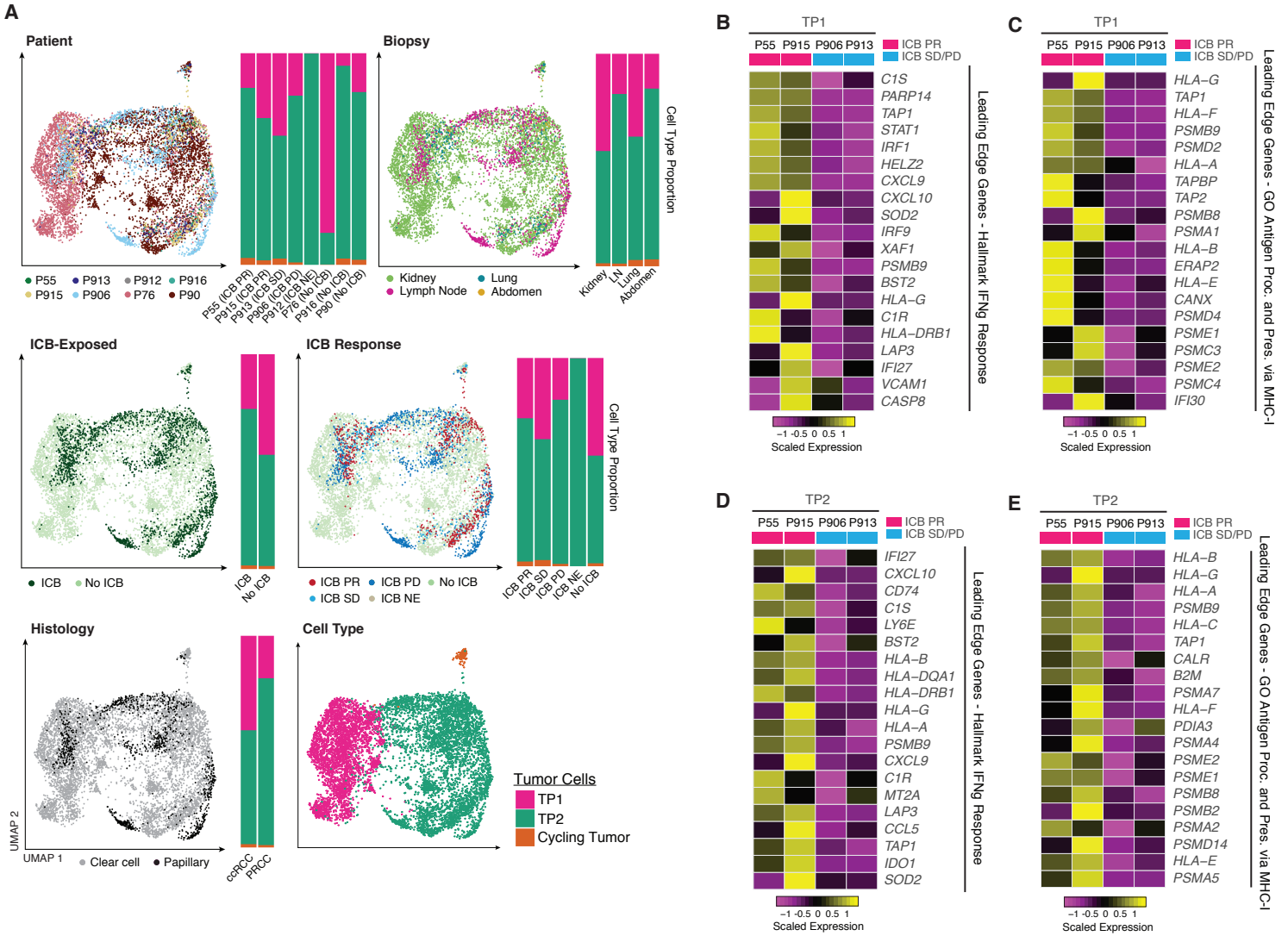
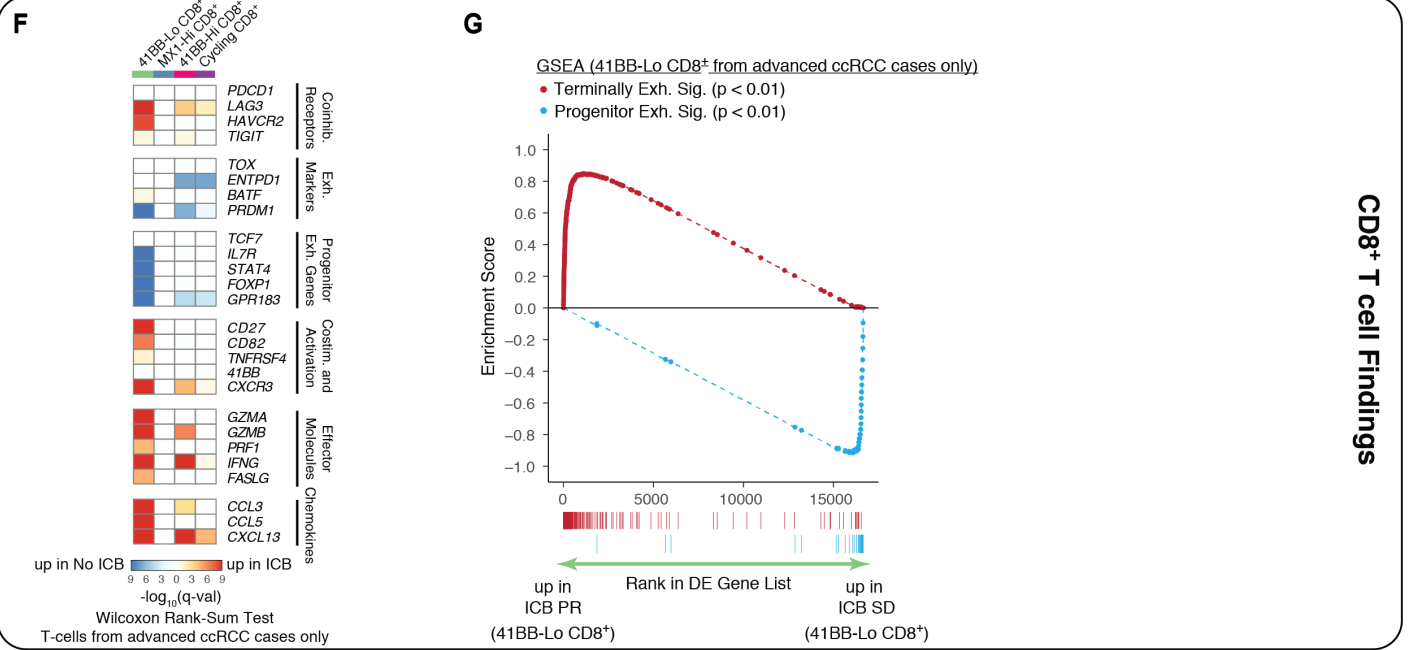
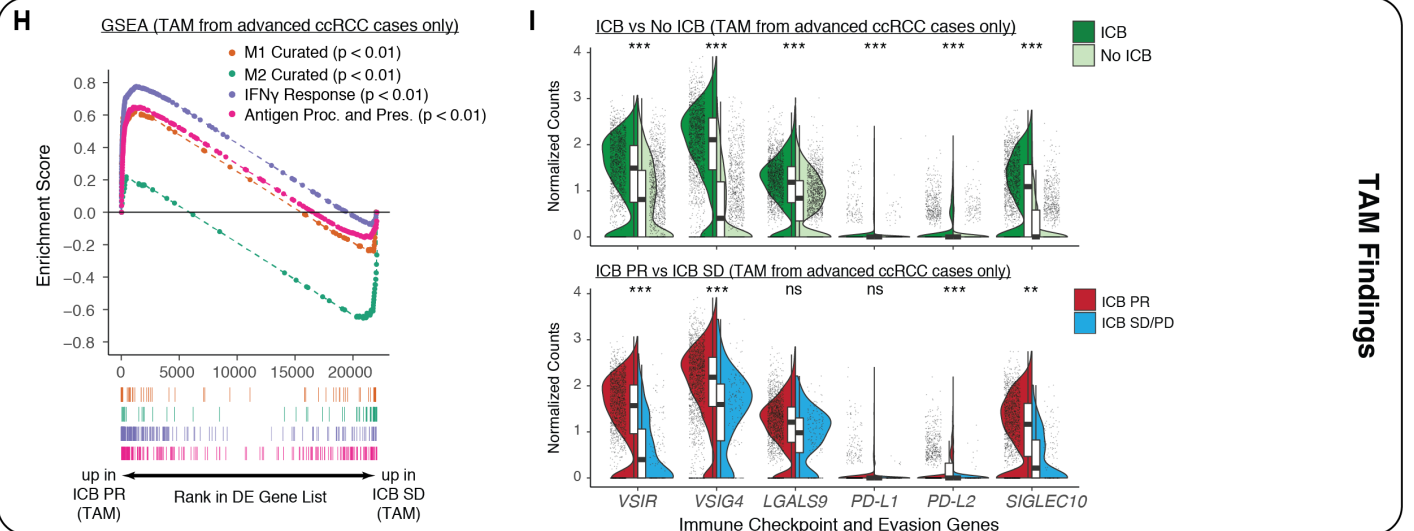


Figure S5

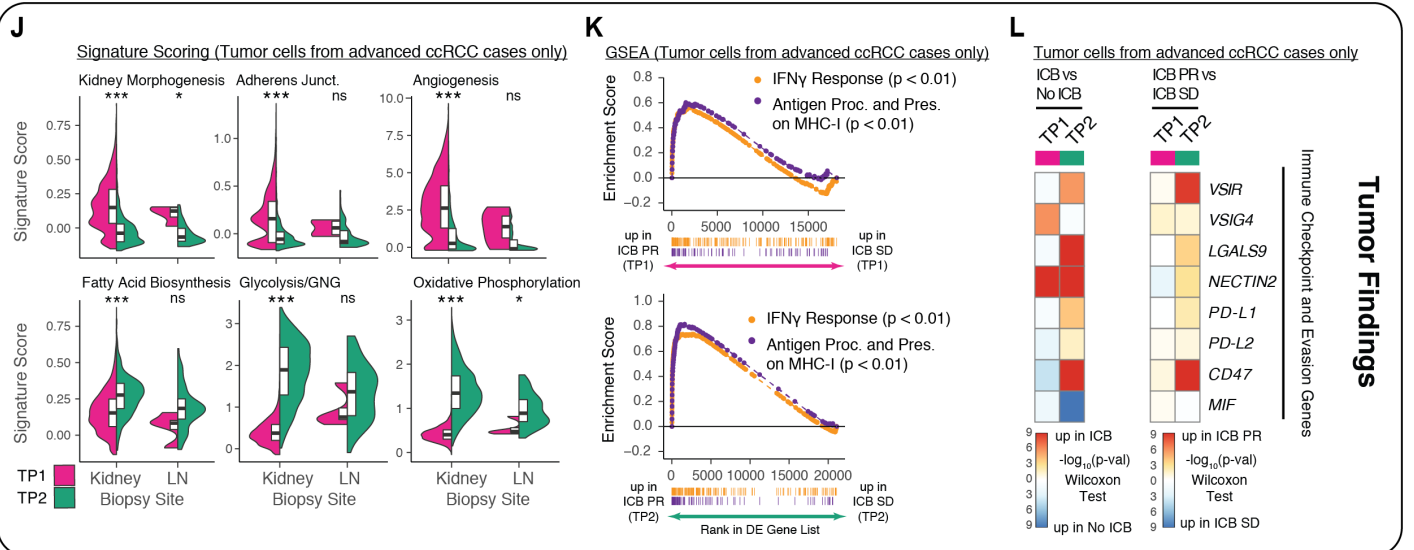
Advanced ccRCC cases only (n = 6)



CD8<sup>+</sup> T cell Findings



TAM Findings



Tumor Findings

**Figure S5. Metadata and differential gene expression programs for tumor cells. Analysis showing reproducibility of main findings in CD8<sup>+</sup> T cell, TAM, and tumor compartments when single cell cohort subsetted to include only stage IV lesions of clear cell histology (n = 6). Related to Figure 4.**

(A) Visualization of metadata and associated cell type proportions across tumor cells.

(B) Heatmap of scaled normalized counts averaged within patients for leading edge genes in GSEA of the Hallmark Interferon Gamma Response signature in TP1 cells from ICB PR patients compared to ICB SD/PD patients.

(C) Heatmap of scaled normalized counts averaged within patients for leading edge genes in GSEA of the GO Antigen Presentation and Processing via MHC-I signature in TP1 cells from ICB PR patients compared to ICB SD/PD patients.

(D) Heatmap of scaled normalized counts averaged within patients for leading edge genes in GSEA of the Hallmark Interferon Gamma Response signature in TP2 cells from ICB PR patients compared to ICB SD/PD patients.

(E) Heatmap of scaled normalized counts averaged within patients for leading edge genes in GSEA of the GO Antigen Presentation and Processing via MHC-I signature in TP2 cells from ICB PR patients compared to ICB SD/PD patients. (J) Heatmap of differential gene expression q-values (two-sided Wilcoxon rank-sum test with Bonferroni FDR correction) for comparisons of cells within each CD8<sup>+</sup> T cell cluster from ICB-exposed vs. ICB-naïve patients (advanced ccRCC cases only).

(F) Heatmap of differential gene expression q-values (two-sided Wilcoxon rank-sum test with Bonferroni FDR correction) for comparisons of cells within each CD8<sup>+</sup> T cell cluster from ICB-exposed vs. ICB-naïve patients (advanced ccRCC cases only).

(G) Gene set enrichment analysis (GSEA) of terminally exhausted and progenitor exhausted signatures in 4-1BB-Lo CD8<sup>+</sup> T cells from ICB PR compared to ICB SD patients (advanced ccRCC cases only).

(H) GSEA of M1 Curated, M2 Curated, Hallmark Interferon Gamma Response, and GO Antigen Presentation and Processing via MHC class I signatures in all TAM from ICB PR compared to ICB SD patients (advanced ccRCC cases only).

(I) Violin and box plots comparing expression distributions of immune checkpoint and evasion genes between all TAM from ICB-exposed vs ICB-naïve patients (top) and ICB PR vs ICB SD patients (bottom) (advanced

ccRCC cases only). Significance of differential expression (q-value) was determined by two-sided Wilcoxon rank-sum test with Bonferroni FDR correction. Box plots include center line, median; box limits, upper and lower quartiles; whiskers extend at most 1.5× interquartile range past upper and lower quartiles.

(J) Violin and box plots comparing single cell signature score distributions between the two dominant malignant cell clusters, partitioned by biopsy site (advanced ccRCC cases only). Significance of differential signature enrichment (p-value) was determined by two-sided Wilcoxon rank-sum test. Box plots include center line, median; box limits, upper and lower quartiles; whiskers extend at most 1.5× interquartile range past upper and lower quartiles.

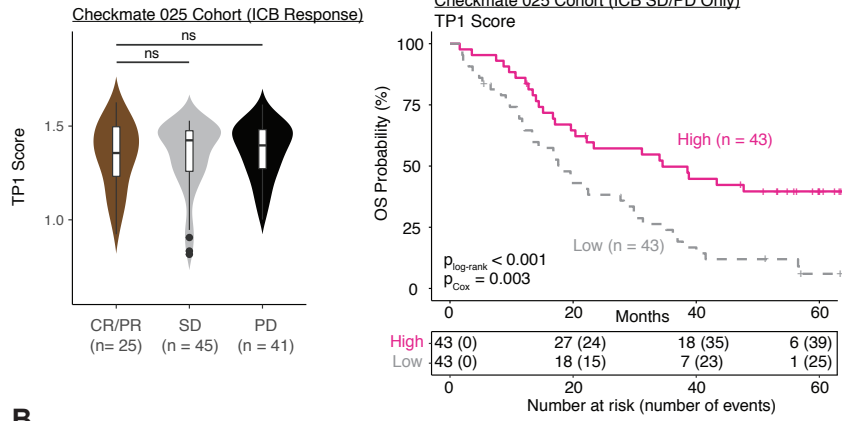
(K) GSEA of Hallmark Interferon Gamma Response and GO Antigen Presentation and Processing via MHC class I signatures in TP1 cells from ICB PR patients compared to ICB SD patients (top) and TP2 cells from ICB PR patients compared to ICB SD patients (bottom) (advanced ccRCC cases only).

(L) Heatmap of differential expression q-values (two-sided Wilcoxon rank-sum test with Bonferroni FDR correction) for immune checkpoint and evasion genes in comparisons of cells within each cluster from ICB-exposed vs ICB-naïve patients (left) and ICB PR vs ICB SD patients (right) (advanced ccRCC cases only).

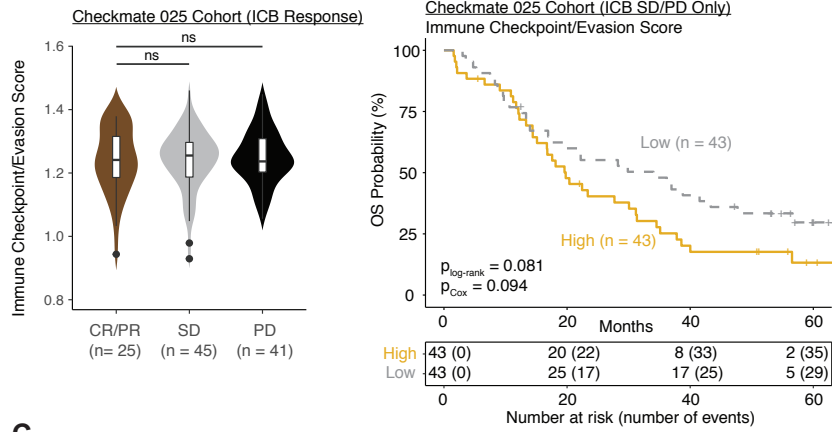
\*ns: not significant

**Figure S6**

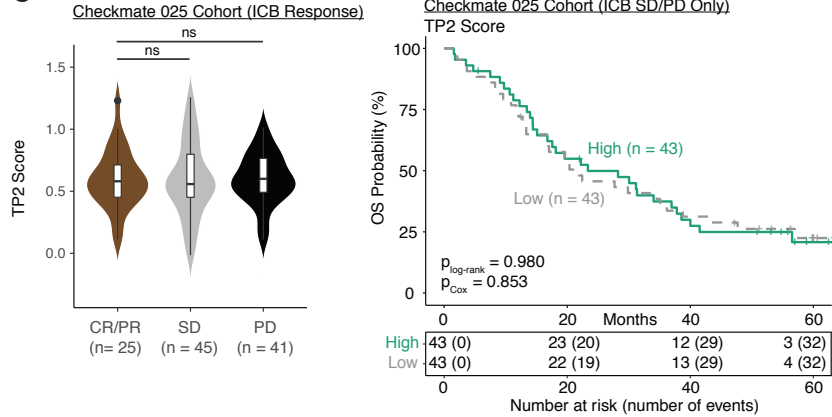
**A**



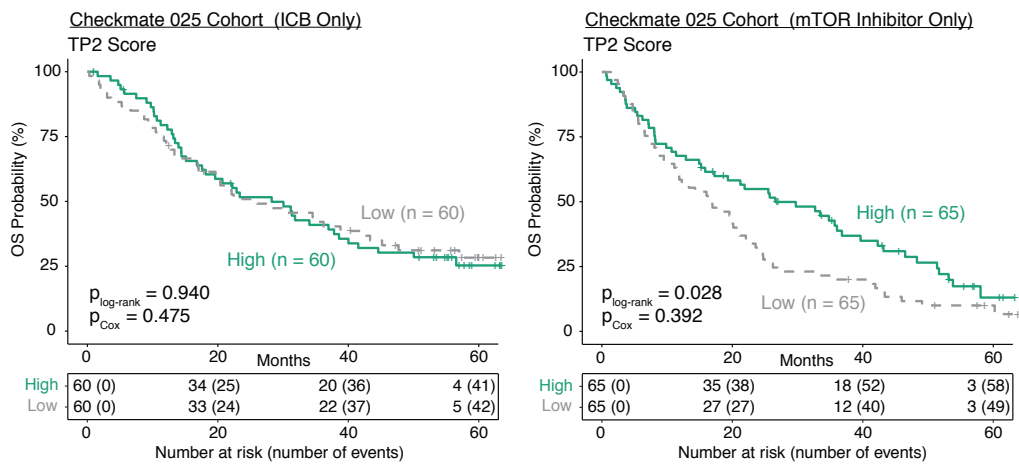
**B**



**C**



**D**





**Figure S6**

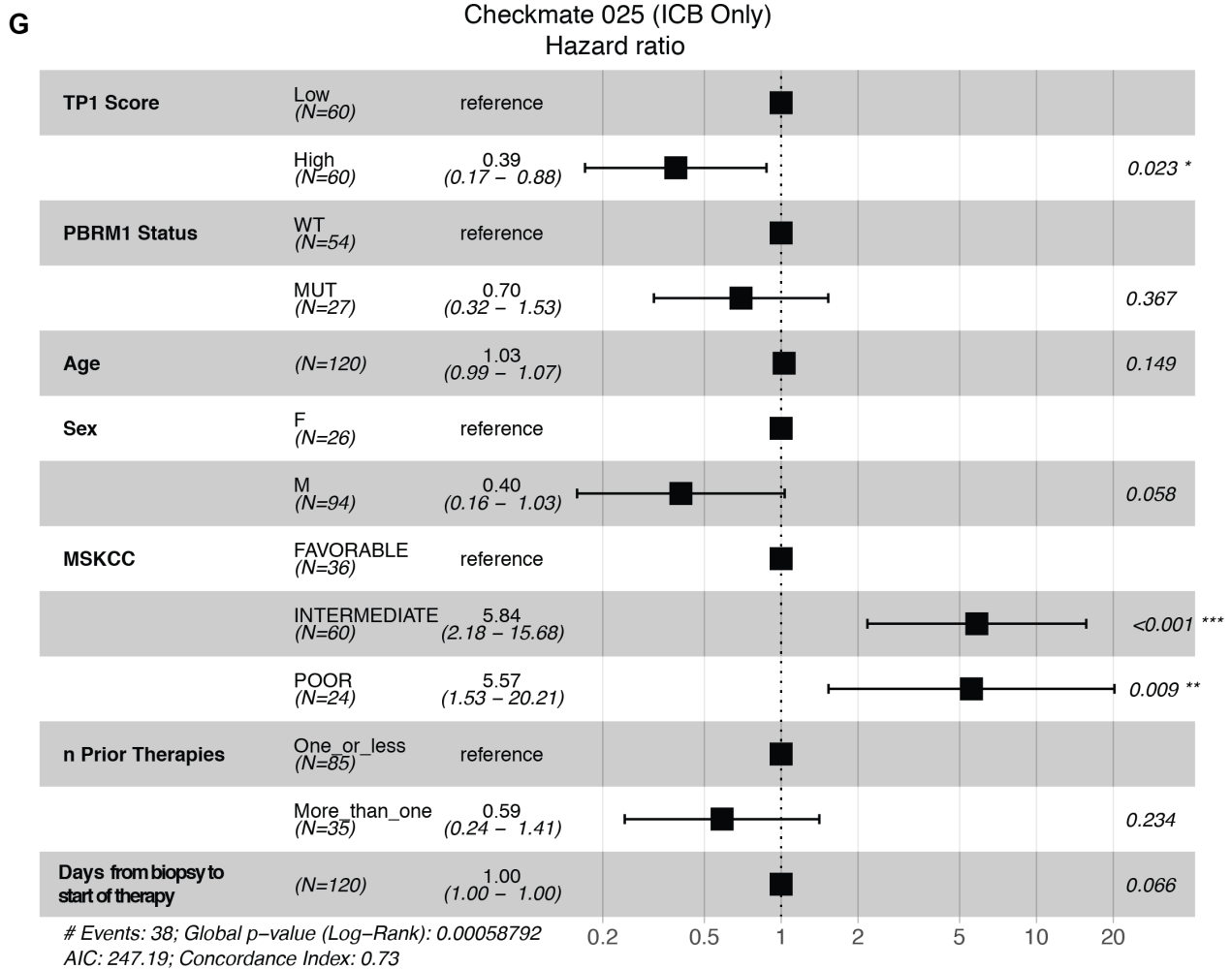
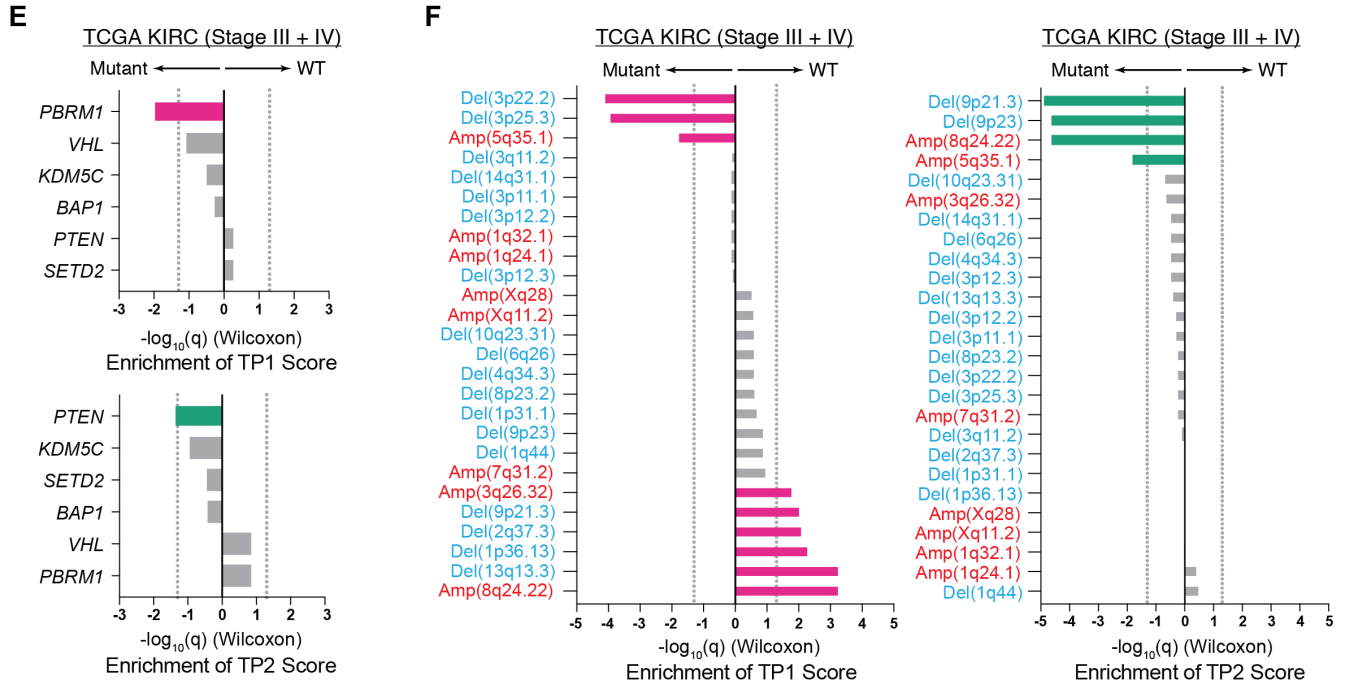
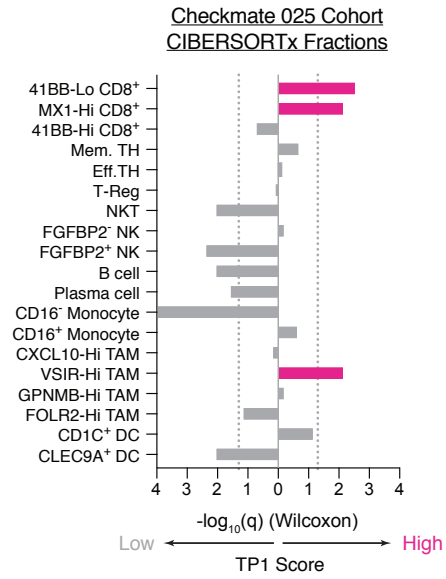
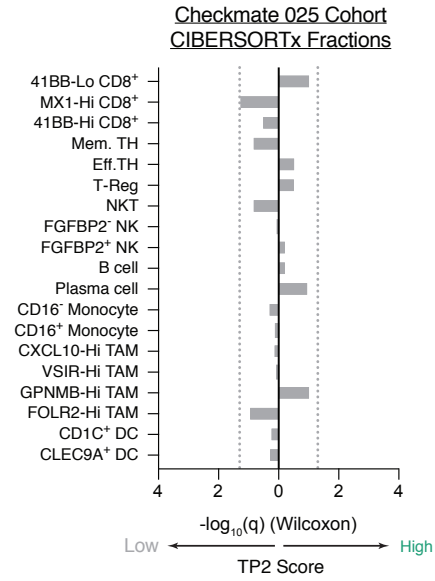


Figure S6

H



I



**Figure S6. Extended clinical and mutational analysis of bulk RNA-Seq samples in the Checkmate 025 RCC cohort. Related to Figure 5.**

(A) On left, violin and box plots showing distributions of TP1 score within CR/PR, SD, and PD response groups in the ICB arm of the Checkmate 025 RCC cohort. Significance of differential signature enrichment (p-value) was determined by two-sided Wilcoxon rank-sum test. On right, Kaplan-Meier analysis of overall survival (OS) in only the SD and PD response groups of Checkmate 025, with patients separated by high and low TP1 score in bulk RNA-seq. Box plots include center line, median; box limits, upper and lower quartiles; whiskers extend at most 1.5× interquartile range past upper and lower quartiles.

(B) On left, violin and box plots showing distributions of Immune Checkpoint/Evasion score within CR/PR, SD, and PD response groups in the ICB arm of the Checkmate 025 RCC cohort. Significance of differential signature enrichment (p-value) was determined by two-sided Wilcoxon rank-sum test. On right, Kaplan-Meier analysis of overall survival (OS) in only the SD and PD response groups of Checkmate 025, with patients separated by high and low Immune Checkpoint/Evasion score in bulk RNA-seq. Box plots include center line, median; box limits, upper and lower quartiles; whiskers extend at most 1.5× interquartile range past upper and lower quartiles.

(C) On left, violin and box plots showing distributions of TP2 score within CR/PR, SD, and PD response groups in the ICB arm of the Checkmate 025 RCC cohort. Significance of differential signature enrichment (p-value) was determined by two-sided Wilcoxon rank-sum test. On right, Kaplan-Meier analysis of overall survival (OS) in only the SD and PD response groups of Checkmate 025, with patients separated by high and low TP2 score in bulk RNA-seq. Box plots include center line, median; box limits, upper and lower quartiles; whiskers extend at most 1.5× interquartile range past upper and lower quartiles.

(D) Kaplan-Meier analysis of overall survival (OS) in the Checkmate 025 RCC cohort, with patients separated by high and low TP2 score in bulk RNA-seq.  $P_{log-rank}$ , log-rank test p-value.  $P_{Cox}$ , p-value determined via a multivariate Cox proportional hazard model using TP2 score dichotomized within treatment arm and incorporating age, sex, MSKCC risk group, prior lines of therapy ( $\leq 1$  or  $\geq 2$ ), and days between biopsy collection and start of trial therapy as covariates.

(E) Bar plots comparing TP1 and TP2 score between mutant and wild-type samples for commonly mutated genes in the TCGA KIRC cohort (Stage III and IV tumors only). Only variants with predicted high impact

Ensembl Sequence Ontology were considered. Significance of differential score enrichment (q-value) determined by two-sided Wilcoxon rank-sum test with Benjamini-Hochberg FDR correction.

(F) Bar plots comparing TP1 and TP2 score between mutant and wild-type samples for common copy number alterations in the TCGA KIRC cohort (Stage III and IV tumors only). Significance of differential score enrichment (q-value) determined by two-sided Wilcoxon rank-sum test with Benjamini-Hochberg FDR correction.

(G) Forest plot showing hazard ratios associated with variables in a multivariate Cox proportional hazard model for OS in the ICB arm of Checkmate 025, incorporating TP1 Score, PBRM1 mutational status, age, sex, MSKCC risk group, prior lines of therapy ( $\leq 1$  or  $\geq 2$ ), and days between biopsy collection and start of trial therapy as covariates.

(H) Bar plots comparing CIBERSORTx-inferred immune population frequencies between Checkmate 025 RCC tumors with high and low TP1 Tumor Program Scores. CIBERSORTx signature matrix was derived from transcriptional profiles of lymphoid and myeloid subsets captured in our cohort. Significance of differential population frequencies (q-value) determined by two-sided Wilcoxon rank-sum test with Benjamini-Hochberg FDR correction. Gray dotted line corresponds to  $q = 0.05$ .

(I) Bar plots comparing CIBERSORTx-inferred immune population frequencies between Checkmate 025 RCC tumors with high and low TP2 Tumor Program Scores. CIBERSORTx signature matrix was derived from transcriptional profiles of lymphoid and myeloid subsets captured in our cohort. Significance of differential population frequencies (q-value) determined by two-sided Wilcoxon rank-sum test with Benjamini-Hochberg FDR correction. Gray dotted line corresponds to  $q = 0.05$ .