522 Variables. Fisher's Exact Tests were used to compare two categorical variables, Mann-523 Whitney/Kruskal-Wallis tests were used to compare Categorical vs. numerical variables, and 524 Spearman tests were used to compare two numerical variables. P values are indicated in each 525 cell, and tests with p < 0.05 are highlighted in black text 526 527 Supplementary Figure 2. Effects of Donor Type and Conditioning Intensity on the T-cell Repertoire A. Effect of Donor type on the T-cell repertoire post-transplant. Only subjects with 528 529 matched related donors (MRD) and matched unrelated donors (MUD) are shown, as there were 530 only 6 mismatched unrelated donors, and 3 mismatched related donors. * p < 0.05 by Mann-531 Whitney-U test. **B.** Effect of conditioning intensity on the T-cell repertoire post-transplant. * p < 532 0.05 by Mann-Whitney-U test. 533 534 Supplementary Figure 3. Cumulative incidence of acute GVHD stratified by clonal

expansion and additional clinical metrics A. Cumulative incidence of acute GVHD stratified

Supplementary Figure 1. Associations between T-cell Repertoire Metrics and Clinical

520521

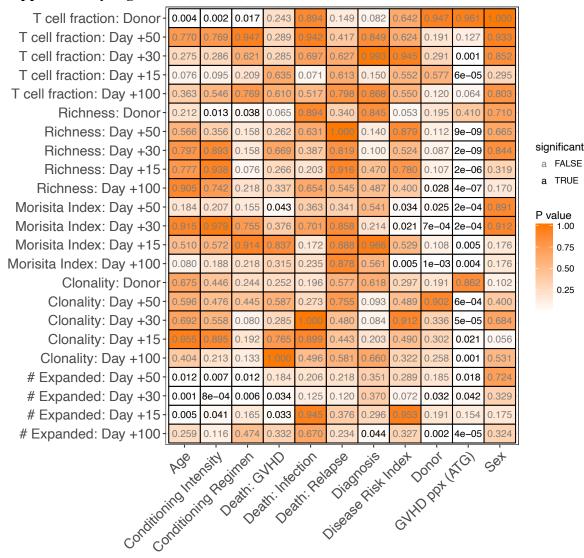
- by clonal expansion (high, greater than the median; low, less than the median) and use of ATG.
 B. Cumulative incidence of acute GVHD stratified by clonal expansion (high, greater than the
 median; low, less than the median) and conditioning intensity C. Cumulative incidence of acute
 GVHD stratified by clonal expansion (high, greater than the median; low, less than the median)
 and donor type (MRD = matched related donor; MUD = matched unrelated donor)
- Supplementary Figure 4. Association of clinical and immunoSEQ metrics with overall
 survival A. immunoSEQ and clinical variables with single variable Cox Regression P < 0.2 are
 shown. 95% confidence intervals are shown.

541

545

- Supplementary Figure 5. Other associations with transplant outcome A. Kaplan Meier curve of overall survival stratified by richness at Day +30 (high, greater than the median; low, less than the median) and use of ATG. B. Kaplan Meier Curve of overall survival stratified by richness at Day +30 (high, greater than the median; low, less than the median) after removing subjects given ATG.
- 552 Supplementary Figure 6. Association of CMV reactivation with TCR repertoire changes.
 553 A) TCR repertoire metrics and clinical variables with single variable Cox Regression p < 0.2 are
 554 shown with 95% confidence interval for association of CMV reactivation before day +150. B)
 555 Cumulative incidence curve of time to CMV reactivation stratified by high (above the median)
 556 and low (below the median) C) Productive clonality at various time points stratified by CMV
 557 reactivation status.

575 **Supplementary Figure 1.**



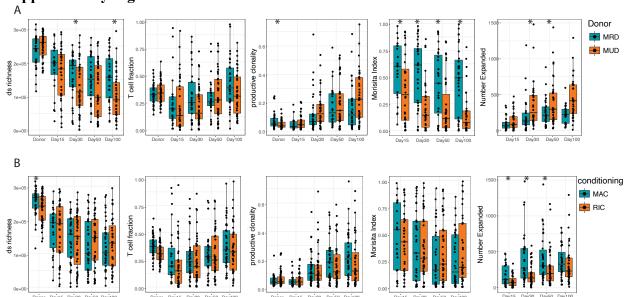
1.00

0.75

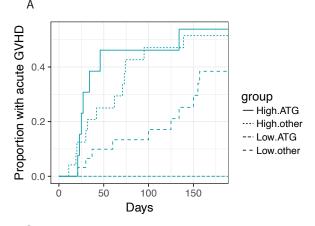
0.50

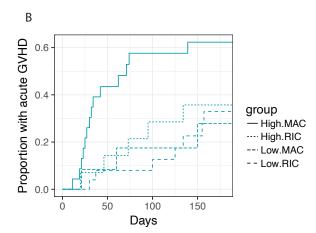
0.25

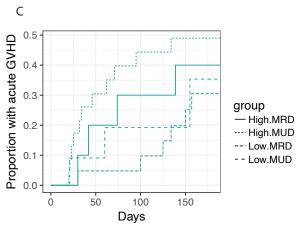
Supplementary Figure 2.



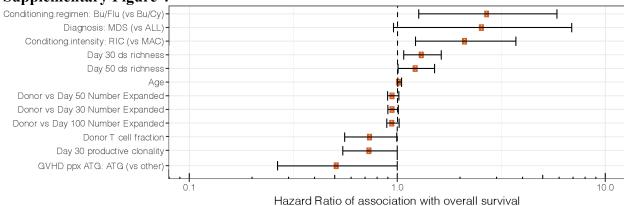
Supplementary Figure 3.



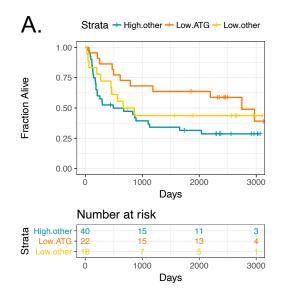


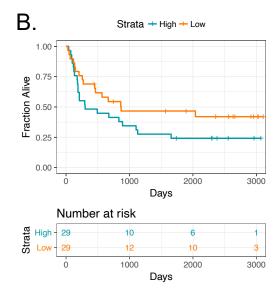


586 Supplementary Figure 4

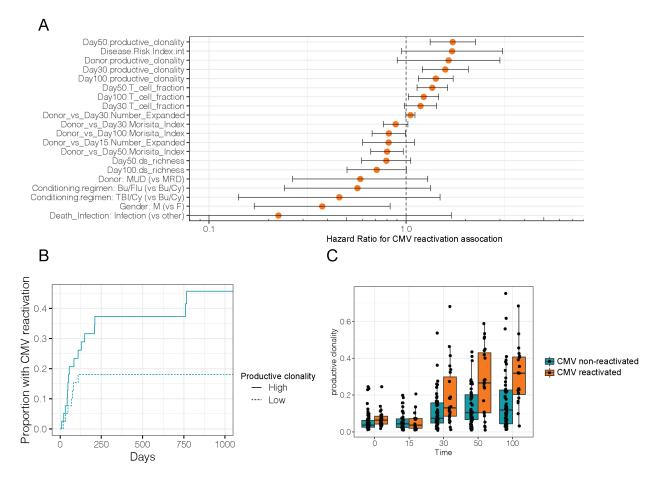


589 Supplementary Figure 5





Supplementary Figure 6



Supplementary Data

606 1. Definitions

Clonality

603 604

605

607 608

615

619

627

633634635

637

640 641

- 609 Clonality was defined as 1–Peilou's eveness¹². Clonality was calculated on productive 610 rearrangements by:
- 611 clonality = $1 + \frac{\sum_{i=1}^{N} p_i log_2(p_i)}{log_2(N)}$ 612
- where p_i is the proportional abundance of rearrangement i and N is the total number of rearrangements.

Number of Expanded Clones Compared to Donor

- A standard binomial two-sided test of the null hypothesis that the probability of success in a
- Bernoulli experiment is p is computed for each clone. In this framework:
- 620 $\Pr(X = k) = \binom{n}{k} p^k (1 p)^{n-k}$
- 621 $p = \frac{N1}{N1 + N2}$ (probability of success)
- N1 = Total templates in sample 1
- N2 = Total templates in sample 2
- k = Number of templates of the given clone in sample 1 (number of successes)
- n2 = Number of templates of the given clone in sample 2
- 626 n = k + n2 (number of trials)

Clones passing a Benjamini-Hochberg multiple test correction at α =0.01 are considered significantly expanded or contracted, depending on whether they have a higher frequency in the post-transplant sample compared to the donor. The number of expanded clones was simply the number of all significant clones at a higher frequency in the post-transplant sample compared to the donor.

Morisita's Index

Morisita's Index was defined by:

$$MI = \frac{2\sum_{i}^{S} a_{i}b_{i}}{\left(\frac{\sum_{i}^{S} a^{2}_{i} + \sum_{i}^{S} b^{2}_{i}}{A^{2}}\right)AB}$$

where a_i and b_i are the number of templates of clone i in sample A and sample B, respectively. A and B are the total number of templates in sample A and sample B, respectively.