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**Distinct transcriptional programs characterize neoantigen-specific TIL in lung cancers treated with anti-PD-1**

**Supplementary Data File 5**

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MANA-specific TCRs identified in MPR and non-MPR patients using the MANAFEST assays

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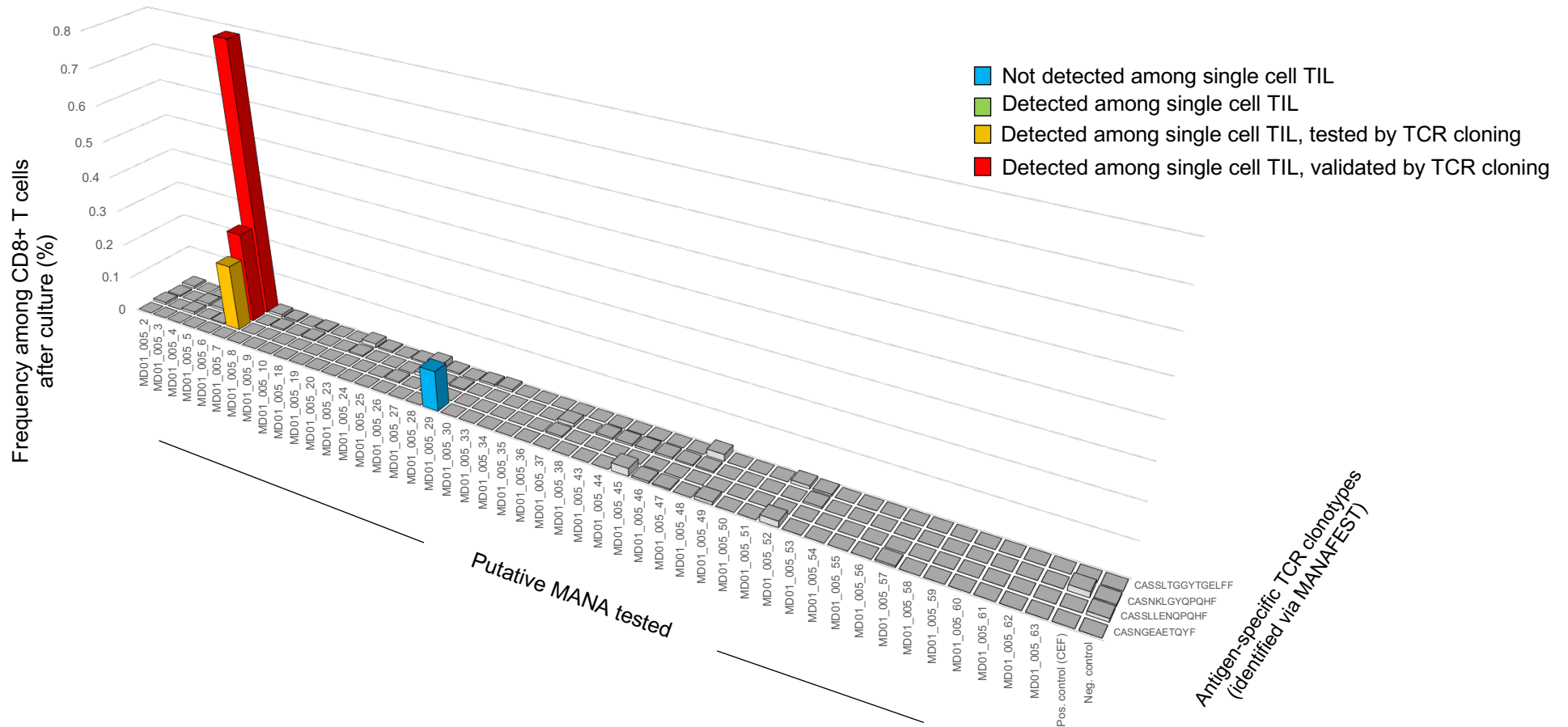
Influenza-specific TCRs identified using the ViraFEST assay

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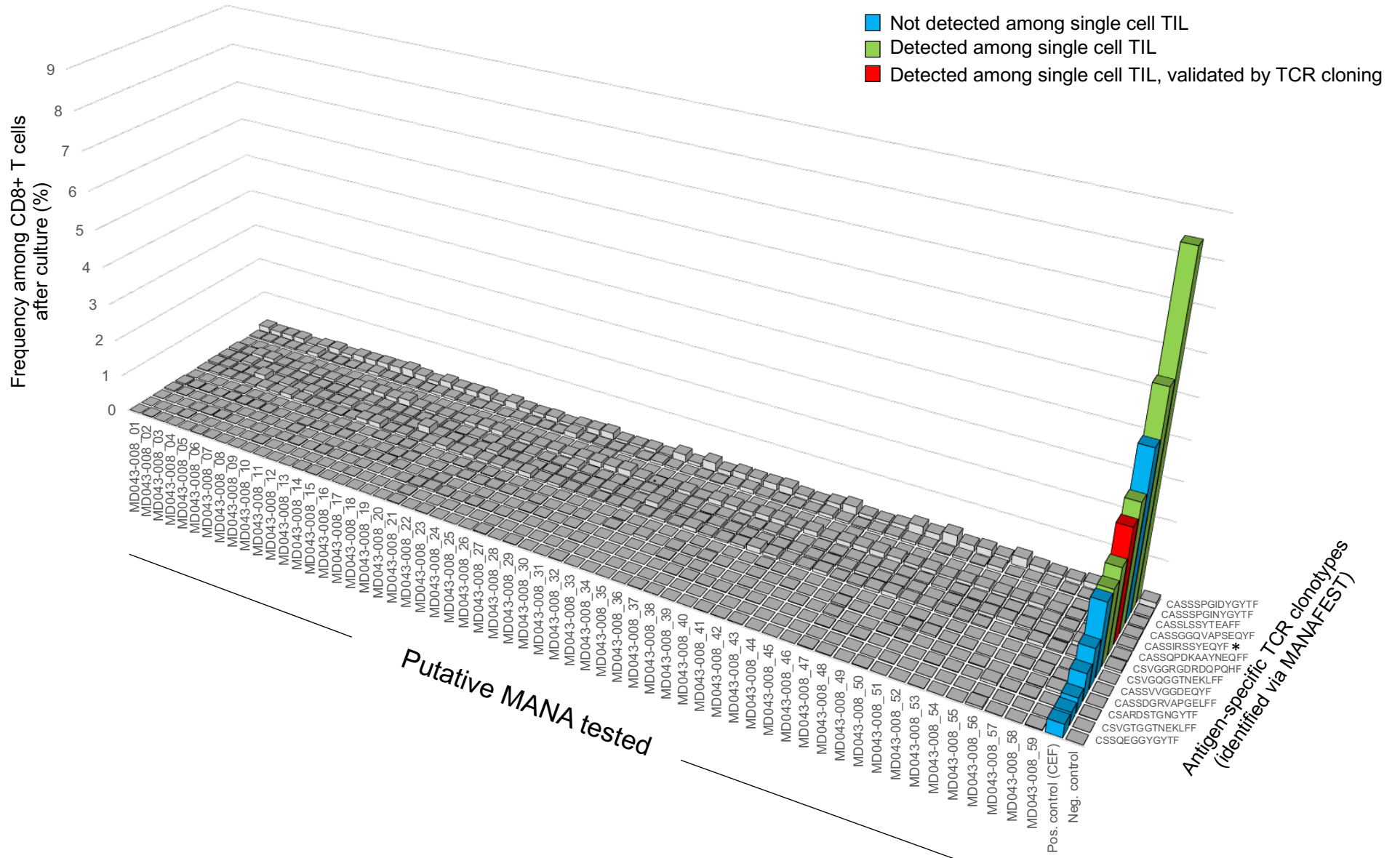
The frequency of each MANA-specific TCR V $\beta$  clonotype in each condition tested in the MANAFEST assay visualized by individual dot plots

**Supplementary Data 5.1 MANA-specific TCRs identified in MPR and non-MPR patients using the MANAFEST assays.** Antigen-specific responses identified using the MANAFEST assay are shown for MPRs MD01-005 (re-analyzed results are shown below; original results previously reported for this patient in Forde PM et al, N Engl J Med, 2018), MD043-008, MD043-003, and NY016-025. Antigen-specific responses identified using the MANAFEST assay are shown for non-MPRs MD043-011, NY016-007, and NY016-014. Each antigen-specific clonotypic expansion is color coded to indicate if the clone was not detected in the single cell data (blue), detected in the single cell data but not tested via TCR cloning (green), detected in the single cell data but did not validate with TCR cloning (orange), or detected in the single cell data and validated with TCR cloning (red). Data are shown as the percent of MANAFEST+ clonotypes among CD8+ T cells after 10 day culture. Neither MANA-specific nor CEF-specific T cell responses were detected in non-MPR patient, MD01-019. \*Clones determined to recognize CEF were queried against a database of TCRs with known specificity (vdjdb, Supplementary Table 8). Several clonotypes were previously been reported to recognize common viral epitopes used in the CEF pool. Two of these clonotypes reported to recognize the influenza A matrix protein HLA A\*02:01-restricted GILGFVFTL epitope. The full TCR corresponding to these clonotypes were cloned into the Jurkat transfer system and were validated to recognize the reported influenza antigen. Composite 3D bar plot for MD01-004 is shown in **Extended Data Fig. 2**.

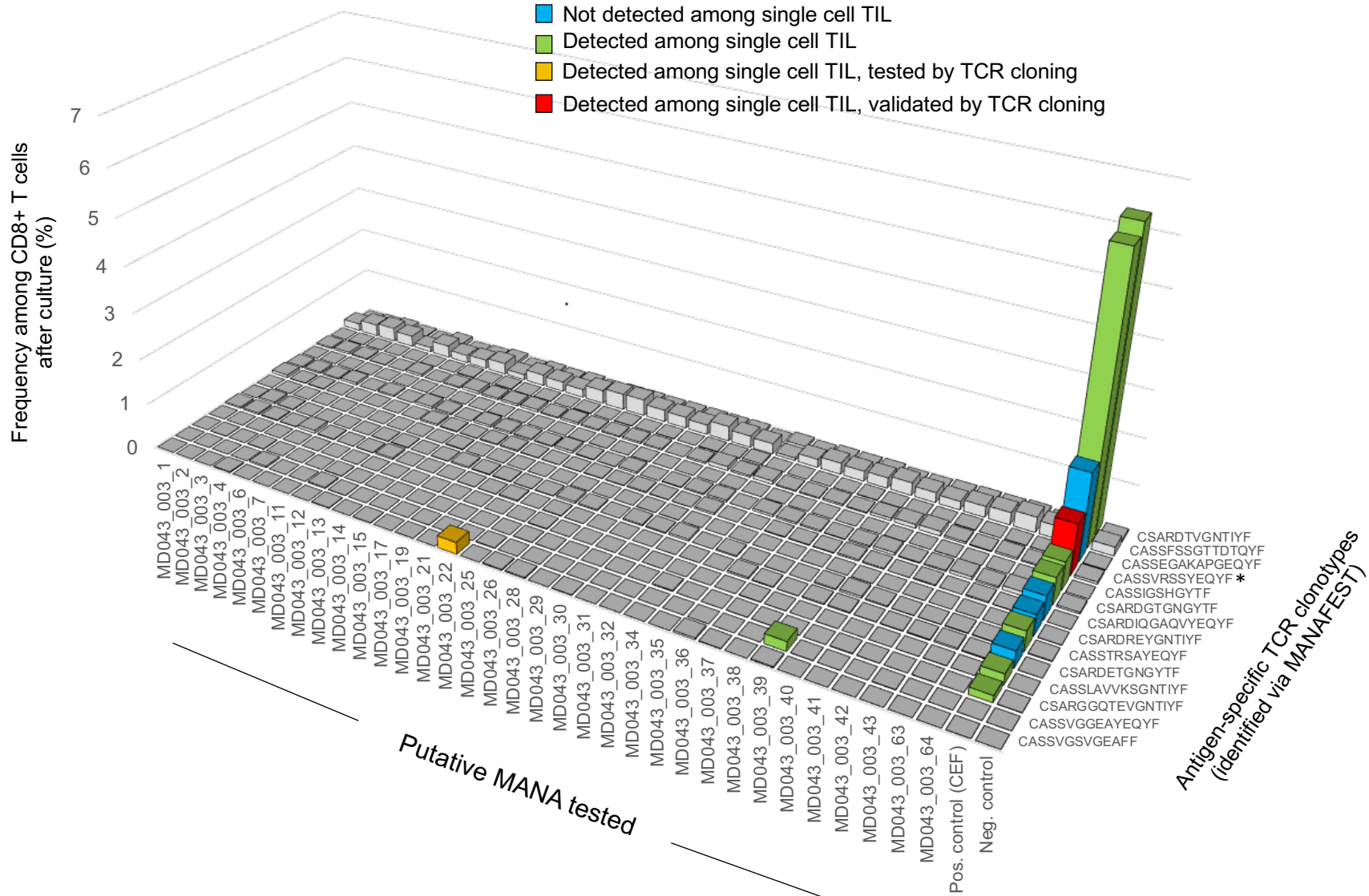
**Patient MD01-005**



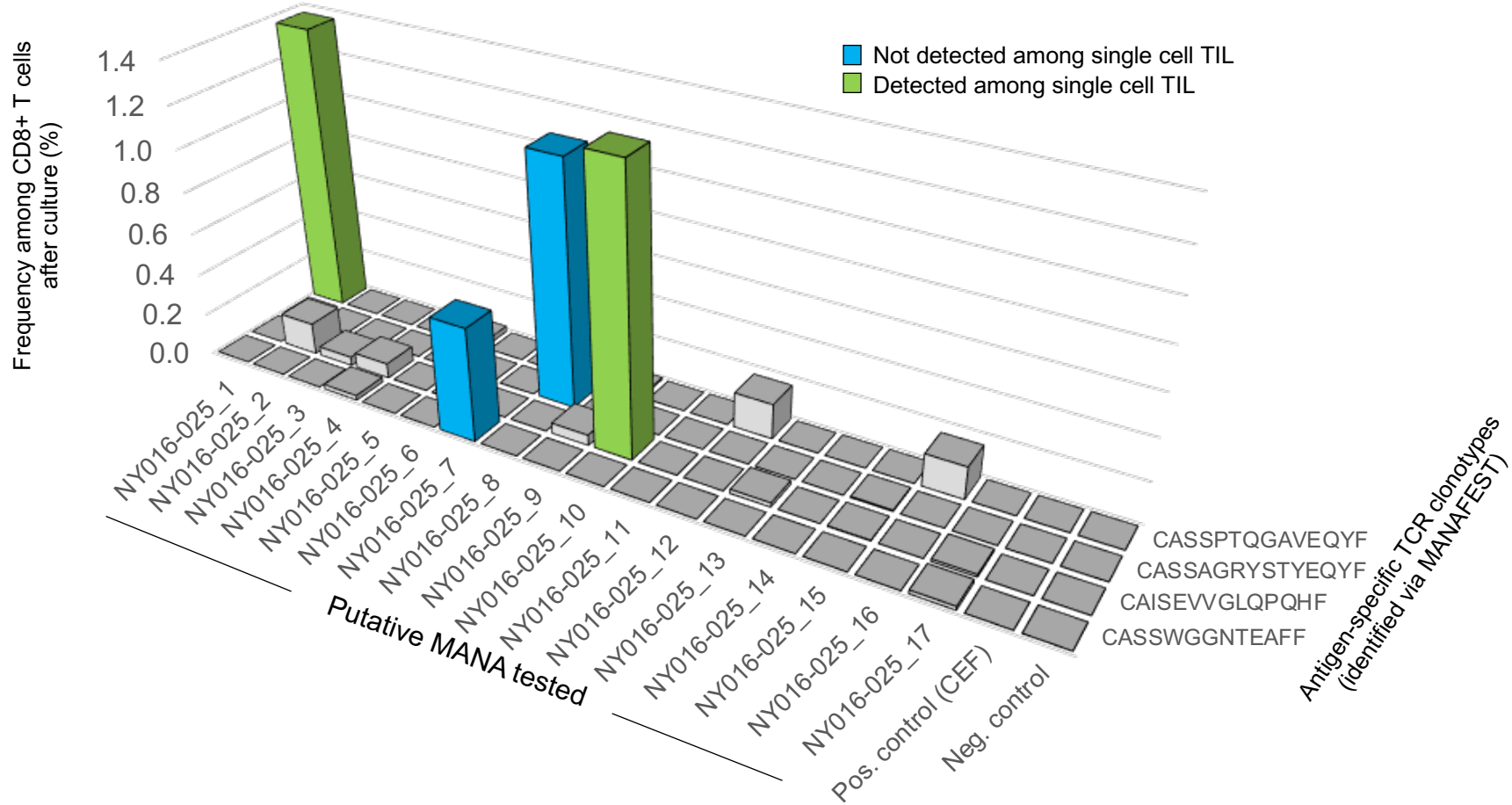
**Patient MD043-008**



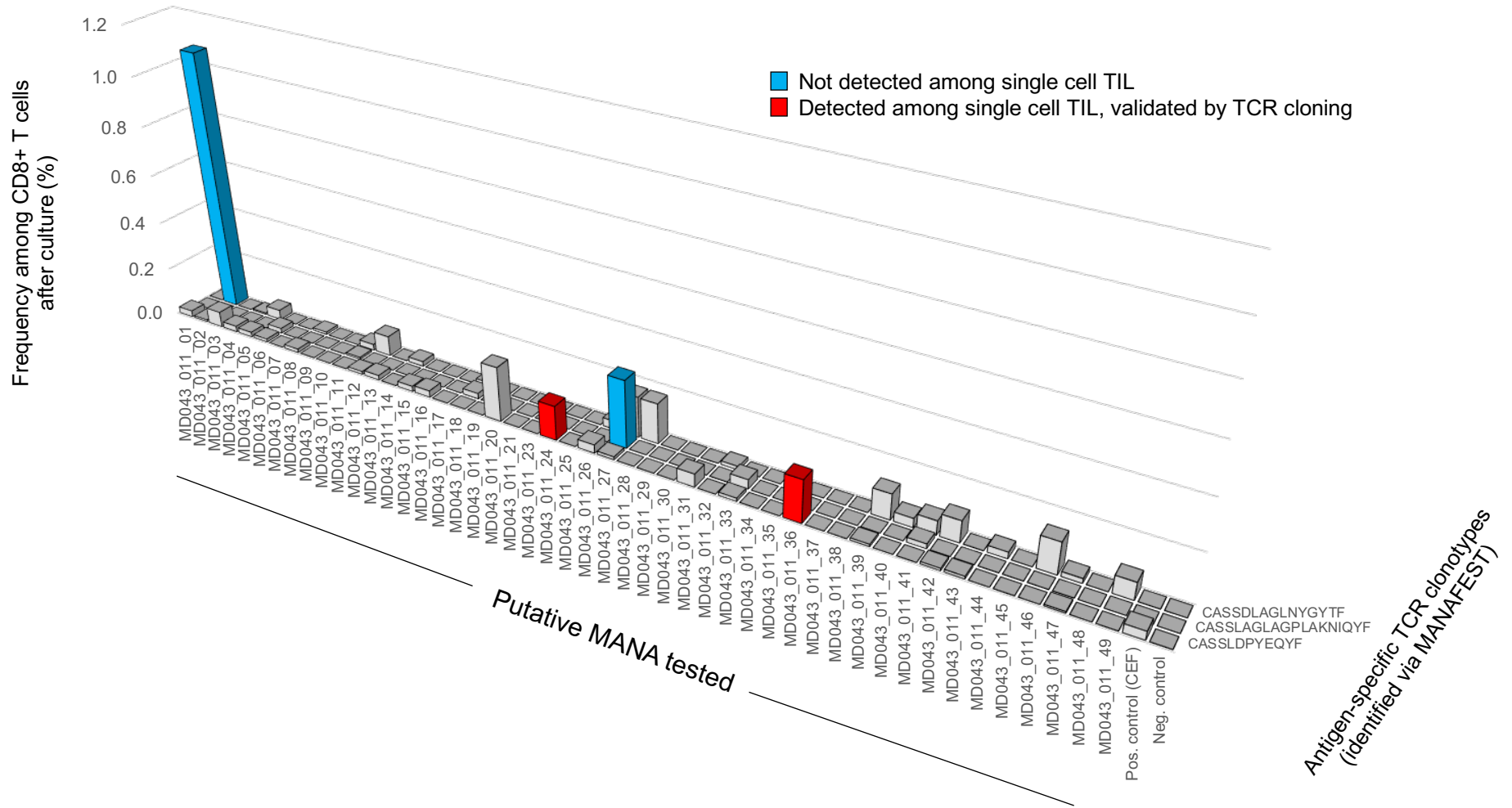
**Patient MD043-003**



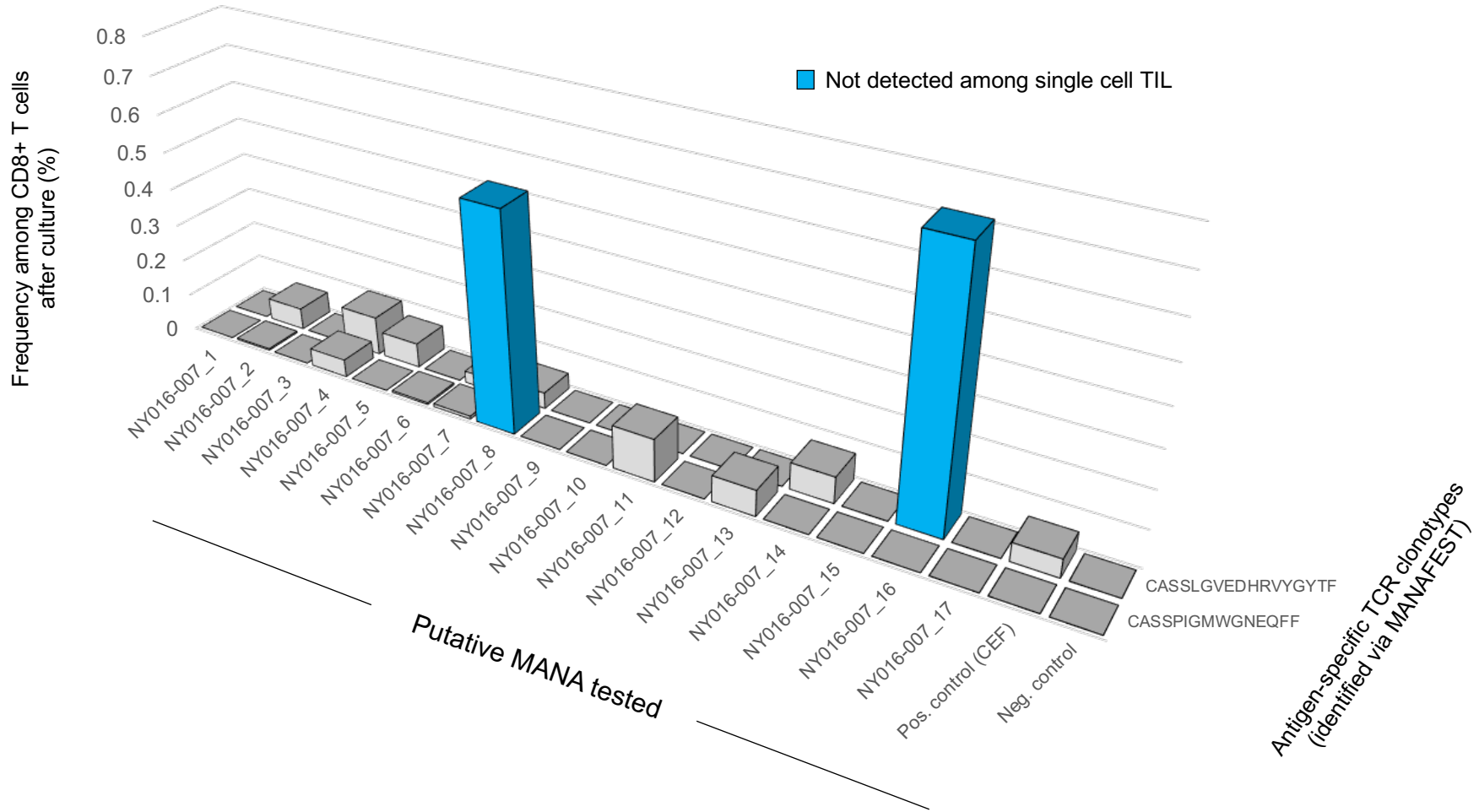
**Patient NY016-025**



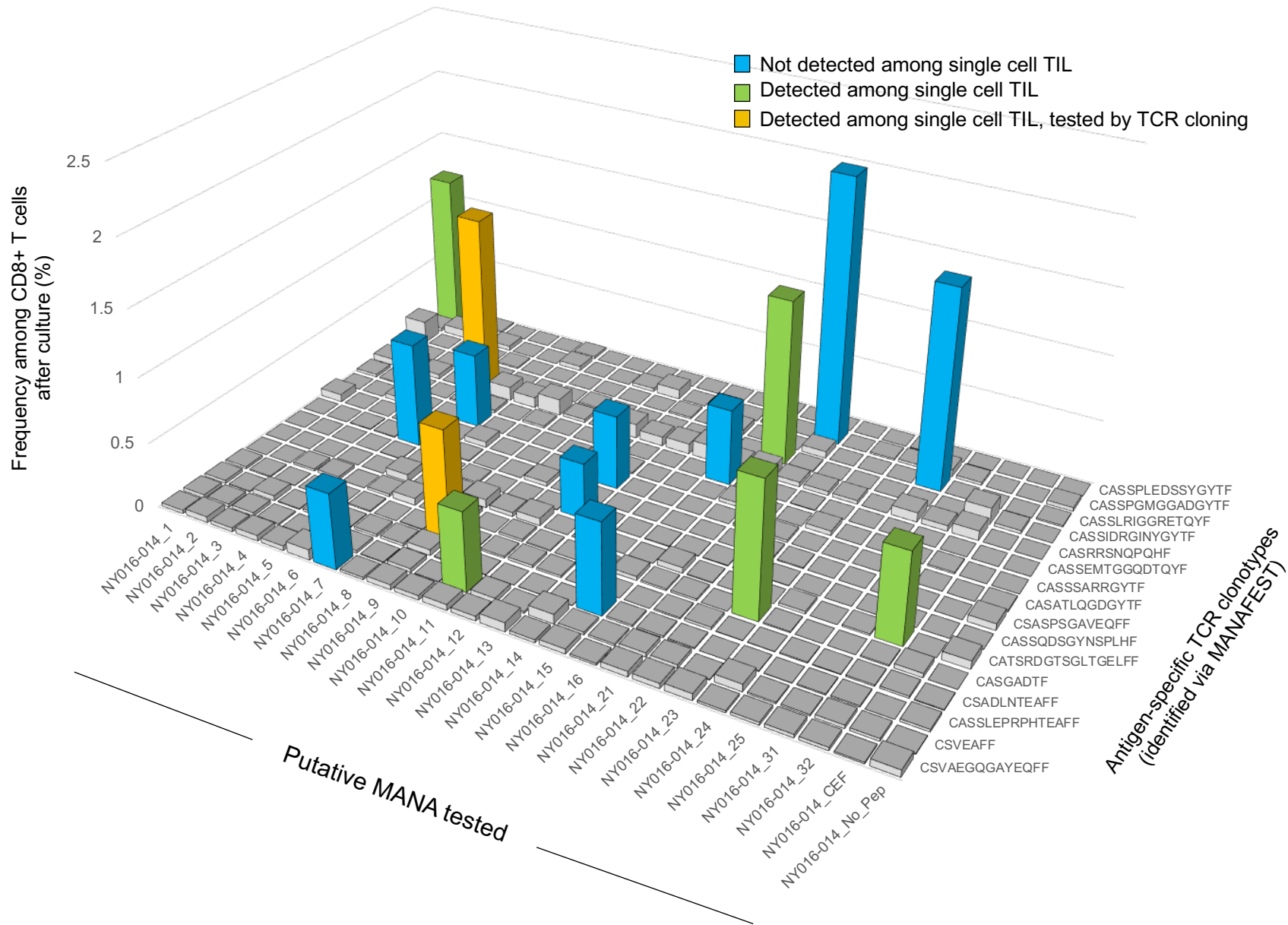
**Patient MD043-011**



**Patient NY016-007**



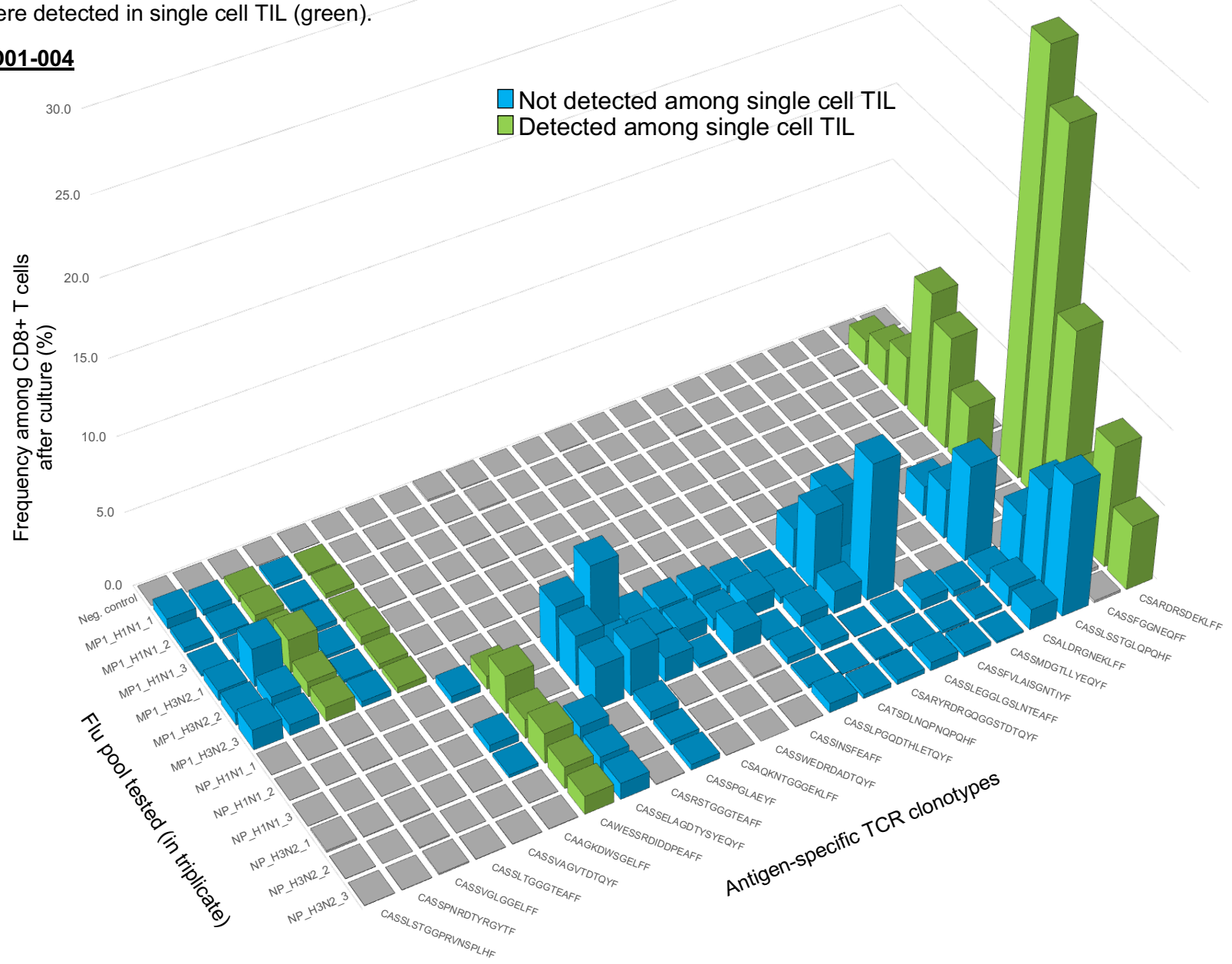
**Patient NY016-014**



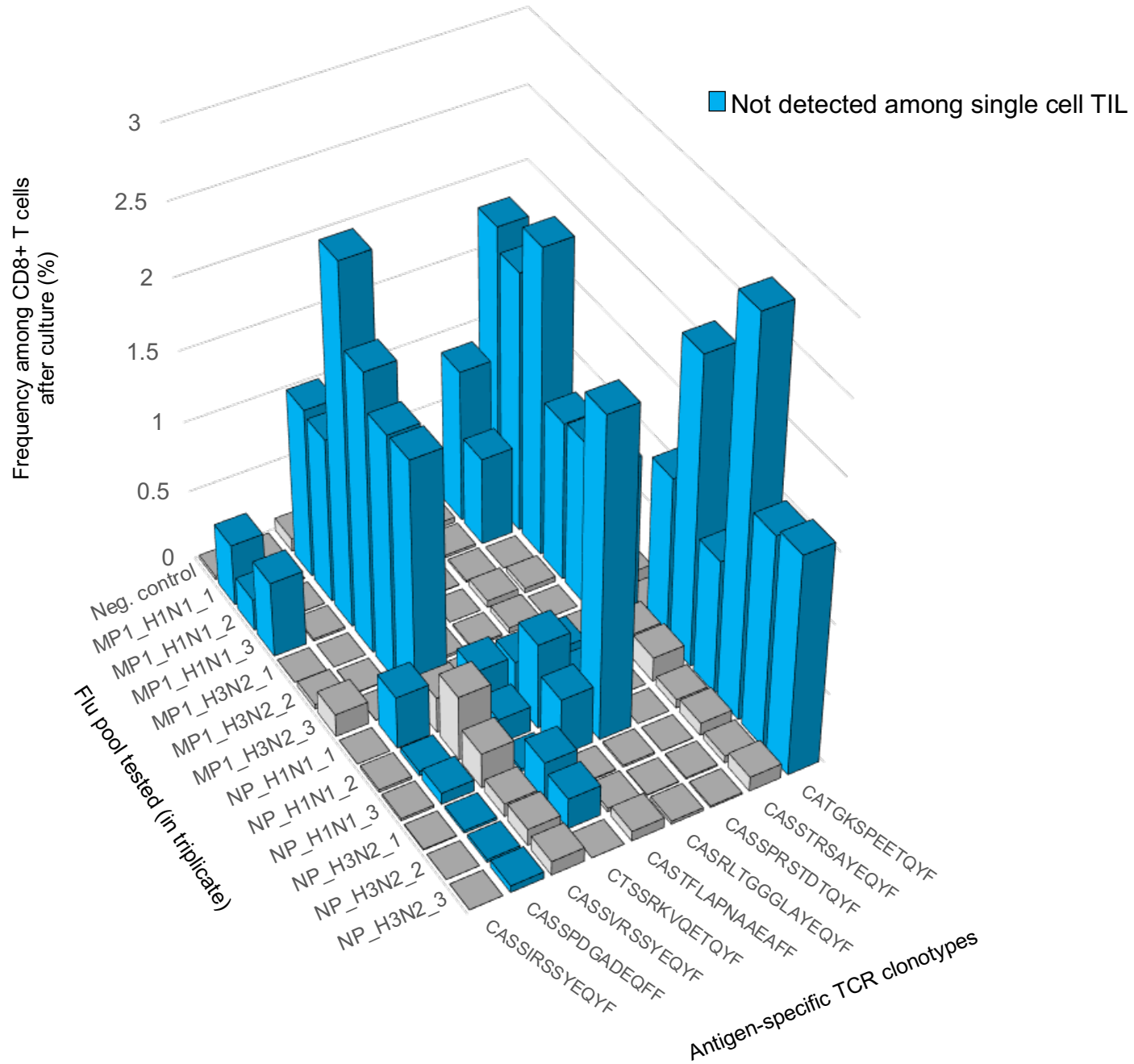


**Supplementary Data 5.2. Influenza-specific TCRs identified using the ViraFEST assay.** The ViraFEST assay was performed on non-MPR patients MD01-004 and MD043-011, and MPR patient MD01-005 to identify influenza-specific TCR $\beta$  clones. Influenza A pools consisting of overlapping peptides from the matrix and nucleocapsid proteins of H1N1 and H3N2, or an HIV-1 Gag pool as a negative control, were used to stimulate peripheral blood T cells in vitro for 10 days. Each flu peptide pool was tested in triplicate. Data are shown as the frequency of ViraFEST+ clonotypes among total CD8<sup>+</sup> T cells for each culture condition. Clonotypes are color coded to indicate if they were not detected in single cell TIL (blue) or were detected in single cell TIL (green).

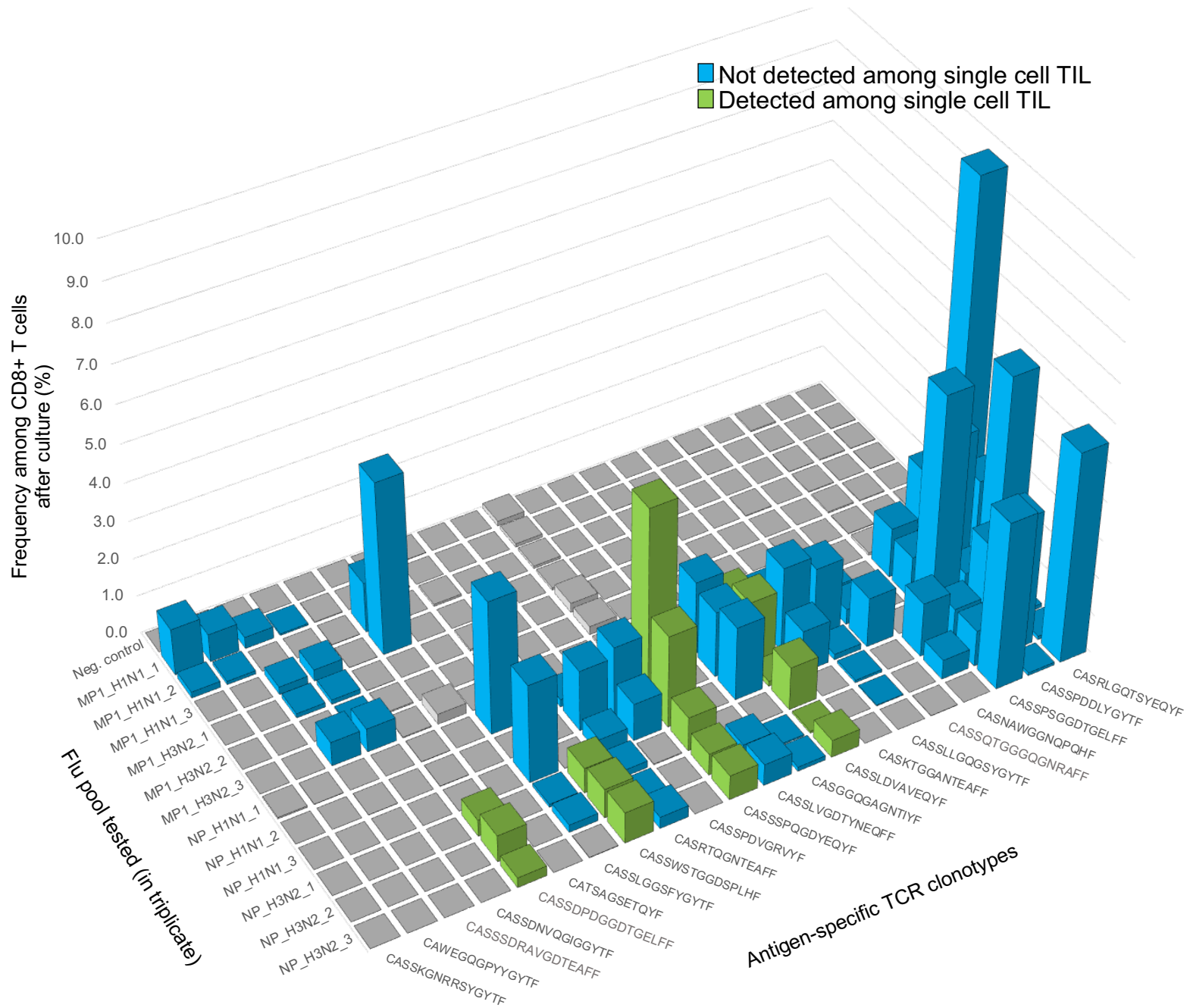
**Patient MD01-004**



**Patient MD043-011**

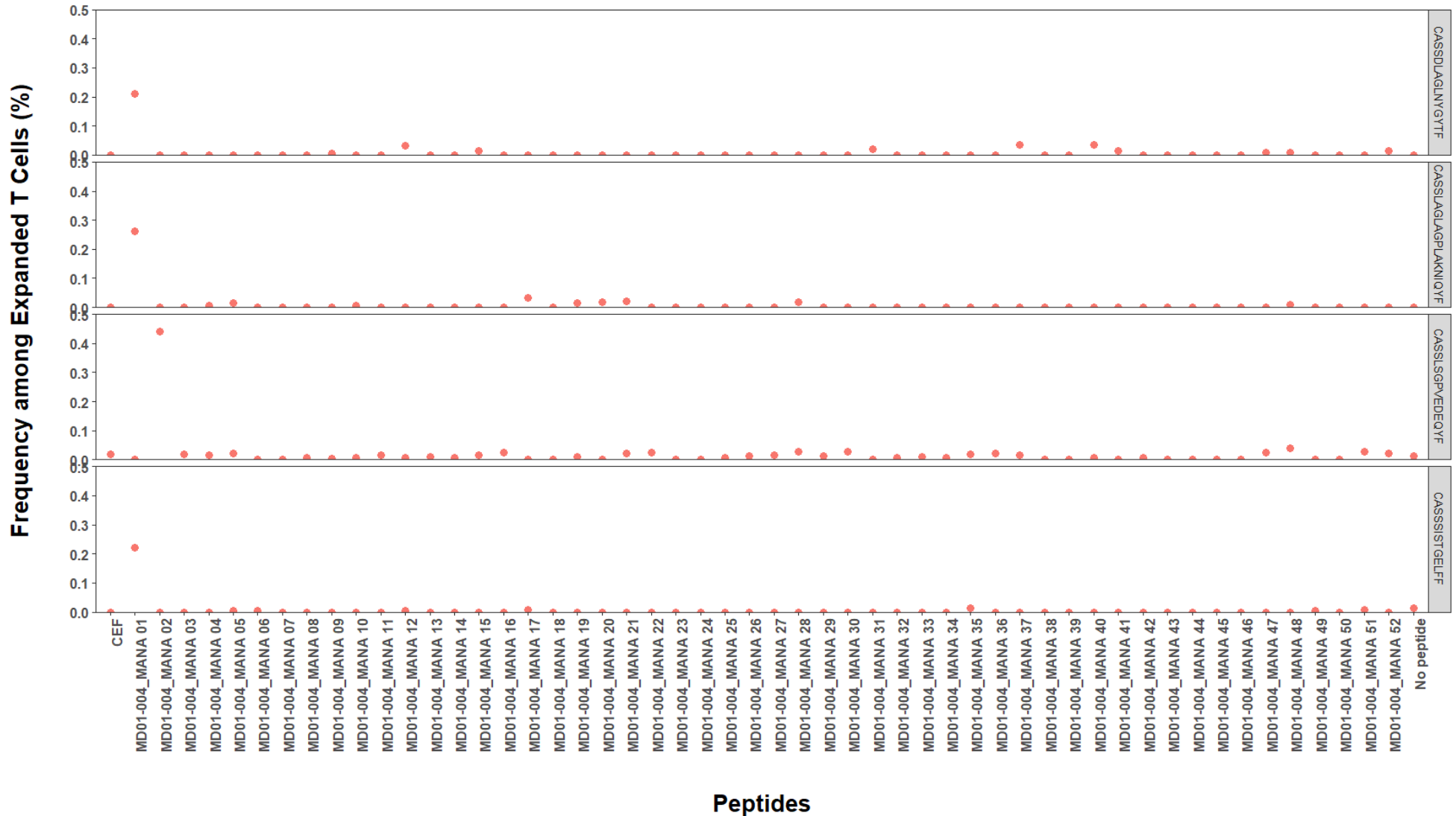


**Patient MD01-005**

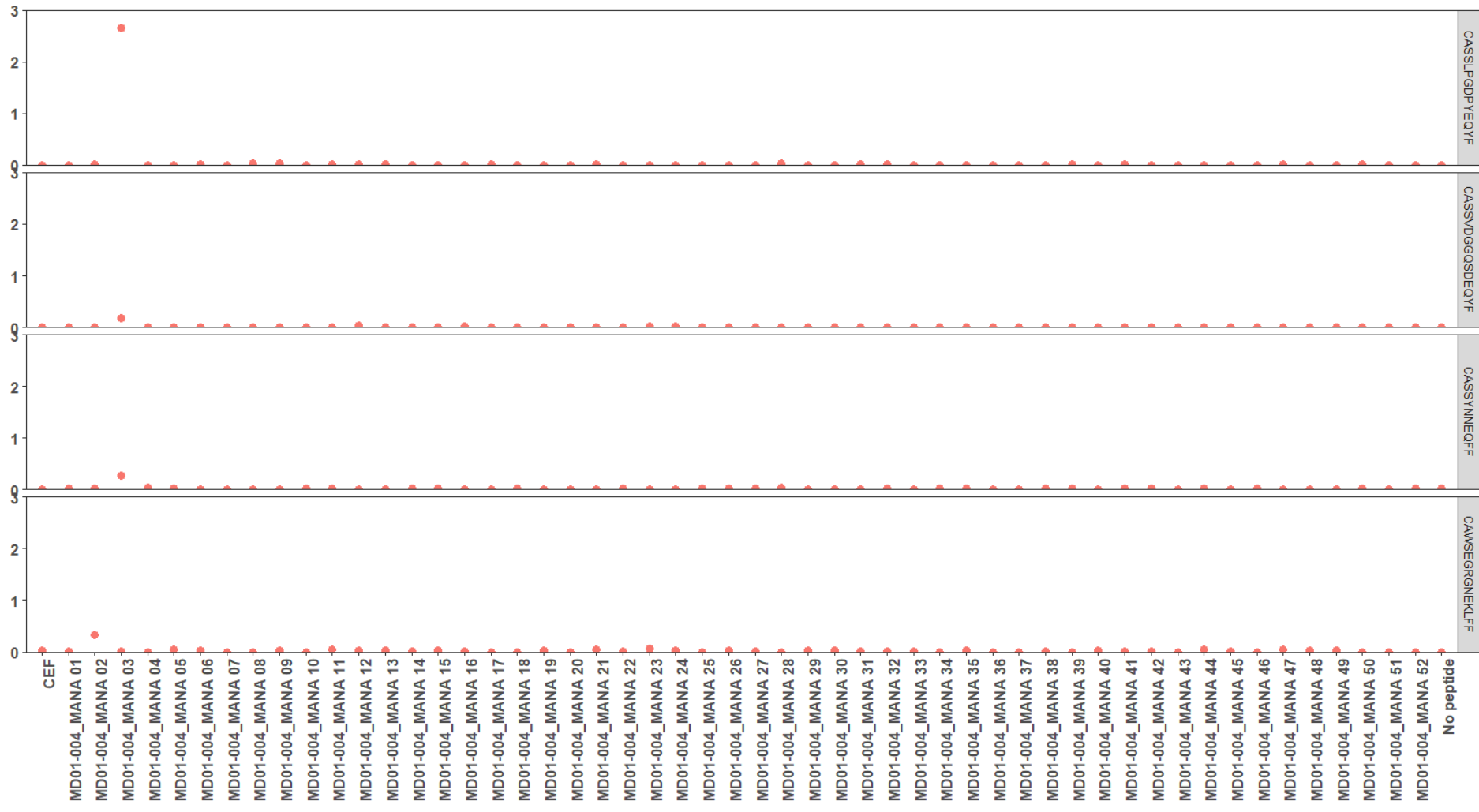


**Supplementary Data 5.3 The frequency of each MANA-specific TCR V $\beta$  clonotype in each condition tested in the MANAFEST assay visualized by individual dot plots.** Peripheral blood T cells were tested for reactivity to putative MANA using the MANAFEST assay. A graph is shown for each MANA- and CEF-specific TCR V $\beta$  clonotype (right y-axis) detected in each patient. The frequency of each clonotype is shown as the percent among all T cells detected by TCRseq after culture (left y-axis) in each peptide-stimulated condition, the CEF positive control well, and the “no peptide” negative control well (x-axis).

**Patient MD01-004**

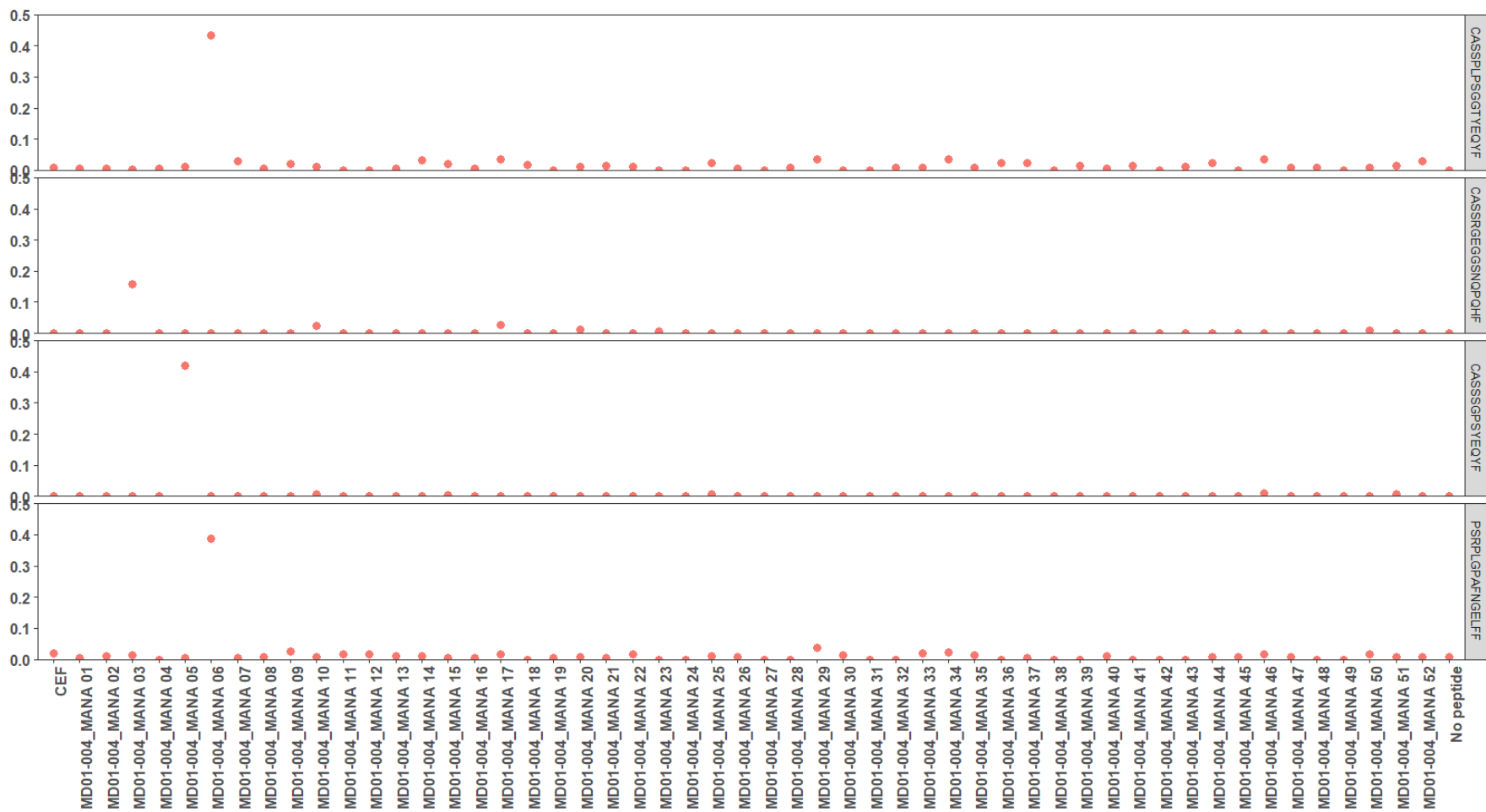


# Frequency among Expanded T Cells (%)



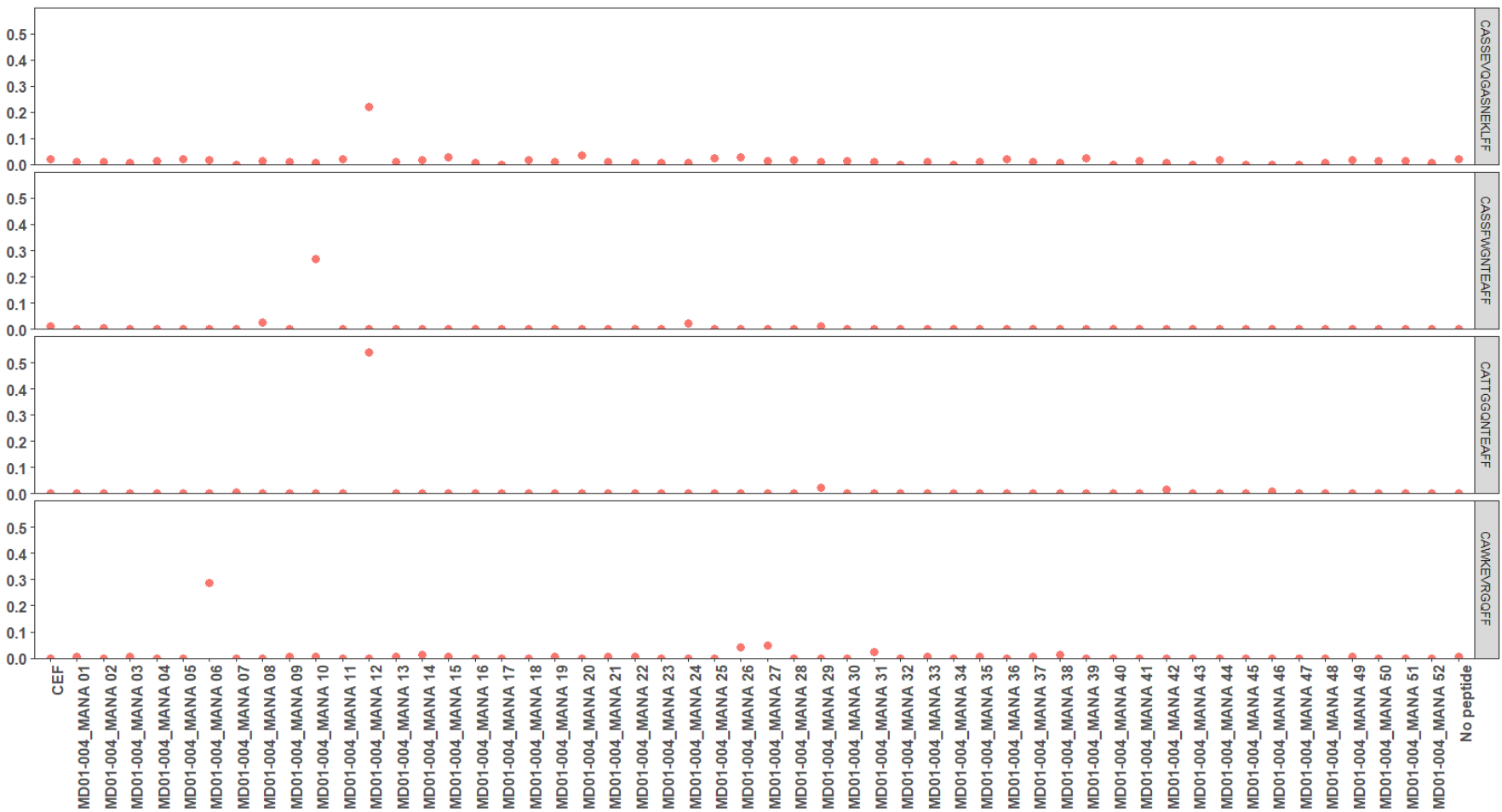
## Peptides

# Frequency among Expanded T Cells (%)



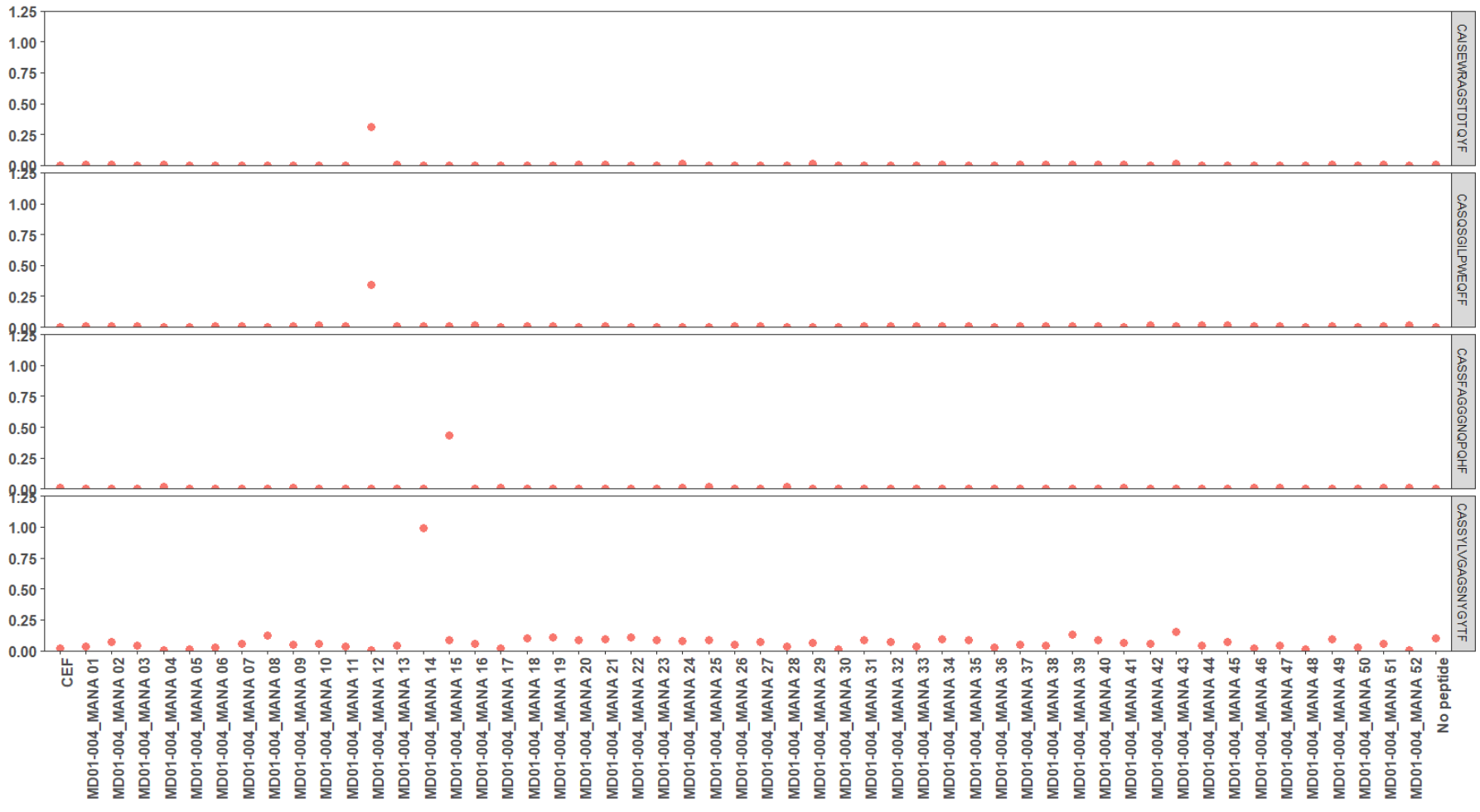
## Peptides

# Frequency among Expanded T Cells (%)



## Peptides

Frequency among Expanded T Cells (%)



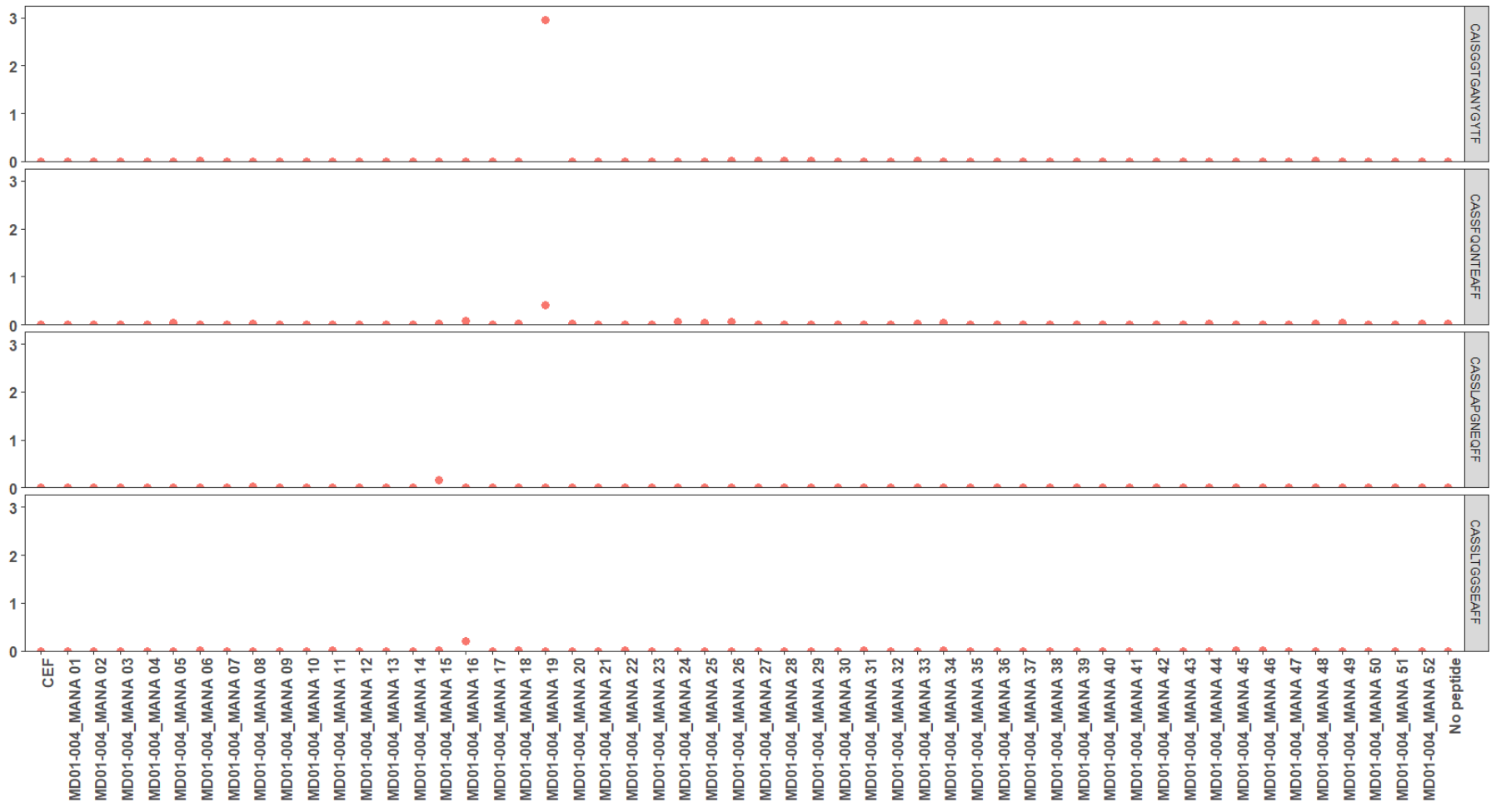
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CASSFAGGNGNPQHF  
CASSYLVGAGSNVGYTF

Peptides

No peptide



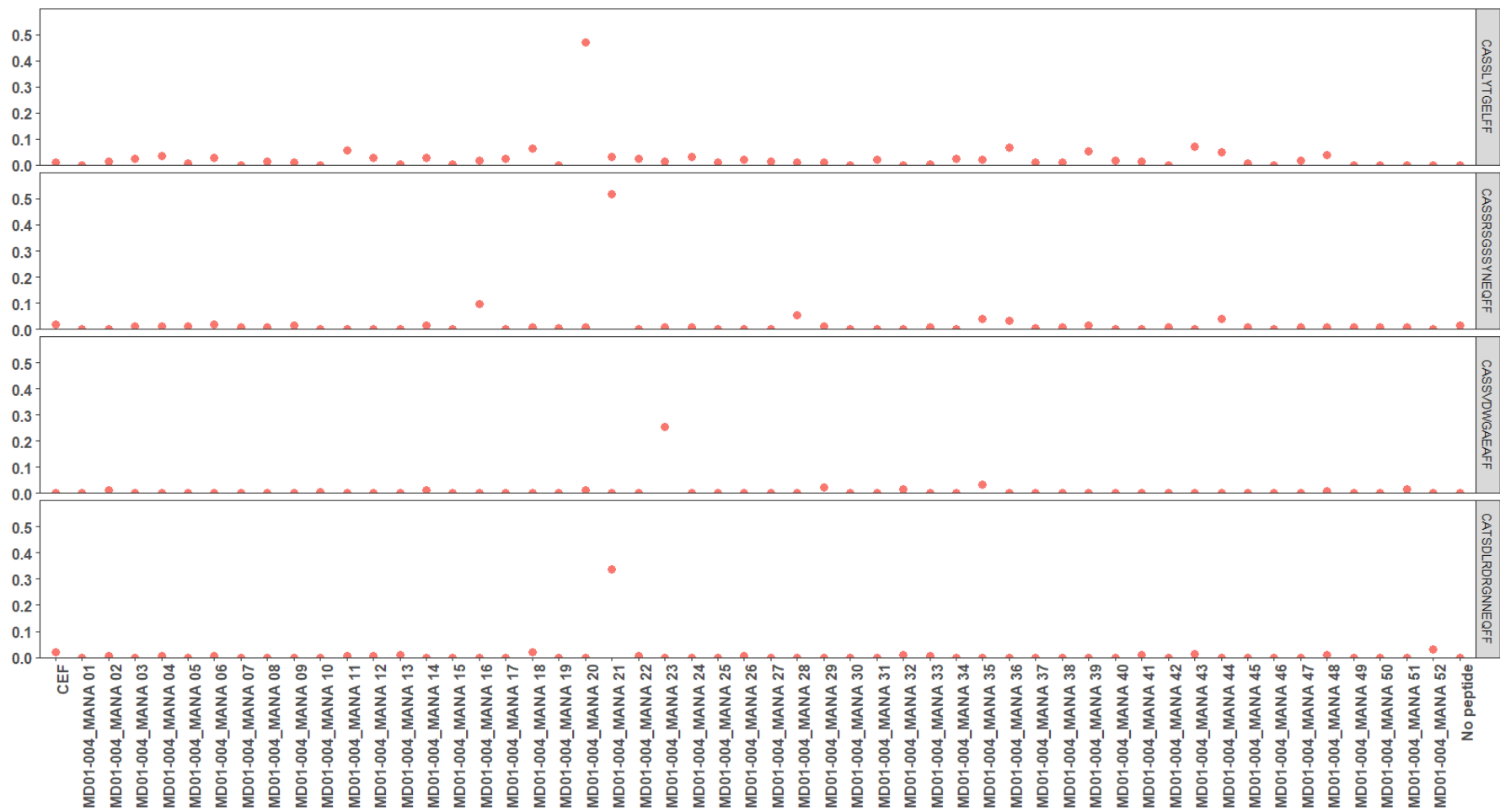
# Frequency among Expanded T Cells (%)



## Peptides

No peptide

# Frequency among Expanded T Cells (%)



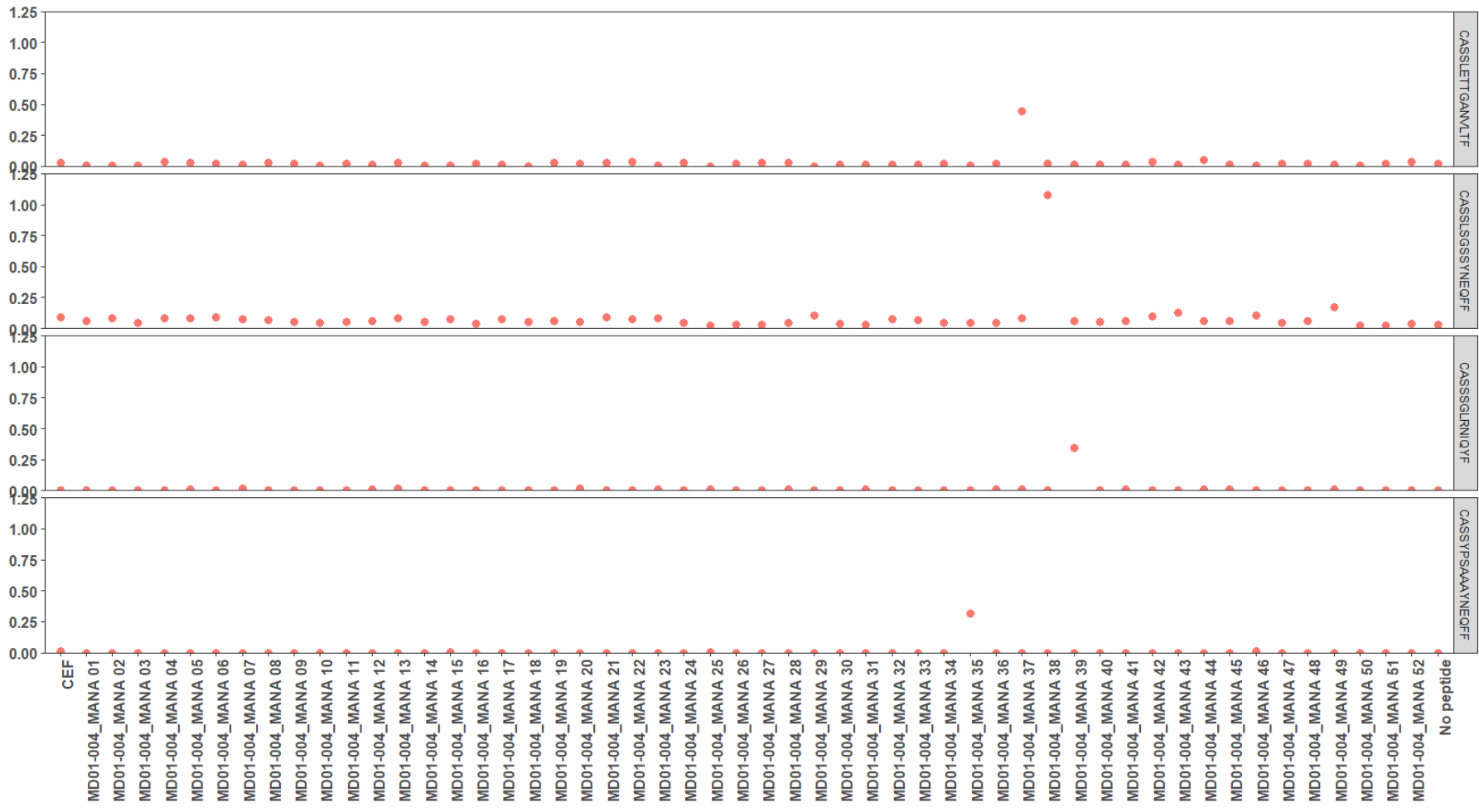
## Peptides

# Frequency among Expanded T Cells (%)



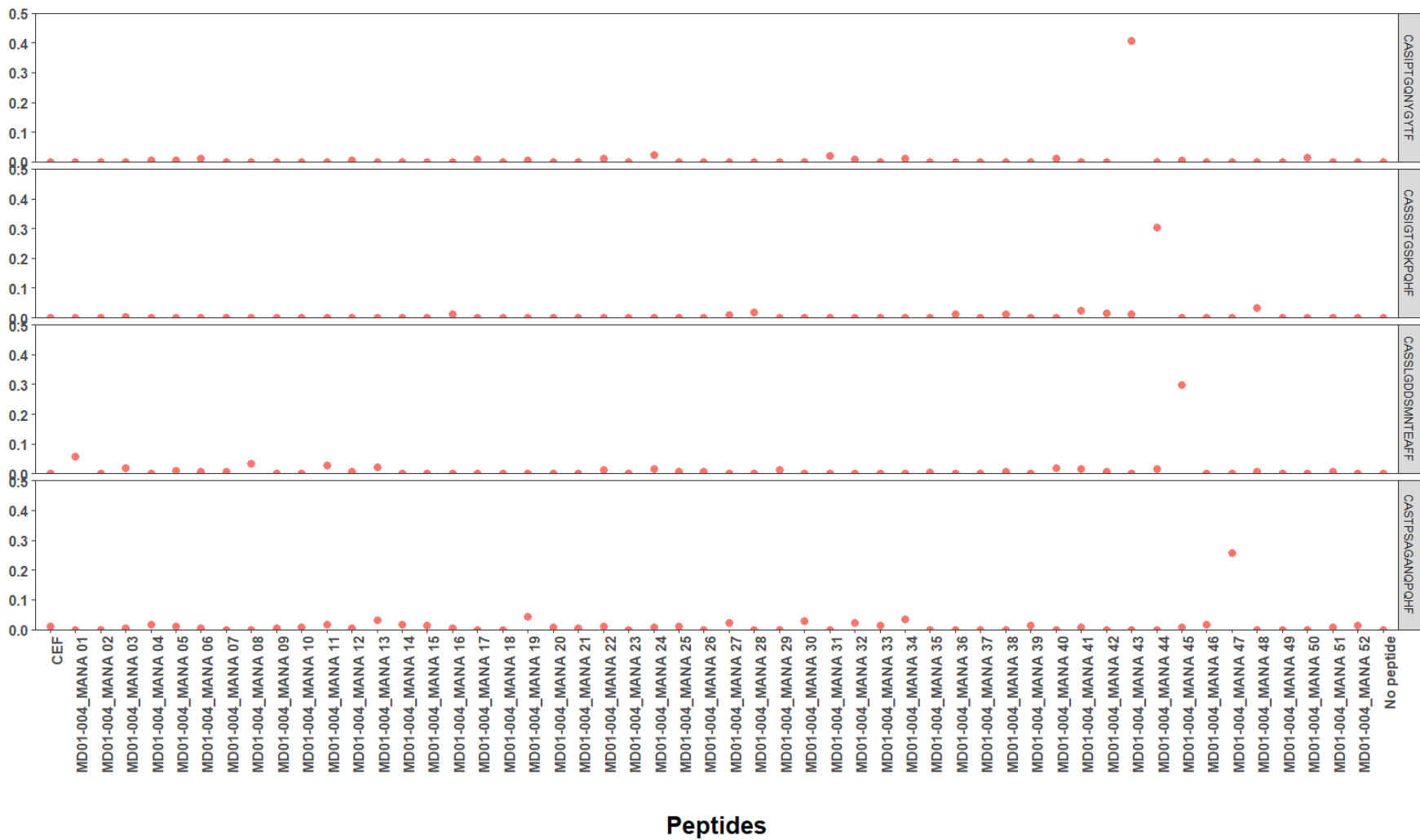
## Peptides

# Frequency among Expanded T Cells (%)

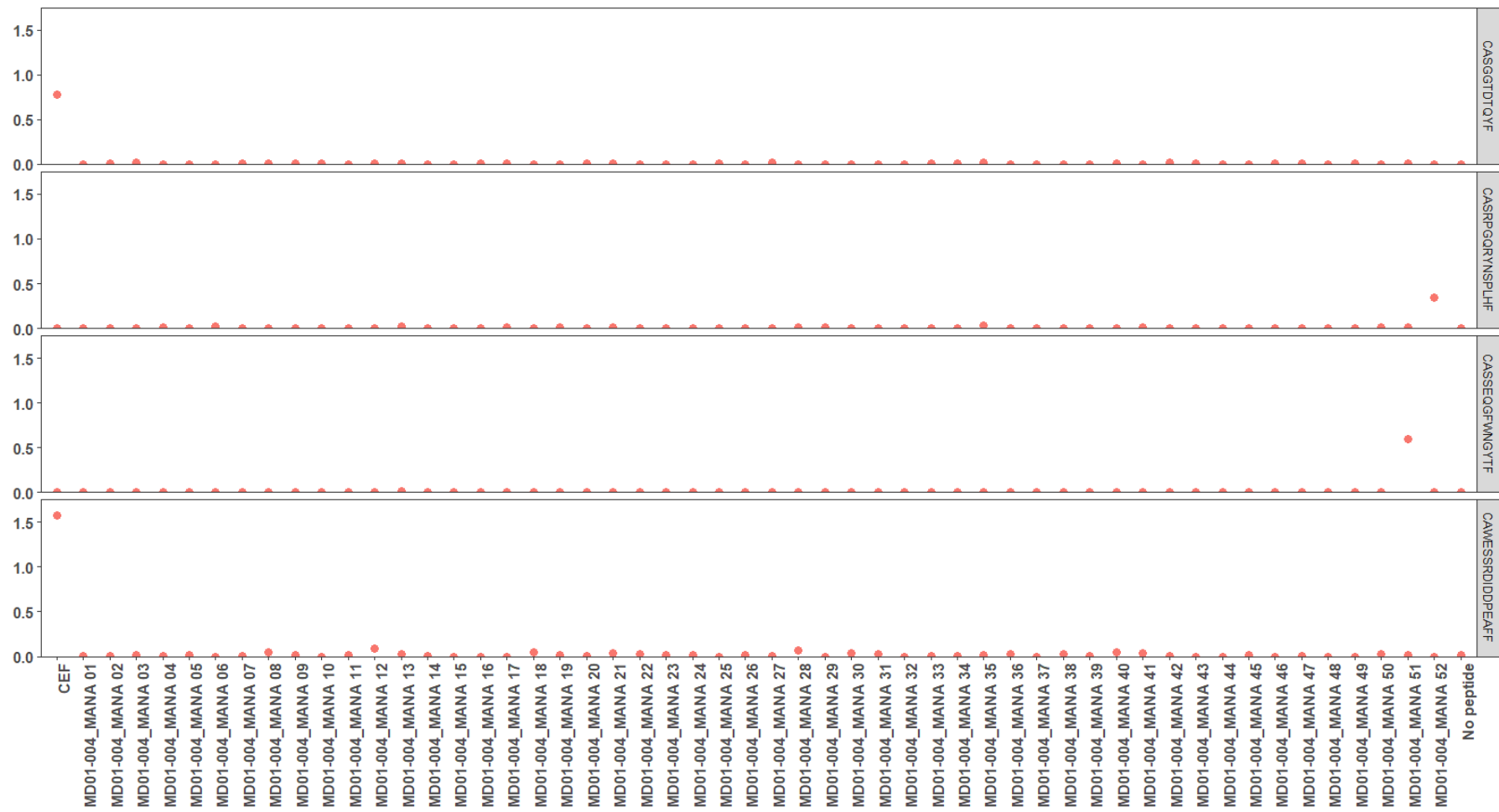


## Peptides

# Frequency among Expanded T Cells (%)

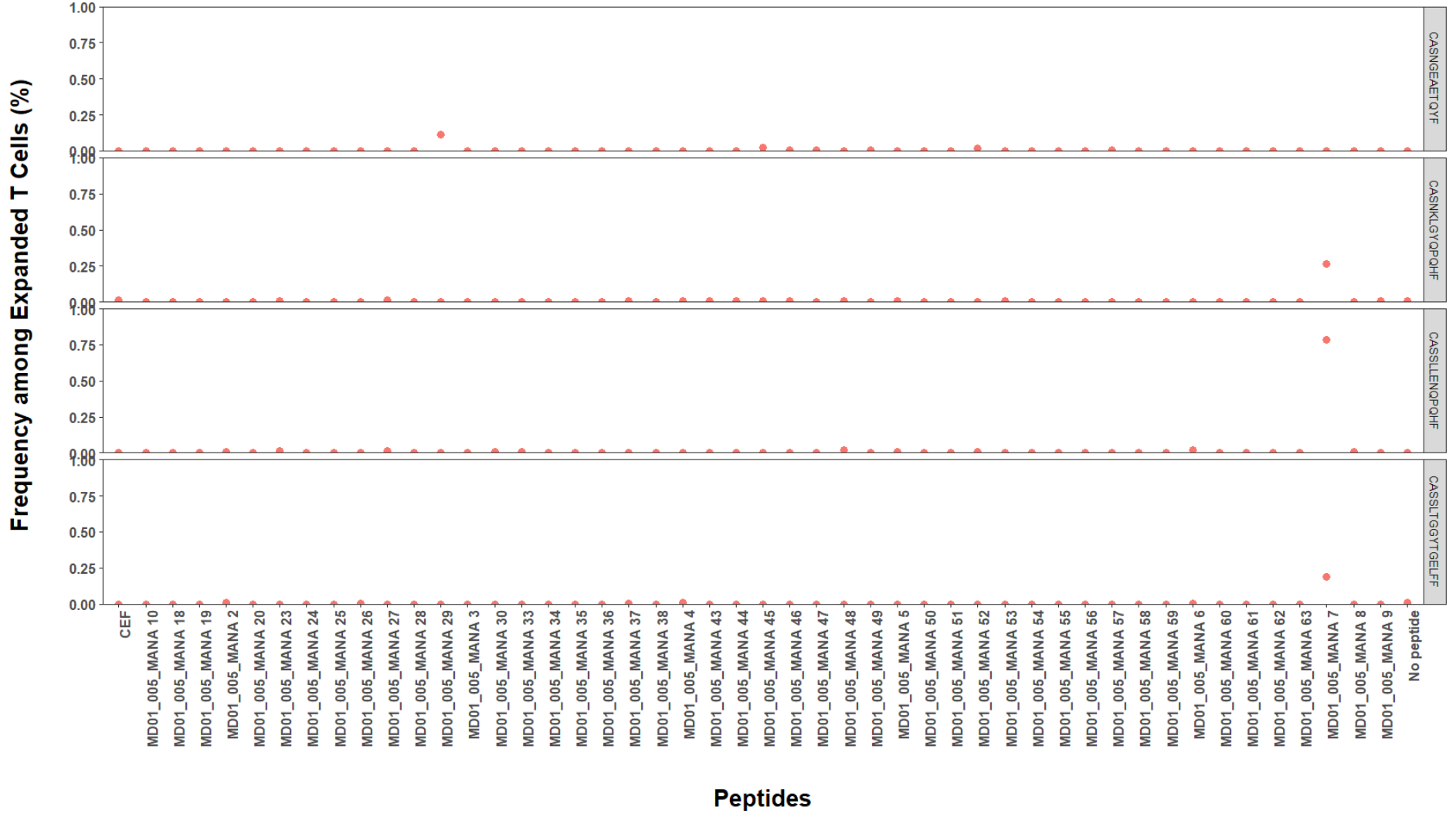


# Frequency among Expanded T Cells (%)

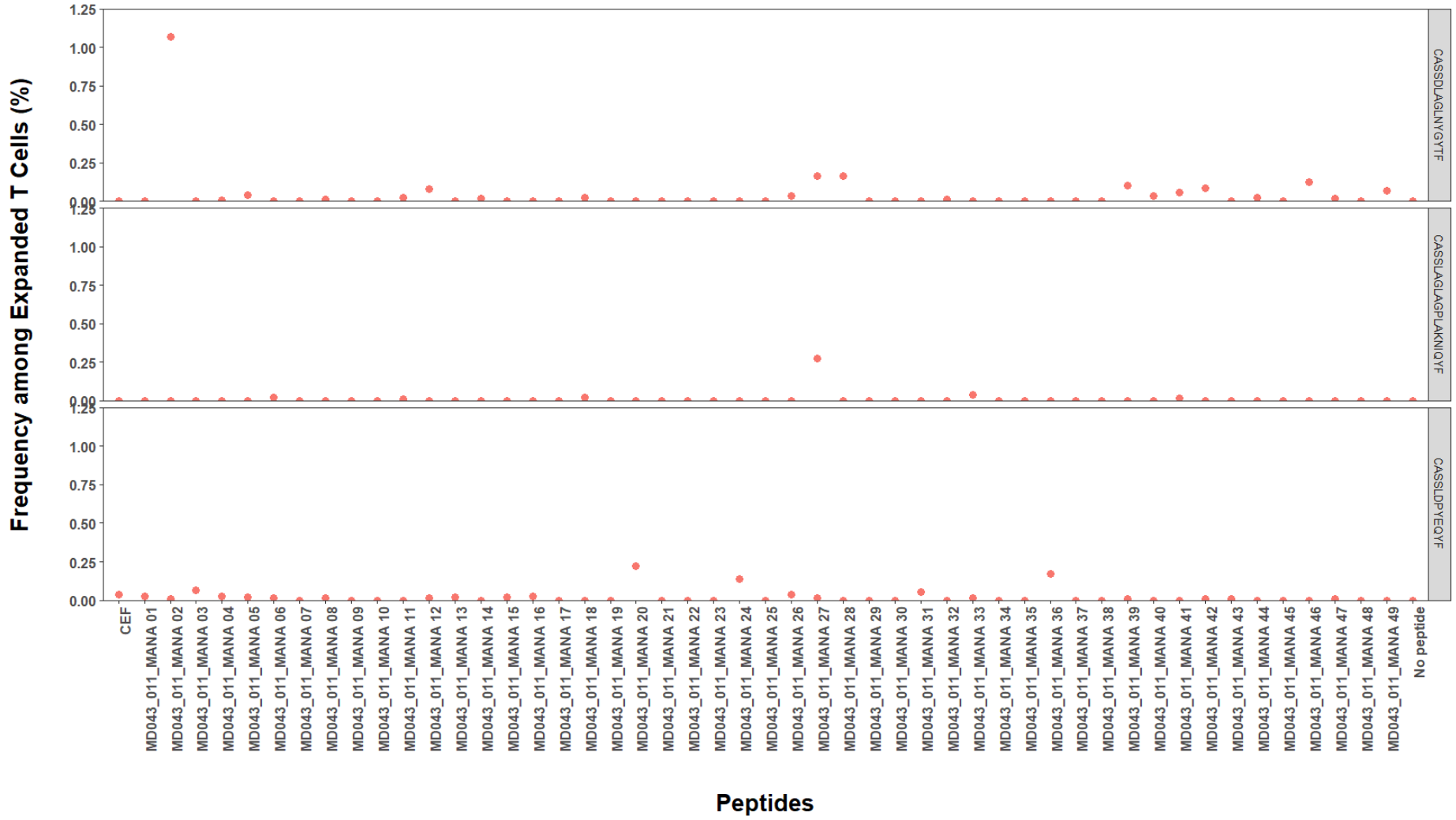


## Peptides

**Patient MD01-005**

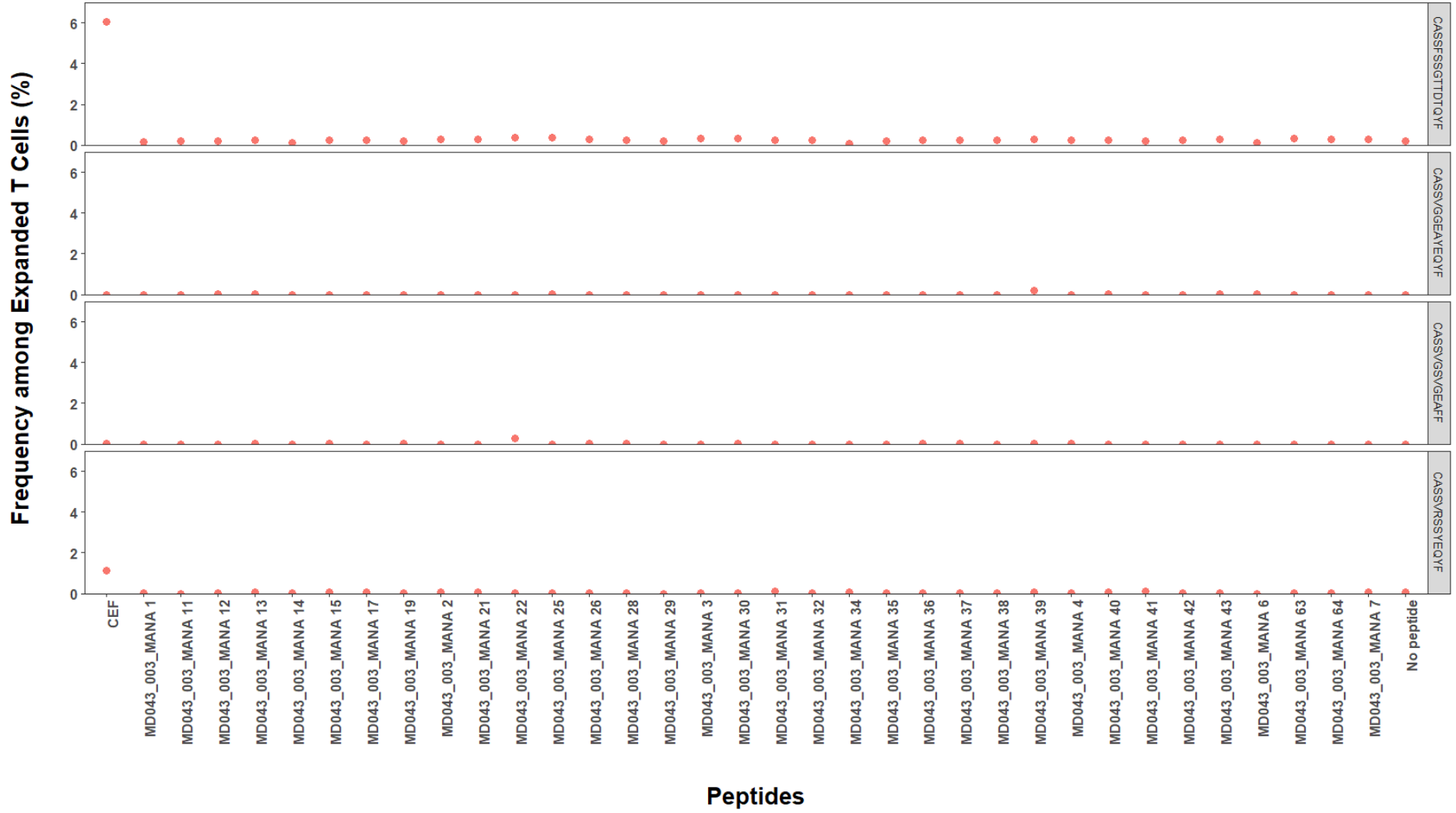


**Patient MD043-011**

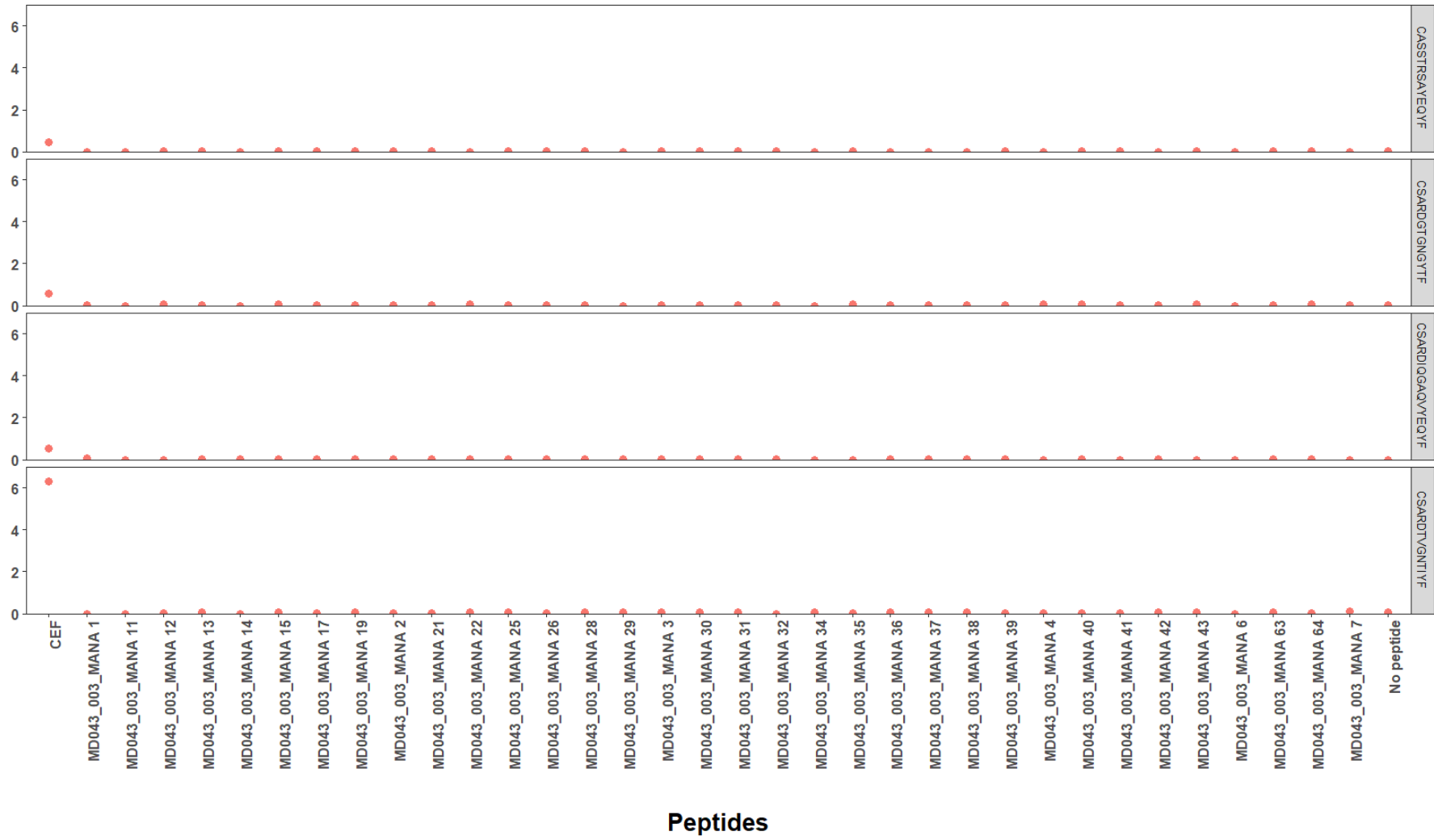




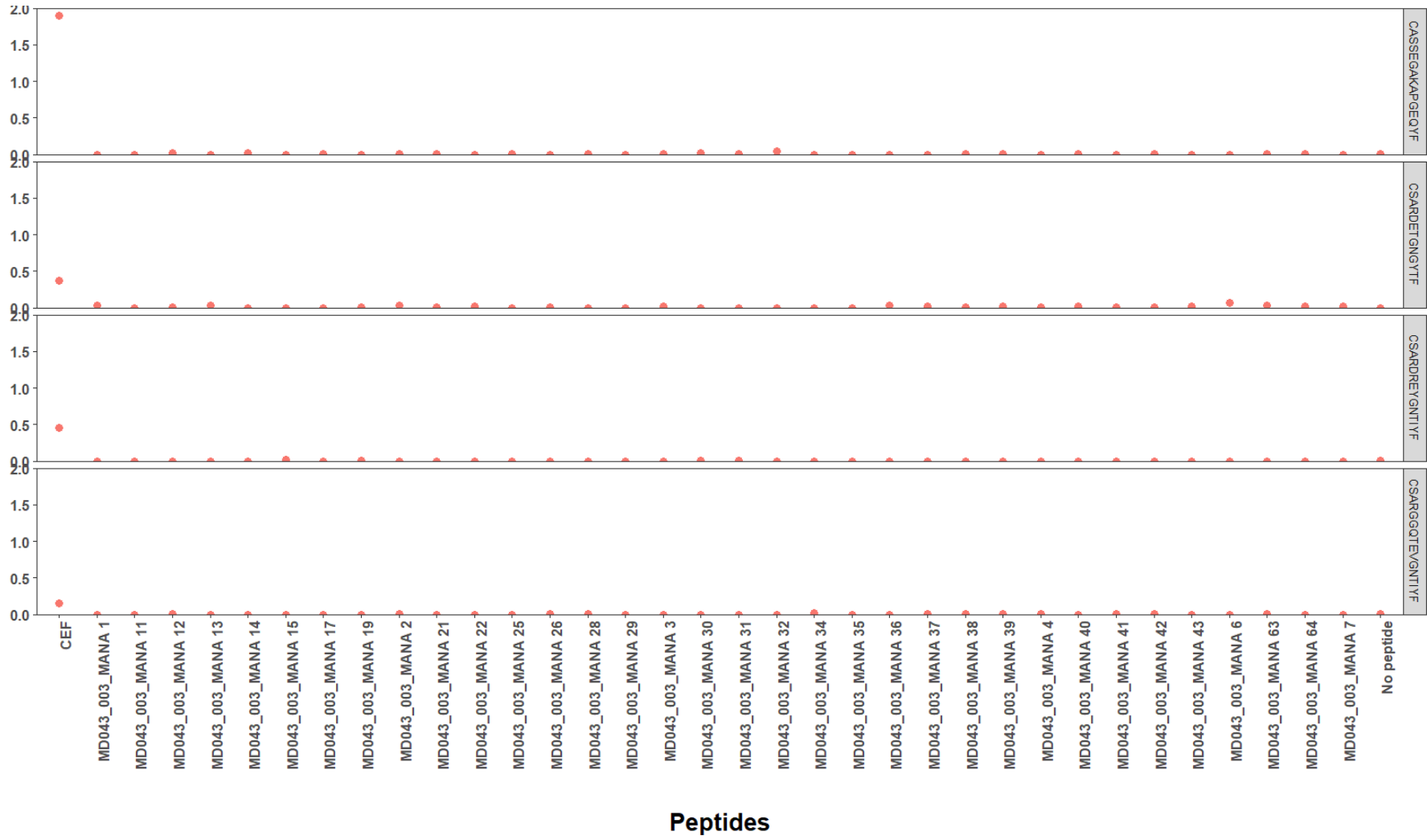
**Patient: MD043-003**



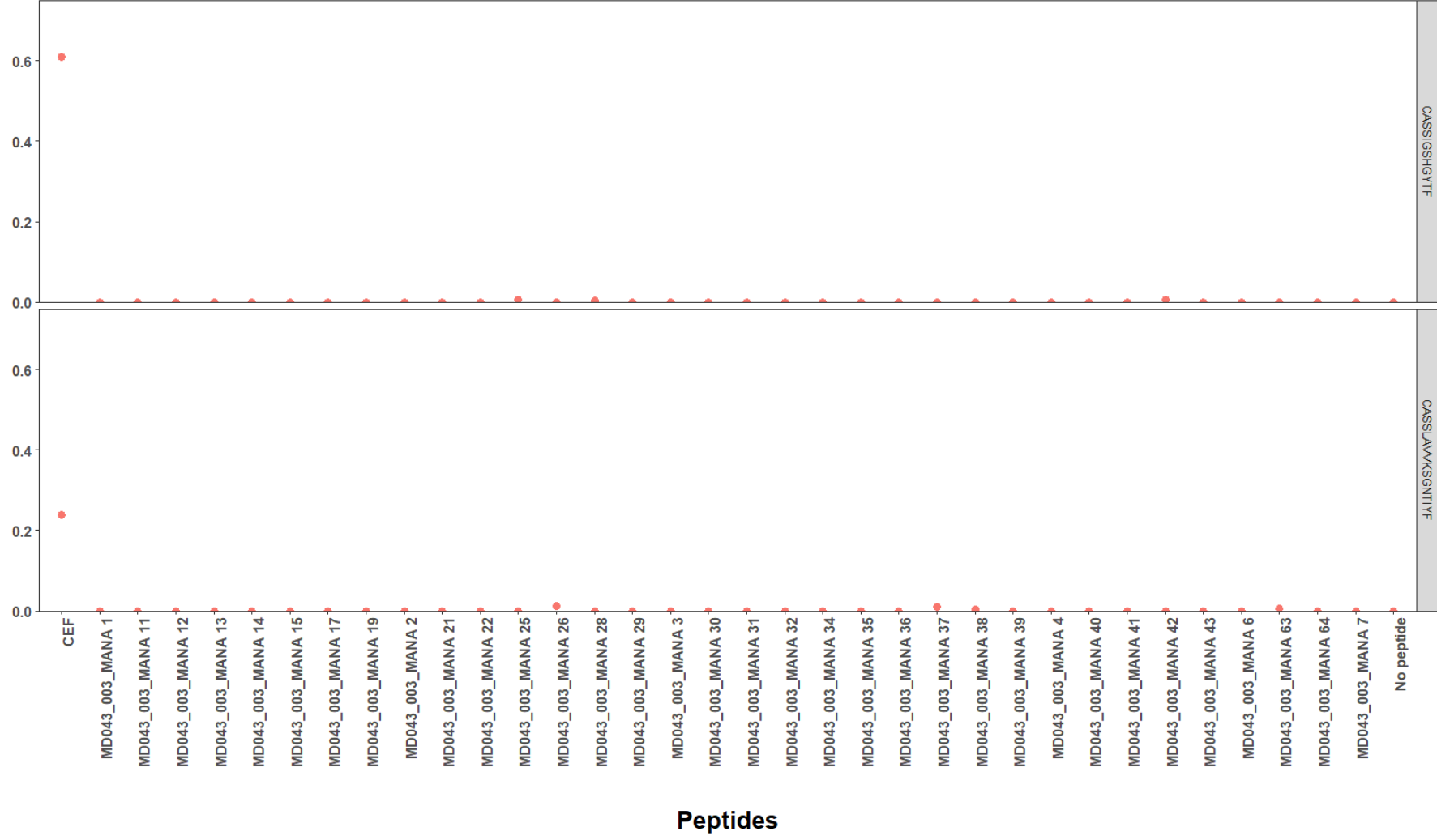
# Frequency among Expanded T Cells (%)



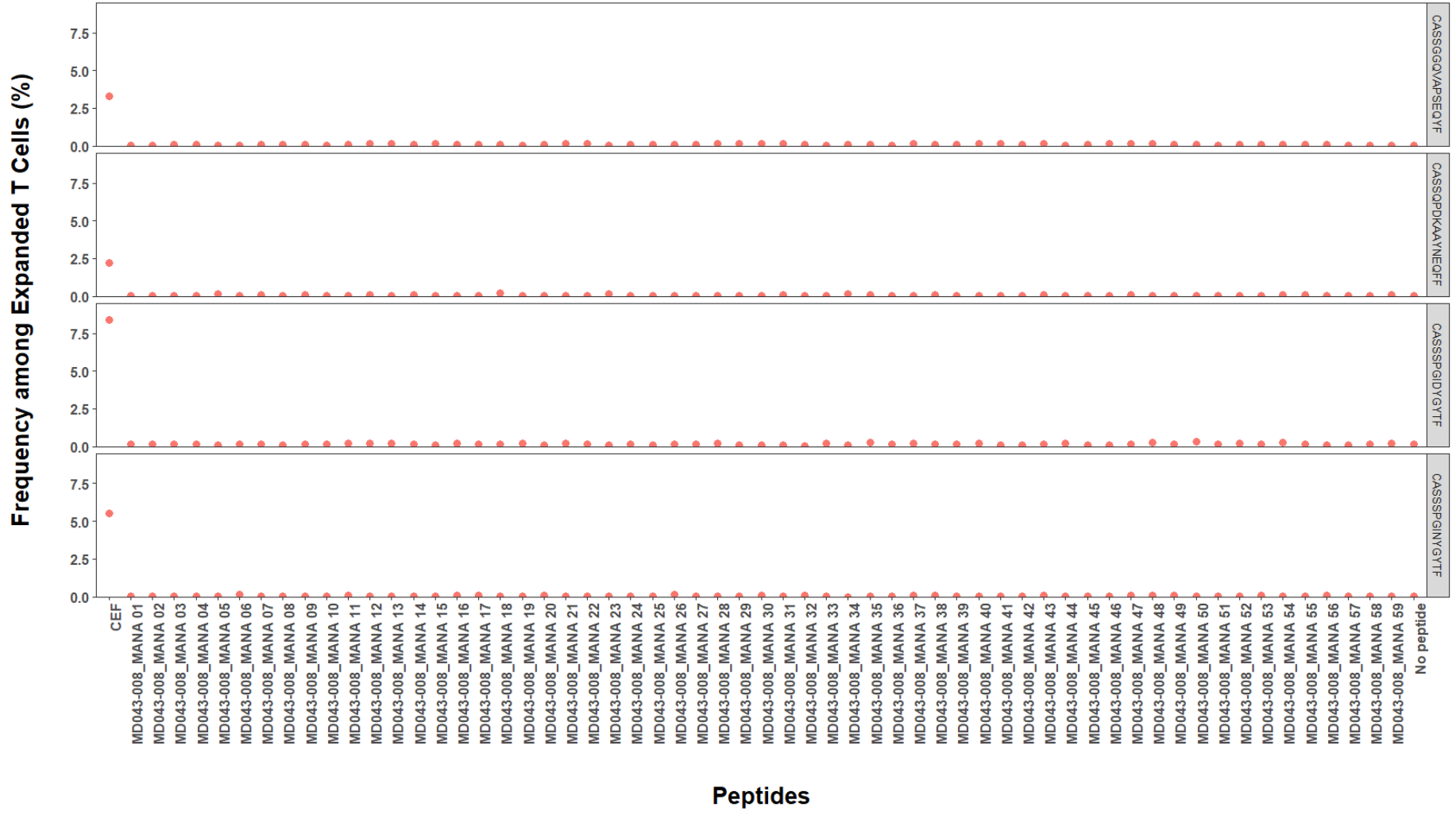
# Frequency among Expanded T Cells (%)



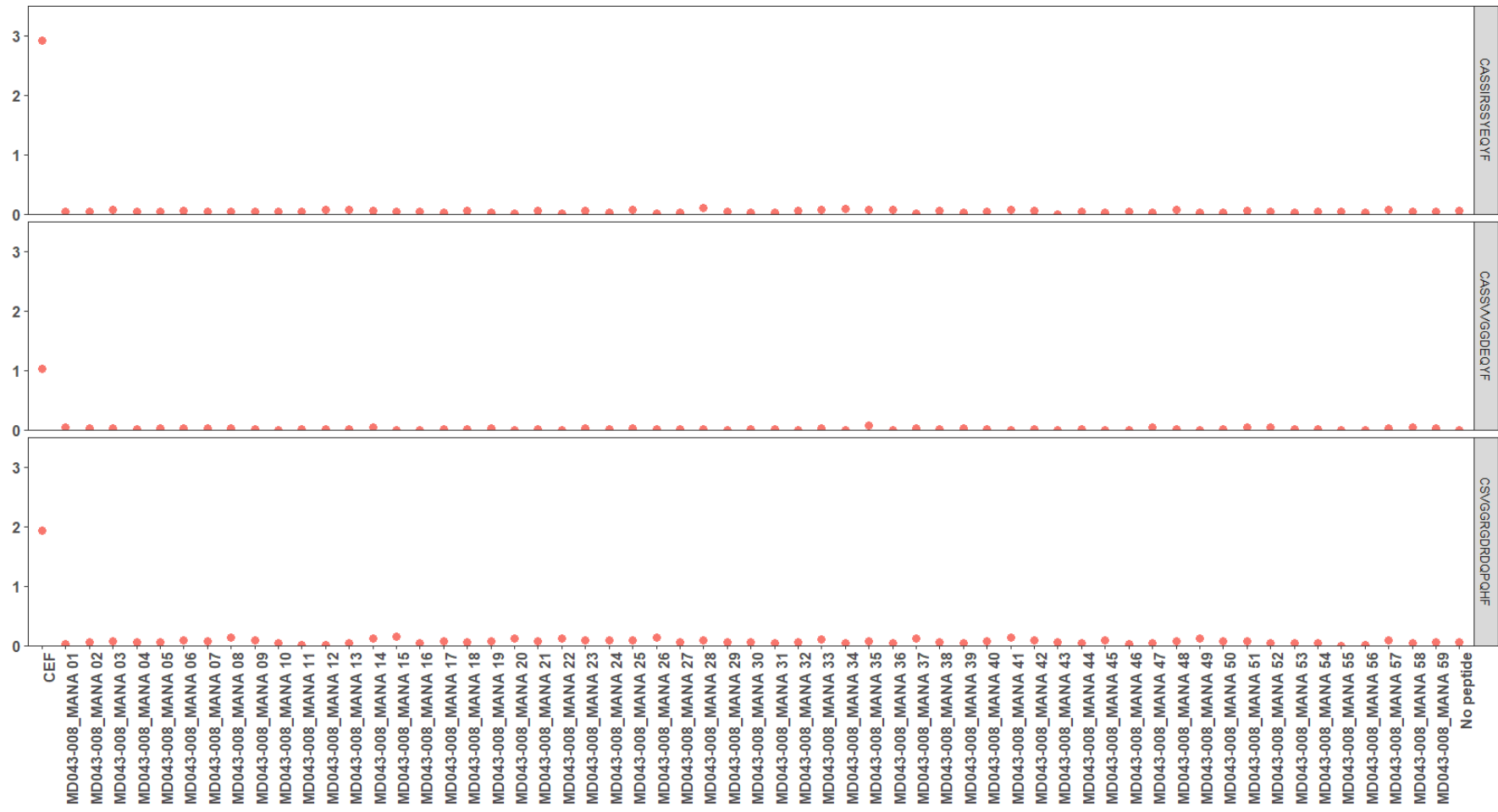
# Frequency among Expanded T Cells (%)



**Patient MD043-008**

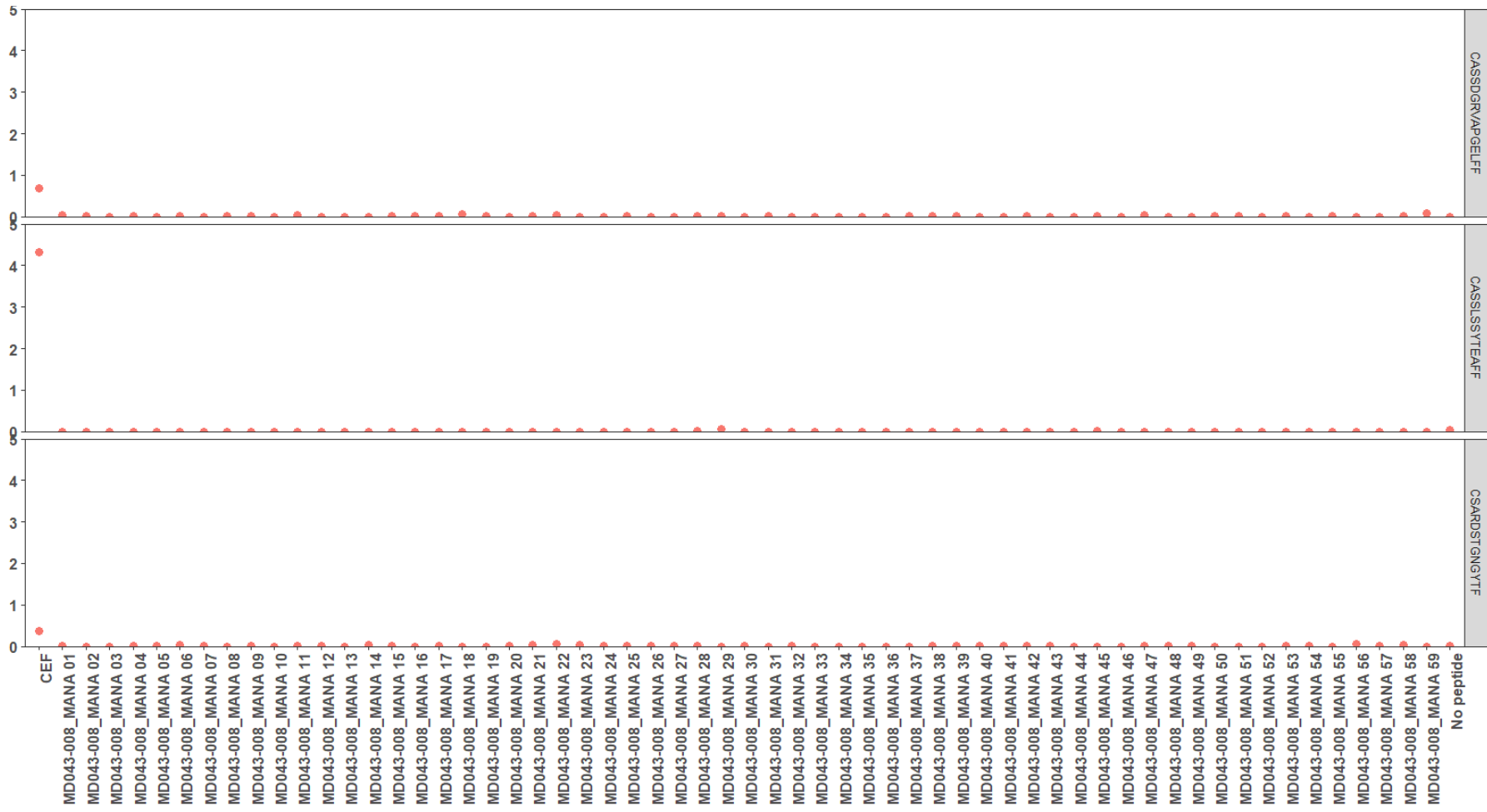


# Frequency among Expanded T Cells (%)



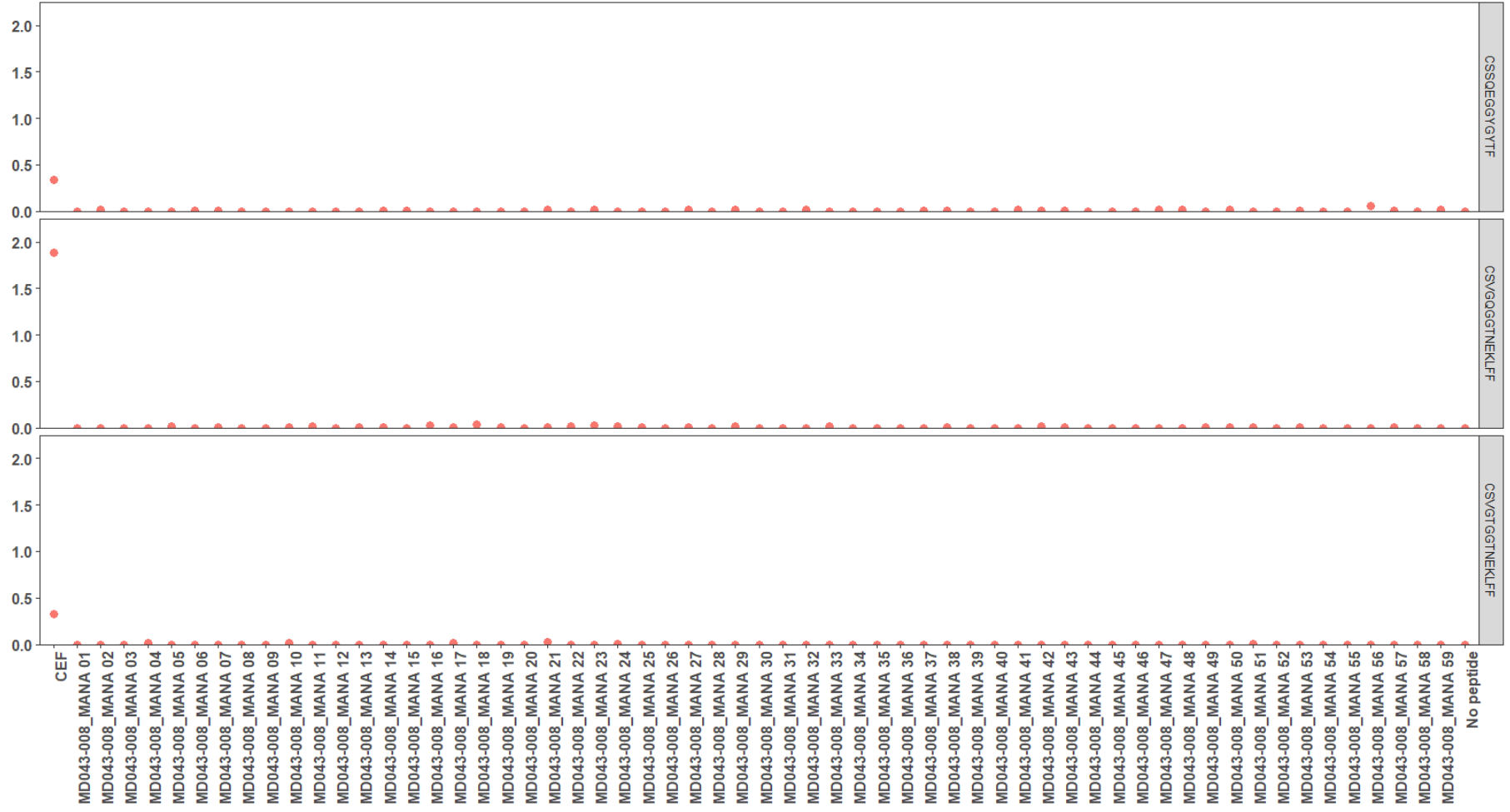
## Peptides

# Frequency among Expanded T Cells (%)



## Peptides

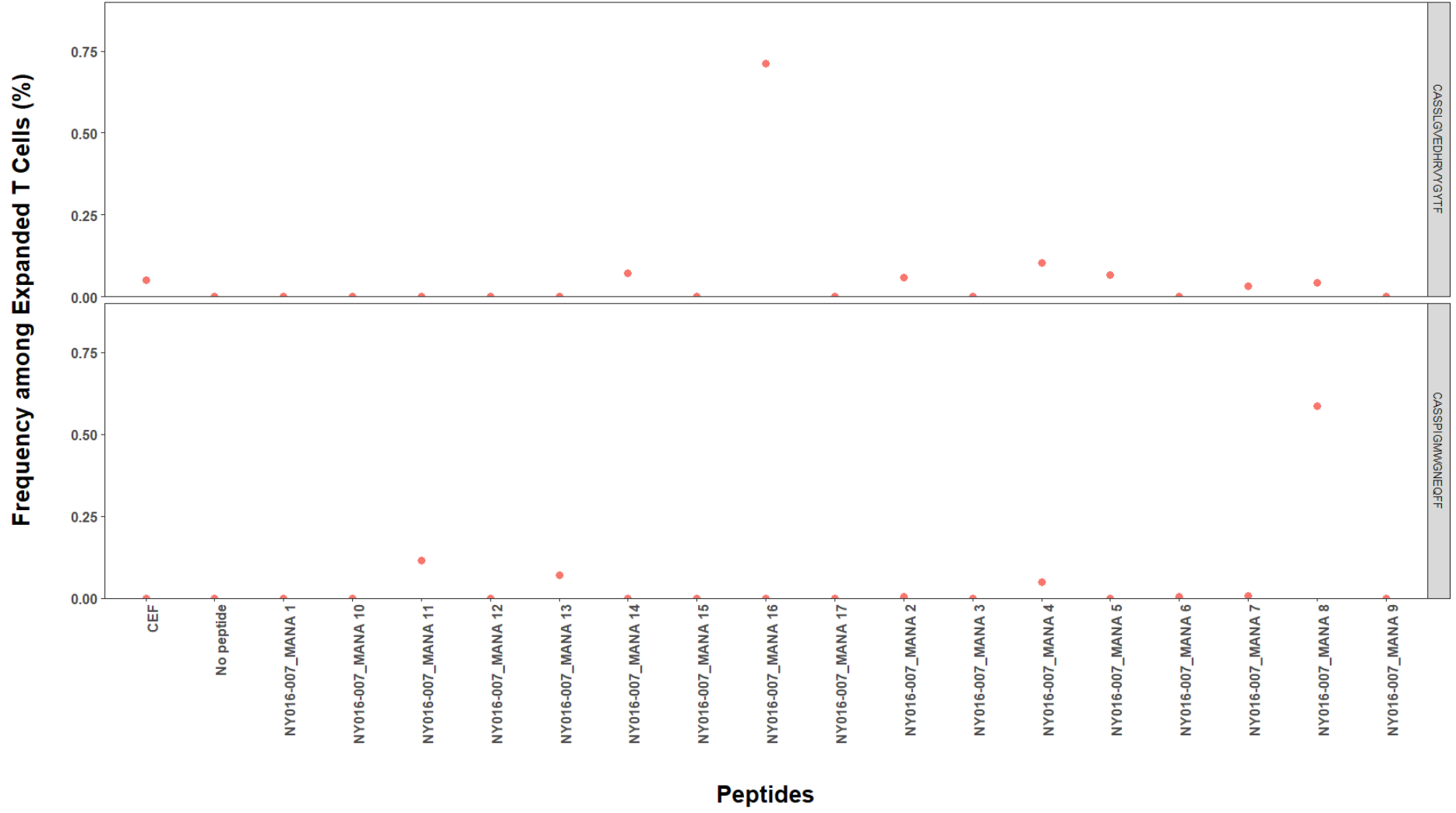
# Frequency among Expanded T Cells (%)



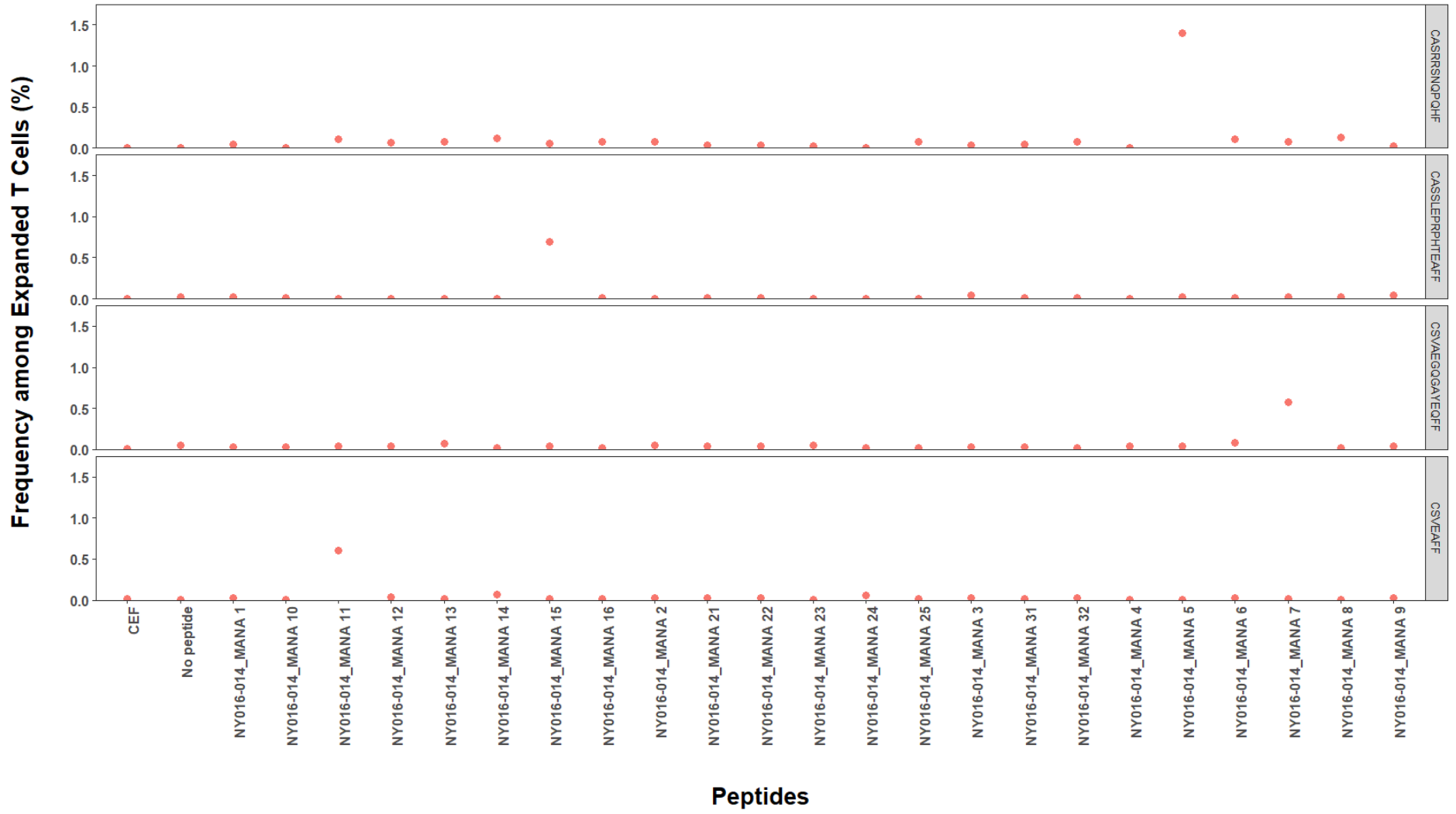
## Peptides



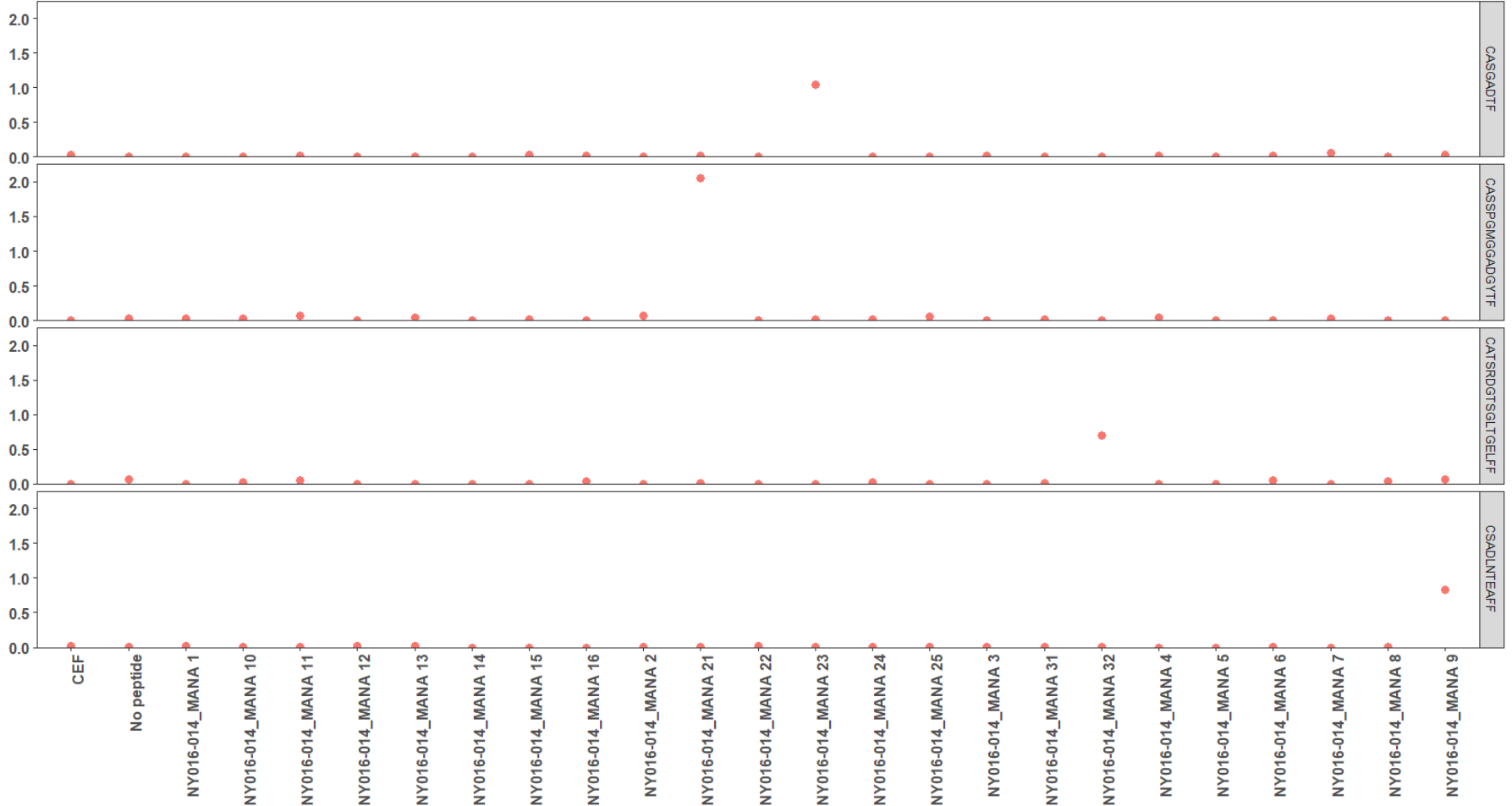
**Patient NY016-007**



**Patient NY016-014**

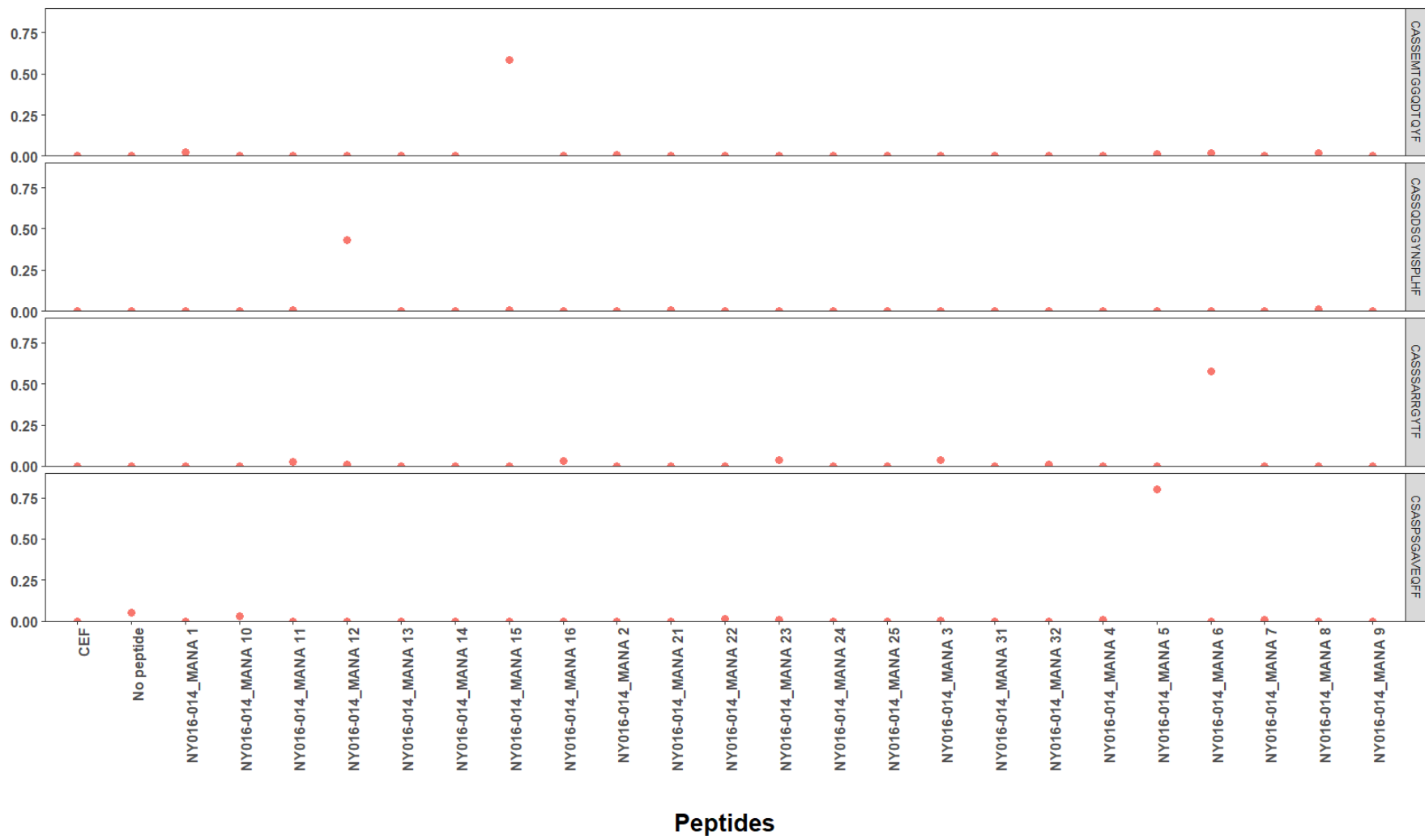


# Frequency among Expanded T Cells (%)

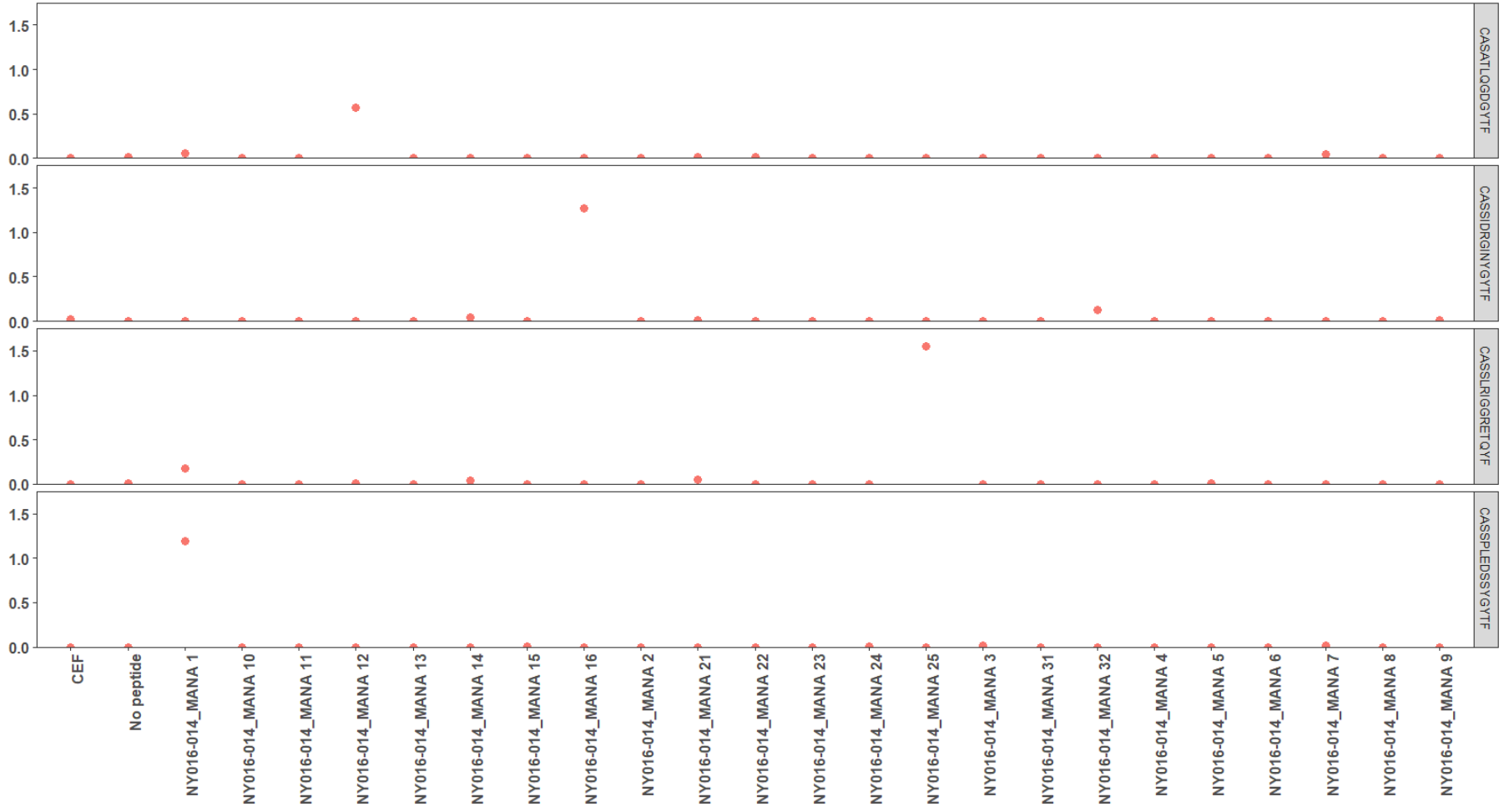


## Peptides

# Frequency among Expanded T Cells (%)



Frequency among Expanded T Cells (%)



Peptides

**Patient NY016-025**

