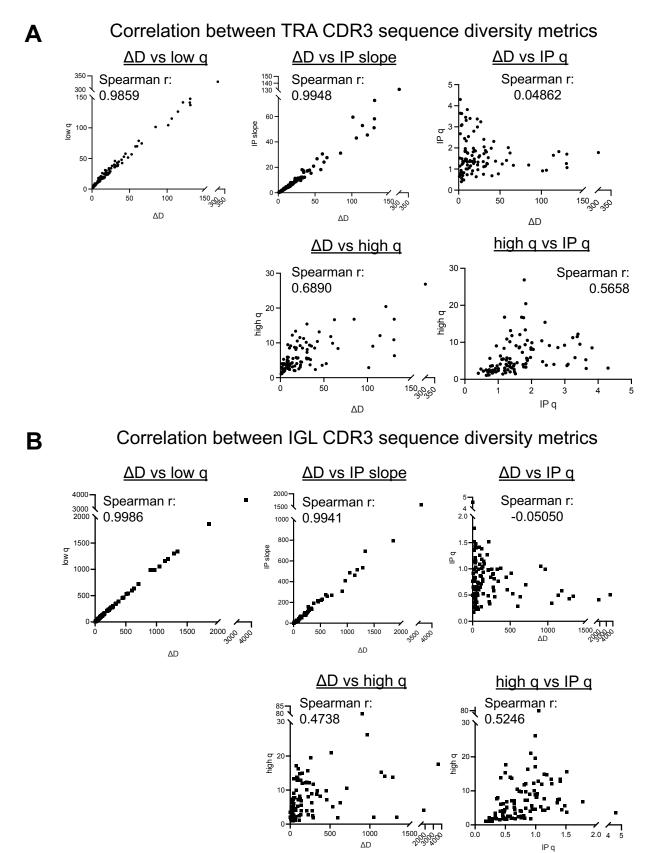
# A two pean 1×108 1×108 1×108 1×108 cohort

### **READ COUNT PER PATIENT SUMMARY**

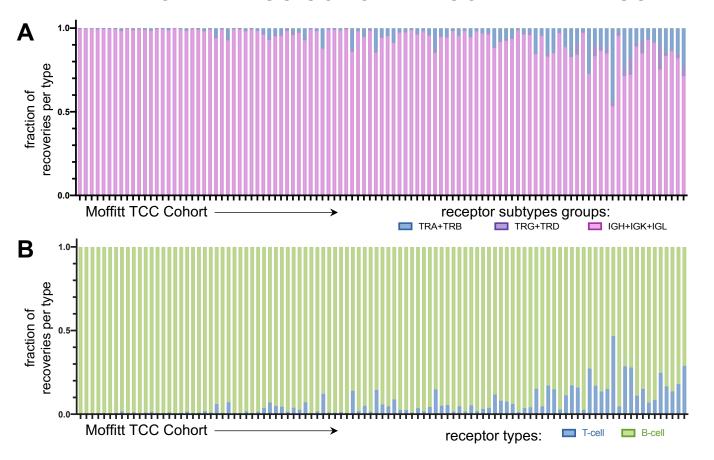
	Moffitt TCC	CPTAC-3	TCGA-KIRC
Minimum	52,681,974	103,511,778	46,385,620
Median	99,130,487	167,532,845	149,172,293
Mean	105,428,221	169,287,091	149,988,431
Maximum	315,438,680	301,887,952	347,818,908

**Supplementary Figure S1: Distributions of read counts per sample across all three cohorts.** (A) Distribution of individual reads counts per patient across the Moffitt TCC Cohort, CPTAC-3 Cohort, and the TCGA-KIRC Cohort. (B) Summary table of the minimum, median, mean, and maximum number of read counts across all three cohorts.

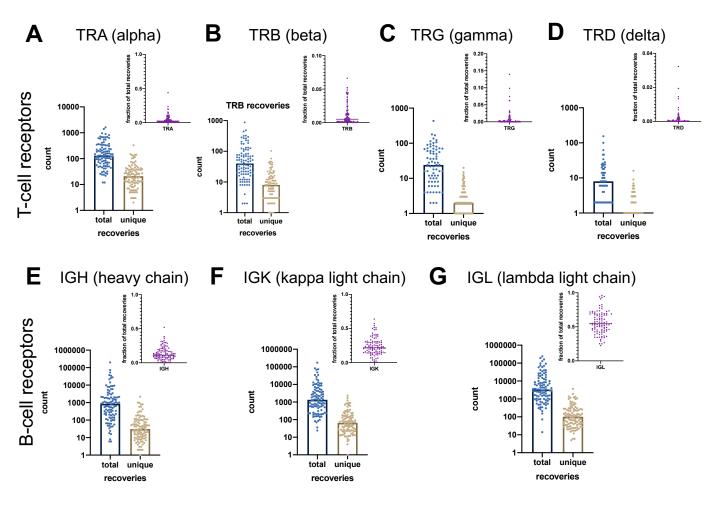


Supplementary Figure S2: Correlation analysis showing the low q,  $\Delta D$ , and inflection point slope diversity metrics are highly correlated and give the same information. Correlations were assessed using a Spearman correlation coefficient (r) across all samples in the cohort segregated by receptor type, highlighting TRA & IGL CDR3 sequence diversities here.

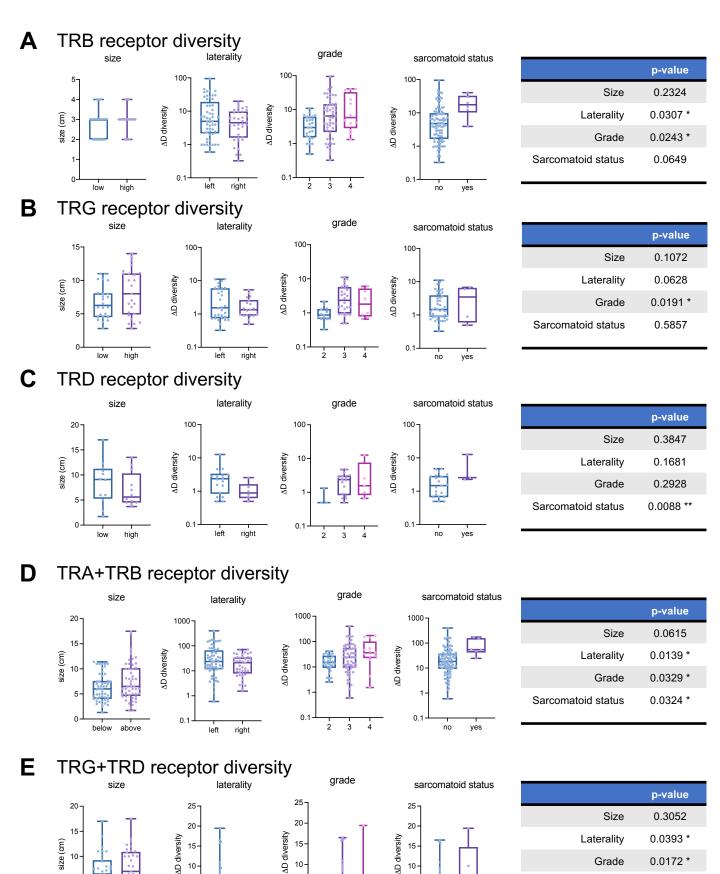
### MOFFITT TCC COHORT RECOVERY LANDSCAPE



Supplemental Figure S3: Tumor infiltrating lymphocyte receptor recovery landscape the Moffitt TCC Cohort of clear cell renal cell carcinoma. Patient tumors undergo bulk RNA sequencing and then CDR3 sequences from TCR and BCR receptors were recovered. Then for each patient, CDR3s are segregated by receptor class. Fig. 1B shows total recoveries per patient was reported in a bar plot with each bar reflecting the total number of recoveries from each patient and the proportion of each recovery type per patient was reported for individual T-cell and B-cell receptor types. The proportion of each recovery type per patient grouped by common receptor combinations (C) and per cell type combinations (D) are reflected in the bar charts above.



Supplemental Figure S4: Recovery counts per patient across all seven tumor-infiltrating lymphocyte receptor subtypes in the Moffitt TCC Cohort of clear cell renal cell carcinoma patients. Patient tumors undergo bulk RNA sequencing and then CDR3 sequences from TCR and BCR receptors were recovered. Then for each patient, CDR3 sequences were segregated by receptor class. Total and unique recovery counts per patient as well as the fraction of those recoveries out of all recoveries for each patient were reported for T-cell receptors (TR) type (A) alpha, (B) beta, (C) gamma, and (D), delta, as well as B-cell receptors immunoglobulin (IG) type (E) heavy chain, (F) kappa light chain, and (G) lambda light chain.



AD diversity

10

Grade

Sarcomatoid status

0.0172 \*

0.0847

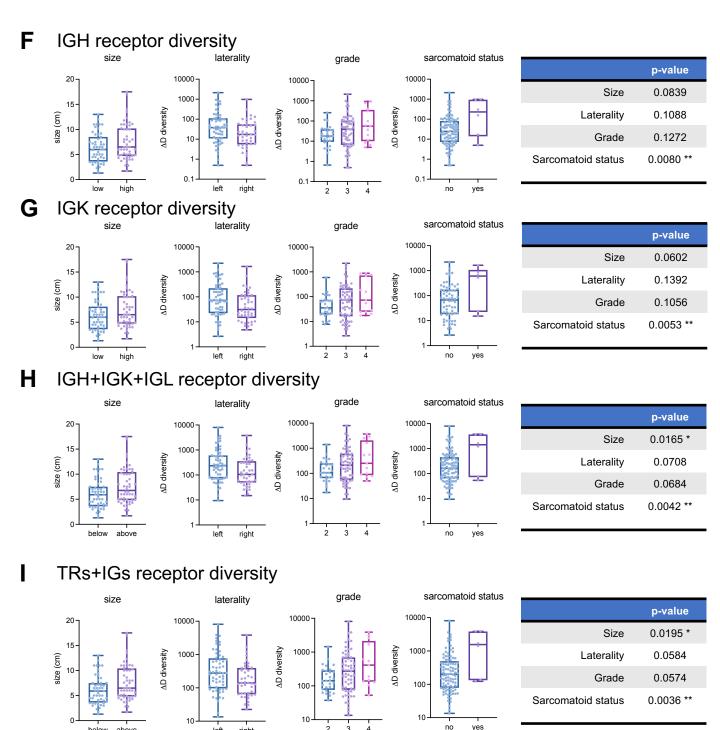
### Supplementary Figure S5. (continued on next page)

10

15

10

size (cm)

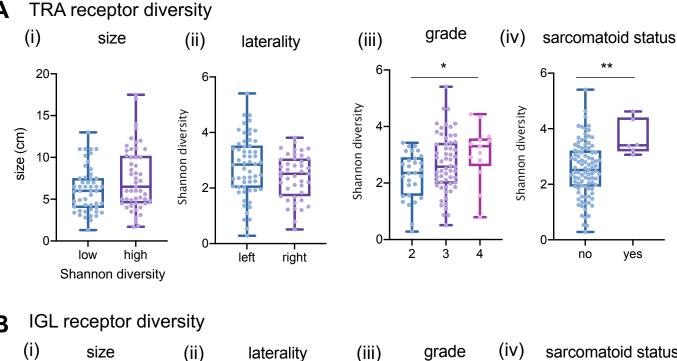


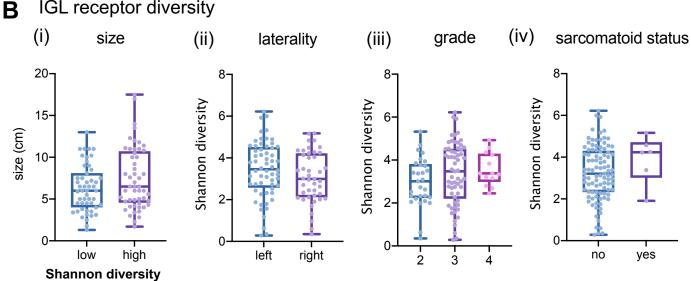
Supplementary Figure S5. Species richness associated with larger and worse tumors across other receptor combinations. Receptor diversity with respect to largest diameter (size, cm), laterality, grade, and sarcomatoid status for (A) TRB recoveries, (B) TRG recoveries, (C) TRD recoveries, (D) TRA and TRB recoveries, (E) TRG and TRD recoveries, (F) IGH recoveries, (G) IGK recoveries, (H) IGH, IGK, IGL (or B-cell) recoveries, and (I) total (TRs+IGs) recoveries. Similar plots for TRA recoveries and IGL recoveries are in Fig 2. p-value significance represented by \* < 0.05, \*\* < 0.01, \*\*\* < 0.001

below

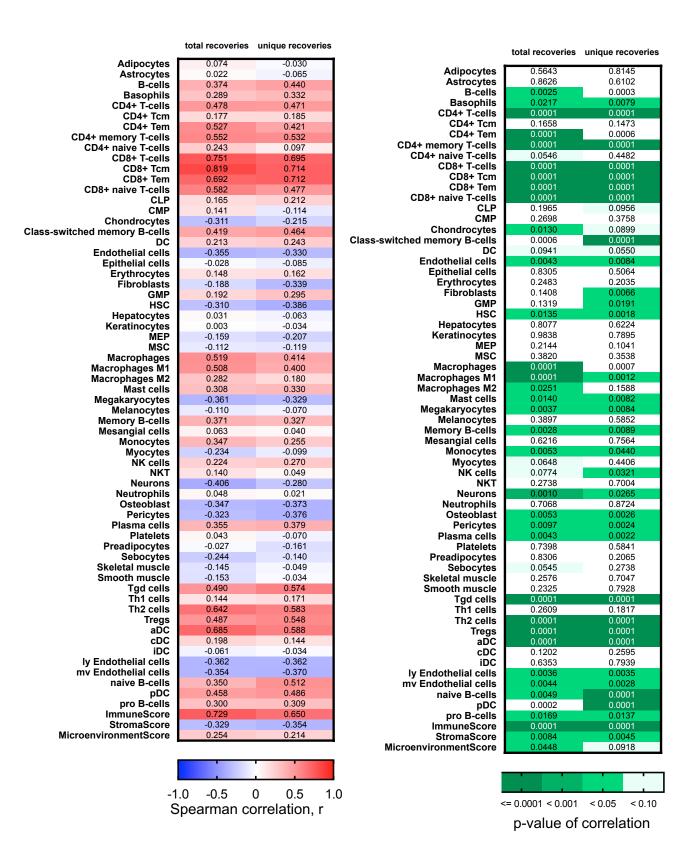
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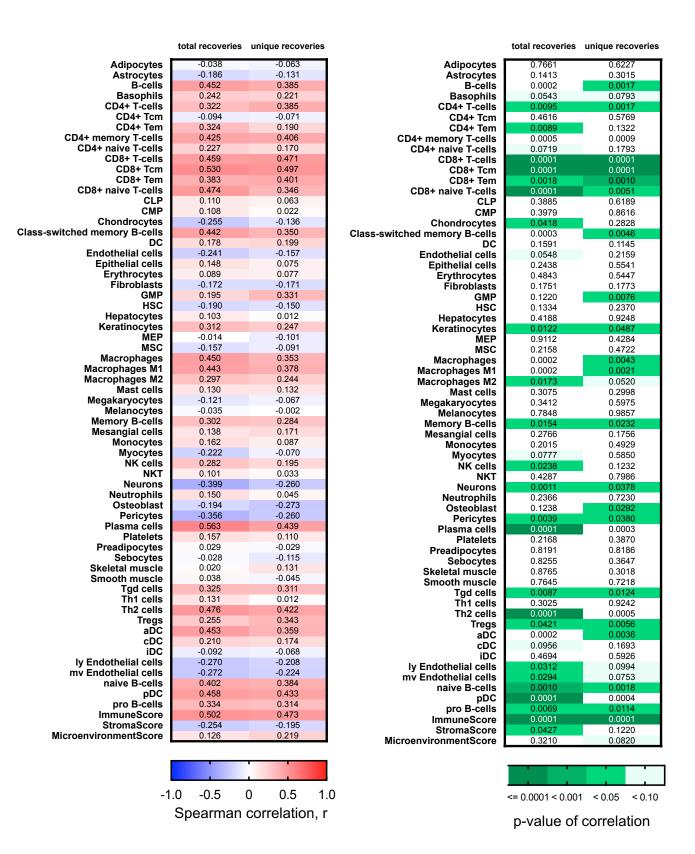
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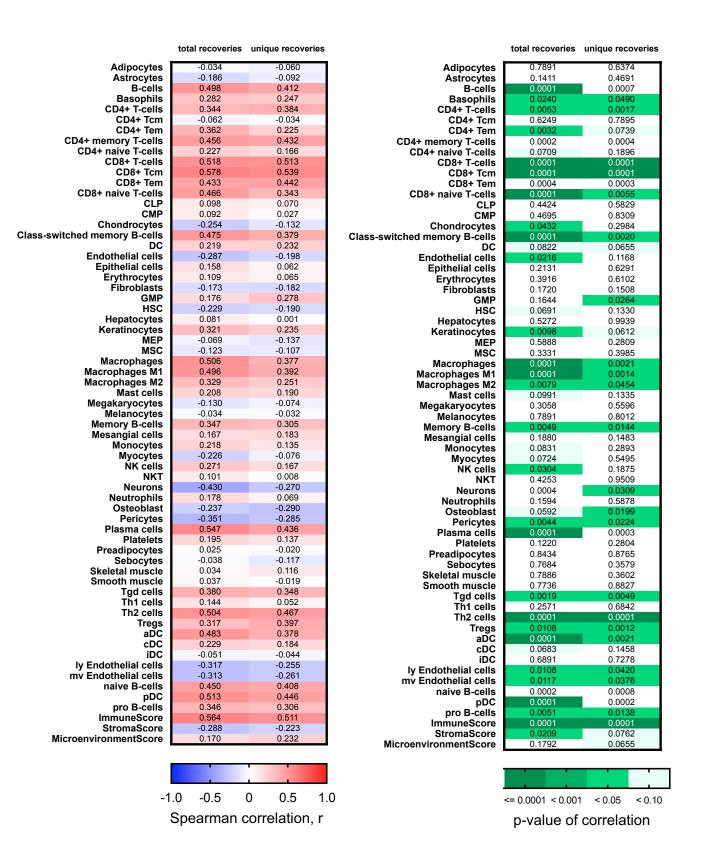




Supplemental Figure S6: Shannon diversity does not capture the same clinical information in TRA and IGL receptors. (A) TRA receptor CDR3 sequence Shannon diversity across the Moffitt TCC Cohort trends in (i) largest diameter tumors (low diversity had mean diameter of 6.2 cm and high diversity had a mean diameter for 7.5 cm; p-value: 0.0506), (ii) tumor laterality (score of 2.762 on left vs 2.401 on right; p-value: 0.0729), (iii) grade (mean score from grade 2 was 2.262, mean score from grade 3 was 2.682, and mean score from grade 4 was 3.049; p-value: 0.0414), and (v) sarcomatoid status (no mean score of 2.541 vs yes mean score of 3.675; p-value 0.0065). (B) IGL receptor CDR3 sequence Shannon diversity no significant trends for (i) size (low diversity had mean diameter of 6.3 cm and high diversity had a mean diameter for 7.5 cm; p-value: 0.0676), (ii) laterality (score of 3.436 vs 3.063; p-value: 0.1548), (iii) grade (mean score from grade 2 was 2.979, mean score from grade 3 was 3.363, and mean score from grade 4 was 3.564; p-value: 0.3060), and (iv) sarcomatoid status (no had a mean score of 3.241 vs yes with a mean score of 3.917; p-value: 0.2216). Unpaired t-tests were used to compare two group data and ANOVA was used to compare grade, three group data. p-value significance represented by \* < 0.05, \*\* < 0.01, \*\*\* < 0.001

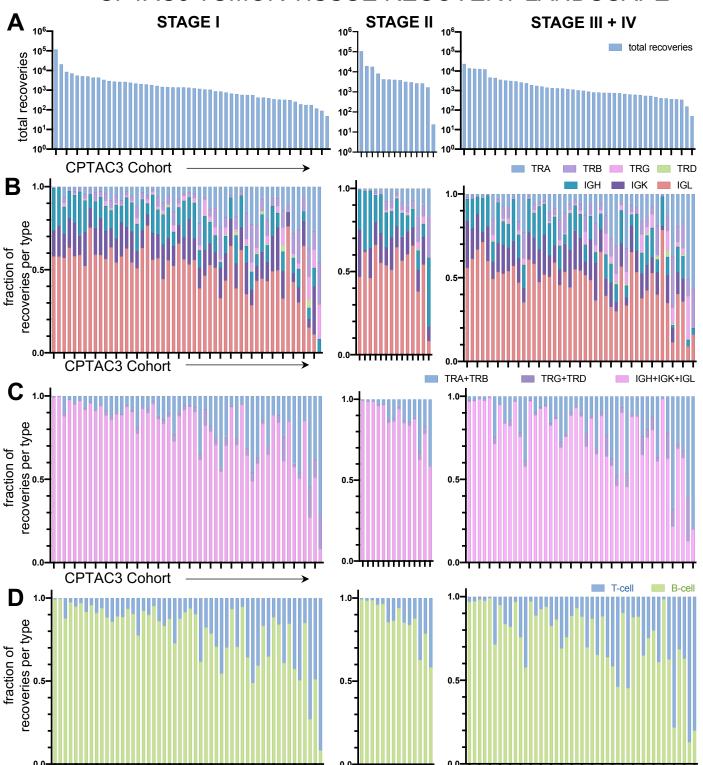






Supplemental Figure S9: TRs+IGs receptors full xCELL score Spearman correlation heatmaps and associated p-values.

### CPTAC3 TUMOR TISSUE RECOVERY LANDSCAPE



Supplemental Figure S10: Tumor infiltrating lymphocyte receptor recovery landscape the tumor tissue from the CTPAC3 clear cell renal cell carcinoma cohort. Patient tumors undergo bulk RNA sequencing and then CDR3 sequences from TCR and BCR receptors were recovered. Then for each patient, CDR3s are segregated by receptor class. (A) Total recoveries per patient was reported in a bar plot with each bar reflecting the total number of recoveries from each patient. The proportion of each recovery type per patient was reported for individual T-cell and B-cell receptor types (B), common receptor combinations (C), and per cell type combinations (D).

**CPTAC3 Cohort** 

## MOFFITT TCC COHORT

	Stage I	Stage II	Stage III + IV	Overall
Number of patients (n)	31	3	68	103
T-cell % mean (median)	0.06383	0.06421	0.06787	0.06595
	(0.04803)	(0.01471)	(0.02659)	(0.03677)
T-cell % range	0.0040044,	0.01125,	0.0004771,	0.0004771,
	0.1707	0.1667	0.4671	0.4676
B-cell % mean (median)	0.9362	0.9358	0.9321	0.9341
	(0.9520)	(0.9853)	(0.9734)	(0.9632)
B-cell % range	0.8293,	0.8333,	0.5324,	0.5324,
	0.9960	0.9888	0.9995	0.4671

**ANOVA**: p-value: 0.9736 (of % T-cells by Stage)

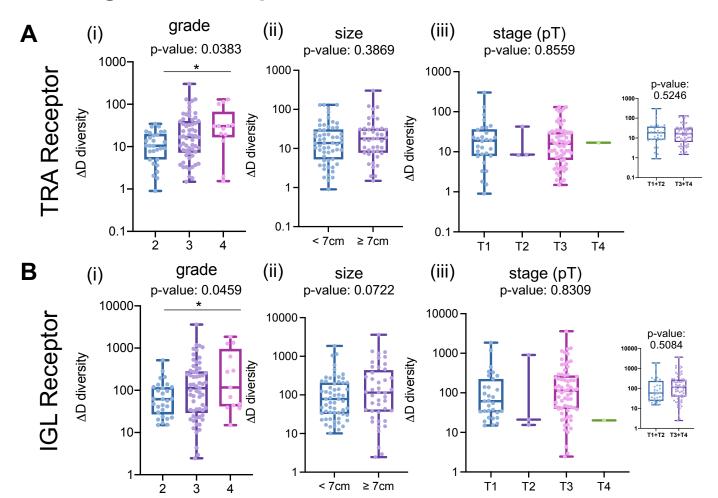
### **CPTAC-3 COHORT**

	Stage I	Stage II	Stage III + IV	Overall
Number of patients (n)	52	14	45	111
T-cell % mean (median)	0.2061 (0.1315)	0.1349 (0.1297)	0.2388 (0.1751)	0.2104 (0.1386)
T-cell % range	0.003466, 0.9167	0.007548, 0.4167	0.008270, 0.8701	0.003466, 0.9167
B-cell % mean (median)	0.7939 (0.8685)	0.8651 (0.8703)	0.7612 (0.8249)	0.7896 (0.8614)
B-cell % range	0.08333, 0.9965	0.5883, 0.9925	0.1299, 0.9917	0.08333, 0.9965

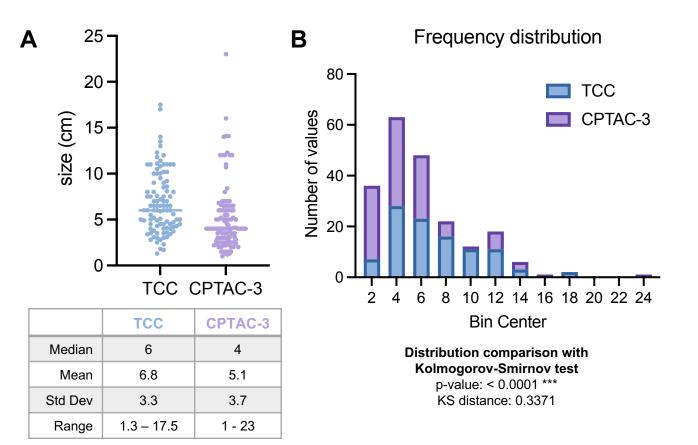
ANOVA: p-value: 0.2145 (of % T-cells by Stage)

Supplemental Figure S11: Comparison of T-cell and B-cell contributions to recovery landscape in the Moffitt TCC and CTPAC-3 clear cell renal cell carcinoma cohorts.

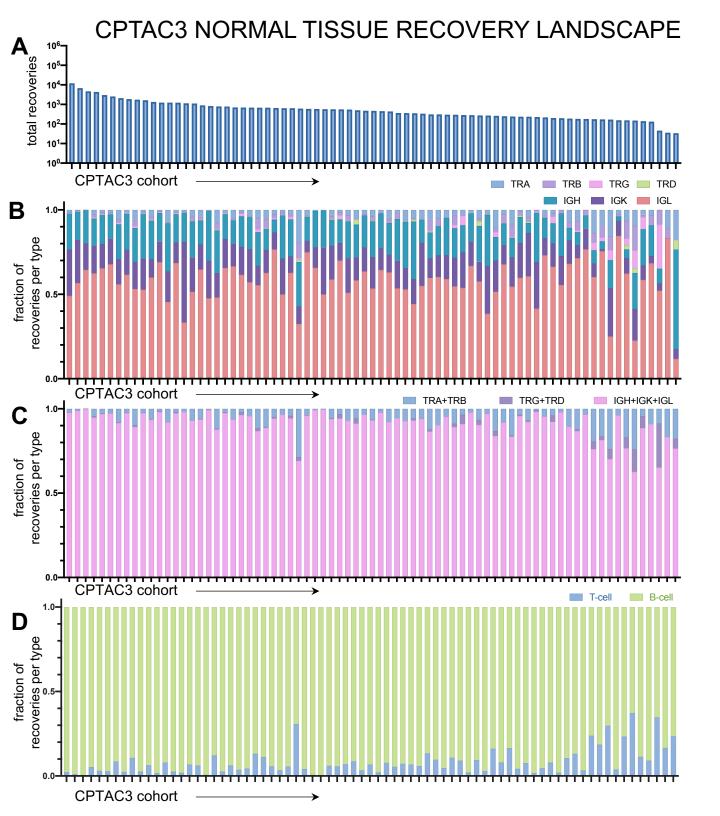
# Figure 3 B Comparable Plots in Moffitt TCC Cohort



Supplemental Figure S12: Comparable size, grade, and stage (pT) plots of  $\Delta D$  diversity in TRA and IGL receptors of the Moffitt TCC cohort. Based on the clinical data available. some of the comparisons between the Moffitt TCC cohort and CPTAC-3 cohort are a little different. The panels in this figure show the same grouping of data from the Moffitt TCC cohort as shown in the validation CPTAC-3 cohort data shown in Fig. 3B. (A) TRA receptor CDR3 sequence  $\Delta D$  diversity was increased diversity in (i) with higher grade tumors (replicate of figure panel Fig. 2A iii), (ii) larger diameter tumors (tumors with a largest tumor diameter above 7cm had a mean ΔD diversity of 32.67, tumors with a diameter below 7cm had a mean ΔD diversity of 25.47; p-value: 0.03869), and (iii) stage (mean score for T1 tumors was 33.84, mean score for T2 tumors was 19.77, mean score for T3 tumors was 27.11, and mean score for T4 tumors was 16.87, p-value 0.8559; mean score for T1+T2 tumors was 32.56 and for T3+T4 tumors was 26.95, p-value: 0.5246). (B) IGL receptor CDR3 sequence ΔD diversity showed similar trends as TRA receptor CDR3 sequence diversity for (i) grade (replicate of figure panel Fig. 2B iii), (ii) size (tumors with a largest tumor diameter above 7cm had a mean ΔD diversity of 349.0, tumors with a diameter below 7cm had a mean ΔD diversity of 179.4; pvalue: 0.0722), and (iii) stage (mean score for T1 tumors was 198.8, mean score for T2 tumors was 314.1, mean score for T3 tumors was 279.3, and mean score for T4 tumors was 20.20, pvalue 0.8309; mean score for T1+T2 tumors was 209.0 and for T3+T4 tumors was 275.5, pvalue: 0.5084). Unpaired t-tests were used to compare two group data and ANOVA was used to compare grade, three group data. p-value significance represented by \* < 0.05. \*\* < 0.01. \*\*\* < 0.001



Supplemental Figure S13: Comparison of the largest diameter size distribution of the Moffitt TCC and CPTAC-3 renal cell carcinoma cohorts. (A) Distribution of largest diameter sizes (in cm) of tumors from the Moffitt TCC and CPTAC-3 Cohort with descriptive statistics showing that mean and median diameter of CPTAC-3 tumors is smaller than the mean and median diameter of Moffitt TCC tumors. (B) Histogram of the frequency distribution of tumors that show the distribution of Moffitt TCC and CPTAC-3 tumors are statistically significantly different (Kolmogorov-Smirnov test, distance of 0.3371 and p-value < 0.0001).



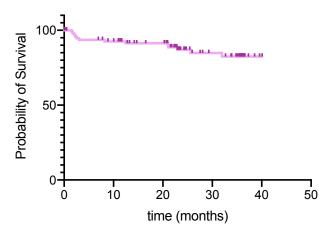
Supplemental Figure S14: Tumor infiltrating lymphocyte receptor recovery landscape the normal tissue from CPTAC3 clear cell renal cell carcinoma cohort. Patient tumors undergo bulk RNA sequencing and then CDR3 sequences from TCR and BCR receptors were recovered. Then for each patient, CDR3s are segregated by receptor class. (A) Total recoveries per patient was reported in a bar plot with each bar reflecting the total number of recoveries from each patient. The proportion of each recovery type per patient was reported for individual T-cell and B-cell receptor types (B), common receptor combinations (C), and per cell type combinations (D).

	CPTAC-3 cohort low q diversity				
grouping	clinical variable	p-value test	result		
TRA	normal vs tumor (matched)	<0.0001 paired	t-test mean difference between tumor-normal: 29.55 (95% CI: 21.97, 37.12)		
TRB	normal vs tumor (matched)	<0.0001 paired	t-test mean difference between tumor-normal: 19.51 (95% CI: 14.76, 24.26)		
TRG	normal vs tumor (matched)	<0.0001 paired	t-test mean difference between tumor-normal: 4.633 (95% CI: 3.039, 6.227)		
TRD	normal vs tumor (matched)	0.0282 paired	t-test mean difference between tumor-normal: 0.9988 (95% CI: 0.1198, 1.878)		
IGH	normal vs tumor (matched)	0.0041 paired	t-test mean difference between tumor-normal: 39.39 (95% CI: 12.87, 65.91)		
IGK	normal vs tumor (matched)	0.0013 paired	t-test mean difference between tumor-normal: 64.49 (95% CI: 26.00, 103.0)		
IGL	normal vs tumor (matched)	0.0003 paired	t-test mean difference between tumor-normal: 77.63 (95% CI: 36.97, 118.3)		
TRA+TRB	normal vs tumor (matched)	<0.0001 paired	t-test mean difference between tumor-normal: 50.84 (95% CI: 39.13, 62.54)		
TRG+TRD	normal vs tumor (matched)	<0.0001 paired	t-test mean difference between tumor-normal: 6.628 (95% CI: 4.462, 8.795)		
IGH+IGK+IGL	normal vs tumor (matched)	0.0008 paired	t-test mean difference between tumor-normal: 177.4 (95% CI: 76.62, 278.3)		
TRs+IGs	normal vs tumor (matched)	<0.0001 paired	t-test mean difference between tumor-normal: 233.2 (95% CI: 125.8, 340.5)		

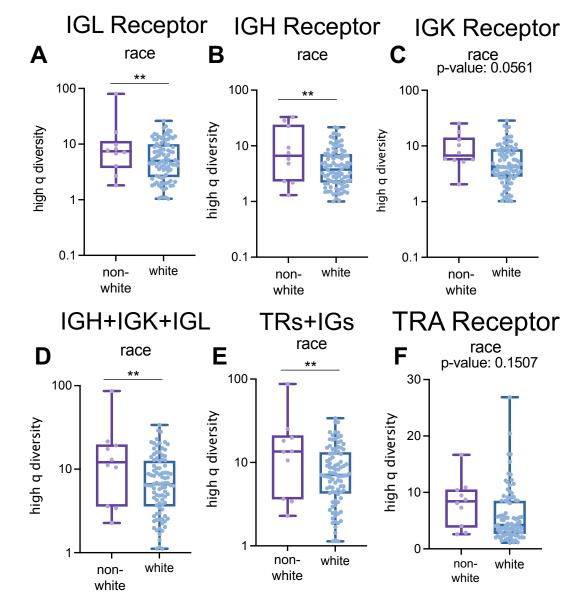
CPTAC-3 cohort high q diversity				
grouping	clinical variable	p-value to	est	result
TRA	normal vs tumor (matched)	<0.0001 p	aired t-test	mean difference between tumor-normal: 4.655 (95% CI: 2.883, 6.426)
TRB	normal vs tumor (matched)	<0.0001 p	aired t-test	mean difference between tumor-normal: 4.195 (95% CI: 2.863, 5.527)
TRG	normal vs tumor (matched)	<0.0001 p	aired t-test	mean difference between tumor-normal: 1.754 (95% CI: 1.091, 2.416)
TRD	normal vs tumor (matched)	0.0291 p	aired t-test	mean difference between tumor-normal: 0.5970 (95% CI: 0.06811, 1.126)
IGH	normal vs tumor (matched)	0.0052 p	aired t-test	mean difference between tumor-normal: 2.538 (95% CI: 0.7827, 4.293)
IGK	normal vs tumor (matched)	0.0368 p	aired t-test	mean difference between tumor-normal: 2.991 (95% CI: 0.1885, 5.793)
IGL	normal vs tumor (matched)	0.3074 p	aired t-test	mean difference between tumor-normal: 1.022 (95% CI: -0.9598, 3.005)
TRA+TRB	normal vs tumor (matched)	<0.0001 p	aired t-test	mean difference between tumor-normal: 7.593 (95% CI: 5.237, 9.949)
TRG+TRD	normal vs tumor (matched)	<0.0001 p	aired t-test	mean difference between tumor-normal: 2.320 (95% CI: 1.520, 3.121)
IGH+IGK+IGL	normal vs tumor (matched)	0.1299 p	aired t-test	mean difference between tumor-normal: 2.287 (95% CI: -0.6887, 5.262)
TRs+IGs	normal vs tumor (matched)	0.0041 p	aired t-test	mean difference between tumor-normal: 4.902 (95% CI: 1.608, 8.196)

Supplemental Figure S15: Statistical comparison of low q (richness) and high q (evenness) across all receptor subtypes and combinations in the CPTAC-3 cohort.

**CPTAC-3 Overall Survival** 

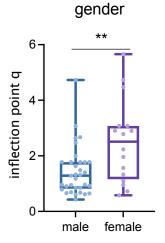


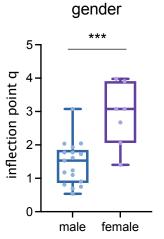
Supplemental Figure S16: CPTAC-3 Cohort overall survival could not confirm the Moffitt TCC survival trend because over 85% of patients were censored.



Supplemental Figure S17: Generalized diversity index can capture race-based difference in B-cell receptor CDR3 recoveries in the Moffitt TCC cohort. High q diversity differences in the Moffitt TCC Cohort based on race in (A) IGL receptor (score of 6.883 in white vs score of 14.47 in non-white, p-value: 0.0095), (B) IGH receptor (score of 5.376 in white vs score of 11.69 in non-white, p-value: 0.0026), (C) IGK receptor (score of 6.282 in white vs score of 9.832 in non-white, p-value: 0.0561), (D) IGH+IGK+IGL receptors (score of 8.712 in white vs score of 18.86 in non-white, p-value: 0.0026), (E) all receptors (score of 9.336 in white vs score of 19.67 in non-white, p-value: 0.0025), and (F) TRA receptor. Unpaired t-tests were used to compare categorical data. p-value significance represented by \* < 0.05, \*\* < 0.01, \*\*\* < 0.001

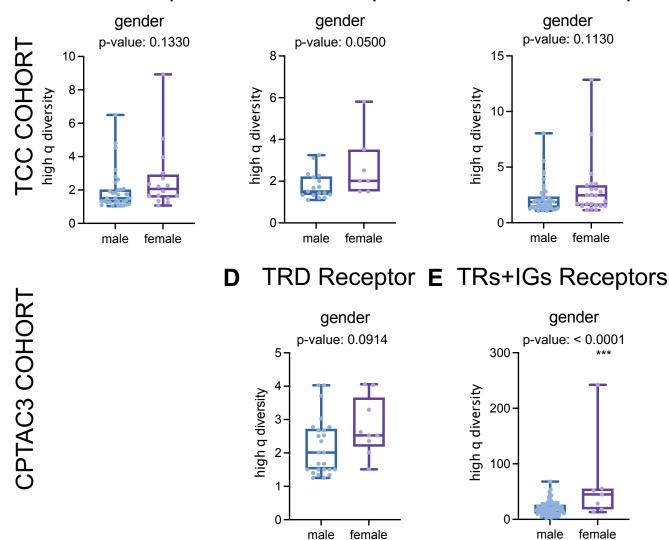
A TRG Receptor B TRD Receptor



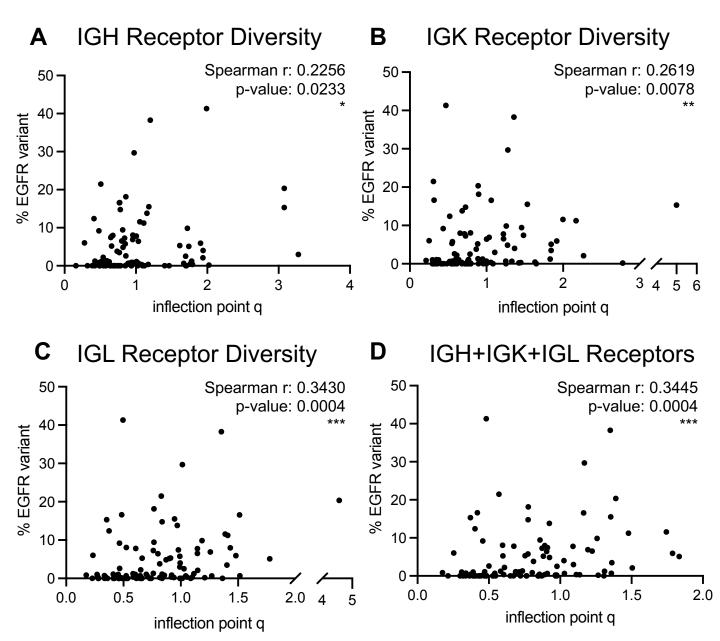


Supplemental Figure S18: Inflection point q diversity can also capture gender-based difference in T-cell receptor CDR3 recoveries in the Moffitt TCC cohort. (A) T-cell receptor gamma (TRG) inflection point q (IP q) was elevated in female patients compared to males (mean IP q in male patients was 1.442, mean IP q in female patients was 2.503; p-value: 0.0033). (B) T-cell receptor delta (TRD) inflection point q was elevated in female patients compared to males (mean IP q in male patients was 1.454, mean IP q in female patients was 2.883; p-value: 0.0003). Unpaired t-tests were used to compare categorical data. p-value significance represented by \* < 0.05, \*\* < 0.01, \*\*\* < 0.001

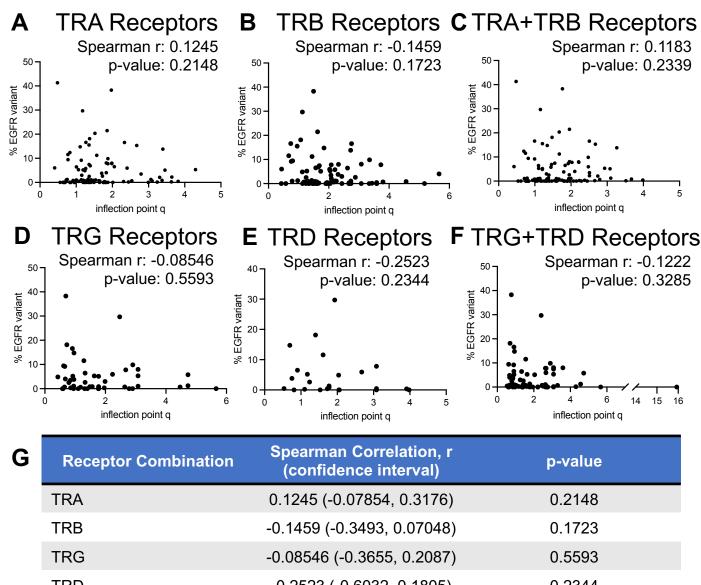
# A TRG Receptor B TRD Receptor C TRG+TRD Receptors



Supplemental Figure S19: Gender-based diversity differences trends exist in T-cell receptor evenness groupings in both the Moffitt TCC Cohort and the CPTAC-3 Cohort. (A) T-cell receptor gamma (TRG) high q diversity was elevated in Moffitt TCC female patients compared to males (mean score in male patients was 1.963, mean score in female patients was 2.663; p-value: 0.1330). (B) T-cell receptor delta (TRD) high q diversity was elevated in Moffitt TCC female patients compared to males (mean score in male patients was 1.791, mean score in female patients was 2.699; p-value: 0.0500). (C) Combination TRG and TRD high q diversity was also elevated in Moffitt TCC female patients (mean score in male patients was 2.195, mean score in female patients was 2.977; p-value: 0.1130). These findings in the Moffitt TCC Cohort were supported in the CPTAC-3 Cohort. (D) TRD high q diversity was elevated in CPTAC-3 female patients compared to males (mean score in male patients was 2.183, mean score in female patients was 2.769; p-value: 0.0914). (E) Combination TRG and TRD high q diversity was also elevated in CPTAC-3 female patients (mean score in male patients was 19.61, mean score in female patients was 64.90; p-value: < 0.0001; excluding the outstanding female score of 242 reduces the mean female score to 35.35 with a p-value of 0.0042 significant difference compared to the male scores). Unpaired t-tests were used to compare categorical data. p-value significance represented by \* < 0.05, \*\* < 0.01, \*\*\* < 0.001

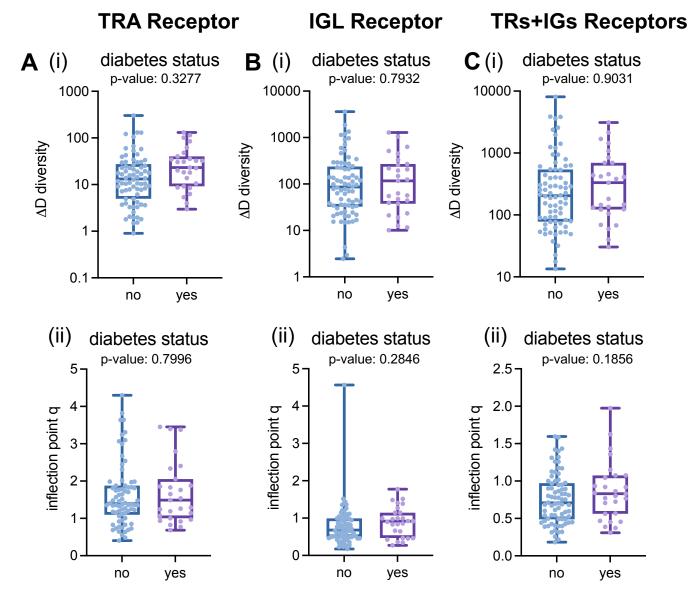


Supplemental Figure S20: B-cell receptor inflection point q diversity may be a surrogate for the proportion of a renal cell carcinoma tumor with an EGFR variant. (A) IGH receptor inflection point q measures versus % EGFR variant reflected a significant weak correlation (Spearman r: 0.2256; p-value: 0.0233). (B) IGK receptor inflection point q measures versus % EGFR variant reflected a significant weak correlation (Spearman r: 0.2619; p-value: 0.0078). (C) IGL receptor inflection point q measures versus % EGFR variant reflected a significant weak correlation (Spearman r: 0.3430; p-value: 0.0004). (D) Full combination of B-cell receptor inflection point q measures versus % EGFR variant reflected a significant weak correlation (Spearman r: 0.3445; p-value: 0.0004). p-value significance represented by \* < 0.05, \*\* < 0.01, \*\*\* < 0.001

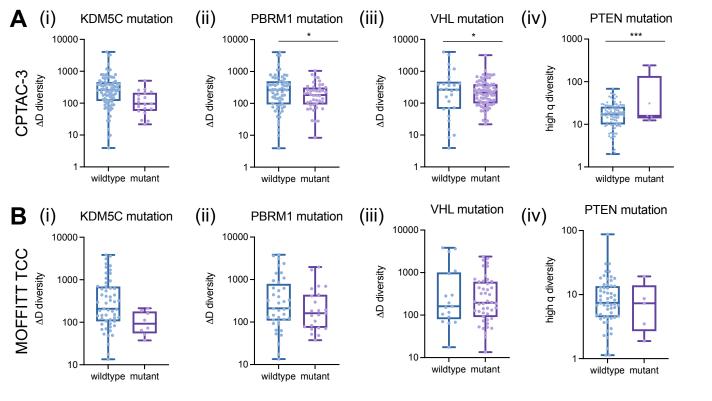


Receptor Combination	(confidence interval)	p-value
TRA	0.1245 (-0.07854, 0.3176)	0.2148
TRB	-0.1459 (-0.3493, 0.07048)	0.1723
TRG	-0.08546 (-0.3655, 0.2087)	0.5593
TRD	-0.2523 (-0.6032, 0.1805)	0.2344
TRA + TRB	0.1183 (-0.08271, 0.3101)	0.2339
TRG + TRD	-0.1222 (-0.3601, 0.1307)	0.3285
IGH	0.2246 (0.02566, 0.4064)	0.0233 *
IGK	0.2619 (0.06526, 0.4390)	0.0078 **
IGL	0.3430 (0.1544, 0.5074)	0.0004 ***
IGH + IGK + IGL	0.3445 (0.1561, 0.5087)	0.0004 ***
TRs + IGs	0.3360 (0.1467, 0.5015)	0.0005 ***

Supplemental Figure S21: T-cell receptor inflection point q diversity does not significantly correlate with % EGFR variant in the Moffitt TCC Cohort. No significant correlations were evaluated for inflection point q measures versus % EGFR variant in recovered (A) TRA receptors, (B) TRB receptors, (C) combined TRA and TRB receptors, (D) TRG receptors, (E) TRD receptors, or (F) combined TRG and TRD receptors. (G) Summary table of correlation statistics for all receptor combinations. p-value significance represented by  $^*$  < 0.05,  $^{**}$  < 0.01,  $^{***}$  < 0.001



Supplemental Figure S22: No associations with diabetes status and CDR3 diversity metrics in the Moffitt TCC Cohort. No significant associations were evaluated for ΔD diversity and inflection point q measures versus diabetes status in recovered (A) TRA recoveries, (B) IGL recoveries, (C) total (TRs+IGs) recoveries. (A) TRA receptors had (i) ΔD diversity had a mean score of 35.19 in individual with diabetes and mean score of 26.11 in those who did not have diabetes (p-value: 0.3277) and (ii) inflection point q had a mean score of 1.671 in individuals with diabetes and mean score of 1.623 in those who did not have diabetes (p-value: 0.7996). (B) IGL receptor had (i) ΔD diversity had a mean score of 231.2 in individual with diabetes and mean score of 259.2 in those who did not have diabetes (p-value: 0.7932) and (ii) inflection point q had a mean score of 0.9042 in individuals with diabetes and mean score of 0.7808 in those who did not have diabetes (p-value: 0.2846). (C) Total T-cell and B-cell receptors had (i) ΔD diversity had a mean score of 574.2 in individual with diabetes and mean score of 504.4 in those who did not have diabetes (p-value: 0.9031) and (ii) inflection point q had a mean score of 0.8662 in individuals with diabetes and mean score of 0.7601 in those who did not have diabetes (p-value: 0.1856). Unpaired t-tests were used for these analysis with p-value significance represented by \* < 0.05, \*\* < 0.01, \*\*\* < 0.001



Supplemental Figure S23: Total (TRs+IGs) recovery and diversity metric associations over the mutational landscape in clear cell renal cell carcinoma. (A) Total (TRs+IGs) recoveries had reduced richness in CPTAC-3 patients with (i) KDM5C mutations (mean score of wildtype was 431.1 and mutant was 138.0; p-value: 0.0515), (ii) PBRM1 mutations (mean score of wildtype was 473.7 and mutant was 240.7; p-value: 0.0448), and (iii) VHL mutations (mean score of wildtype was 575.9 and mutant was 313.8; p-value: 0.0446) and increased evenness in patients with (iv) PTEN mutations (mean score of wildtype was 19.14 and mutant was 63.30; p-value: <0.0001). (B) Total recoveries had reduced richness in Moffitt TCC patients with (i) KDM5C mutations (mean score of wildtype was 627.6 and mutant was 112.4; p-value: 0.1128), (ii) PBRM1 mutations (mean score of wildtype was 674.6 and mutant was 366.6; p-value: 0.1716), and (iii) VHL mutations (mean score of wildtype was 835.1 and mutant was 461.3; p-value: 0.1253) and increased evenness in patients with (iv) PTEN mutations (mean score of wildtype was 10.92 and mutant was 8.121; p-value: 0.6183). Unpaired t-tests were used to compare two group data and ANOVA was used to compare grade, three group data. p-value significance represented by \* < 0.05, \*\* < 0.01, \*\*\* < 0.001