#### SUPPLEMENT

#### 2 Methods

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## 3 Flow Cytometry

- 4 Gates were drawn on CD45<sup>+</sup> leukocytes by doublet exclusion (forward scatter height vs forward
- 5 scatter area; side scatter height vs side scatter area) and dead cell exclusion using fixable
- 6 viability dyes. Live lymphocytes size gates were further defined with sequential gating on the
- 7 CD3<sup>+</sup> T cell population, followed by CD4<sup>+</sup> and CD8<sup>+</sup> T subset gating. Among CD4<sup>+</sup> T cells,
- 8 Foxp3<sup>+</sup>CD25<sup>+</sup> cells were defined as regulatory (Treg) cells. NK cells were defined as CD45<sup>+</sup>
- 9 CD3<sup>-</sup>CD335<sup>+</sup> CD49b<sup>+</sup> cells. G-MDSC was defined as CD45<sup>+</sup> CD11b<sup>+</sup> I-A/I-E=Ly6G<sup>+</sup> Ly6C=
- cells, M-MDSC was defined as CD45<sup>+</sup> CD11b<sup>+</sup> I-A/I-E=F4/80<sup>-</sup> Ly6C<sup>+</sup> Ly6G= cells, and
- macrophages were defined as CD45<sup>+</sup> CD11b<sup>+</sup> I-A/I-E<sup>+</sup> F4/80<sup>+</sup> Ly6C<sup>-</sup> cells as previously
- described(19). Cells that did not fall within the MDSC (both G-MDSCs and M-MDSCs) and
- macrophage gates were designated as "undefined CD11b<sup>+</sup>" myeloid cells. Fluorescence minus
- one, unstained, and isotype controls were included for assessment of surface and intracellular
- proteins. The percentage of each cell subset within viable CD45<sup>+</sup> cells or total live cells in the
- tumor was calculated. The following antibodies and clones were used: CD45 (30-F11), CD11b
- 17 (M1/70), CD8 (53-6.7), Ly6G (1A8), F4/80 (BM8), Ly6C (AL-21), I-A/I-E (M5/114.15.2),
- 18 CD11c (N418), CD3e (145-2C11), CD4 (GK1.5), CD49b (DX5), CD335 (29A14), CD25
- 19 (PC61) FOXP3 (MF-14), TCRβ (H57-597), and GR-1 (clone RB6-8C5). All antibodies were
- 20 purchased from BioLegend or BD Biosciences.

## *Immunohistochemistry*

- 22 Sections were cut from formalin-fixed paraffin-embedded tissue blocks at 5 µm, baked at 60°C
- for 60 minutes, then deparaffinized and rehydrated with serial passage through changes of xylene

- 24 and graded ethanols. All slides were subjected to heat-induced epitope retrieval for 4 minutes at
- 25 120°C in a Decloaking Chamber (Biocare Medical) in 1× Target Retrieval Solution (Agilent).
- 26 Endogenous peroxidase in tissue was blocked by incubation of slides in 3% hydrogen peroxide
- solution before incubation with primary antibody (anti–mouse CD3, clone CD3-12 [AbD
- Serotec]) for 60 minutes. Antigen-antibody binding was detected through the application of
- 29 Rabbit Anti–Rat IgG (Abcam) and ImmPRESS HRP Horse Anti–Rabbit IgG Polymer Detection
- 30 Kit (Vector), followed by application of 3,3' diaminobenzidine chromogen (Agilent). Stained
- 31 slides were counterstained with hematoxylin and coverslipped for review.

# RNA extraction and targeted RNA profiling

- For tumor tissue RNA isolation, organs were homogenized into RNA STAT-60 (Tel-Test Inc.)
- using a polytron homogenizer, after which total RNA was extracted according to the
- manufacturer's instructions. After isopropanol precipitation, total RNA was reextracted with
- 36 phenol/chloroform/isoamyl alcohol (25:24:1; Sigma-Aldrich) using phase-lock light tubes
- 37 (ThermoFisherScientific). DNase-treated total RNA was reverse-transcribed using QuantiTect
- 38 Reverse Transcription (Qiagen) according to the manufacturer's instructions. 20× primer assays
- were obtained commercially from ThermoFisherScientific. Gene-specific preamplification was
- 40 performed on 10 ng cDNA according to the manufacturer's instructions (Biomark; Fluidigm).
- 41 Real-time quantitative polymerase chain reaction (PCR) was then performed on the Biomark
- 42 (Fluidigm) using 20× TaqMan primer assays (ThermoFisherScientific) with TaqMan Universal
- PCR Master Mix with no AmpErase UNG. Samples and primers were run on BioMark 96.96
- 44 Dynamic Arrays according to the manufacturer's instructions (Fluidigm). Ubiquitin levels were
- measured in a separate reaction and were used to normalize the data by the  $\Delta$ Ct method. Using

- the mean cycle threshold value for ubiquitin and the gene of interest for each sample, the
- equation  $1.8^{\text{(Ct ubiquitin Ct gene of interest)}} \times 10^4$  was used to obtain the normalized values.

## RNA-sequencing

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- 49 RNA-sequencing was performed using purified total RNA as previously described (1) and the
- TruSeq stranded total RNA RiboZero library preparation kit (catalog no. RS-122-2201)
- according to the manufacturer's instructions (Illumina). The resultant cDNA libraries were
- sequenced on Illumina HiSeqTM 4000 using a 50 base paired-end run. Cleaned reads were
- aligned to the Mouse.B38 genome reference using the Omicsoft Aligner (Qiagen) with  $\leq 2$
- allowed mismatches. Gene-level raw counts and fragments per kilobase million (FPKM) were
- determined by the OSA algorithm as implemented in Omicsoft Array Studio (v10.0.1.118) and
- using Ensembl.R93 gene models. Approximately 90% of reads across all samples mapped to the
- 57 reference genome (corresponding to 40-160 million reads). Gene count normalization and
- 58 differential expression analysis were performed based on modeling the raw counts within the
- 59 framework of a negative binomial model using the R package DESeq2 (v1.22.2) yielding fold
- 60 change and corrected P values (False Discovery Rate, Benjamini–Hochberg; FDR BH). Samples
- from vehicle-treated animals were used as baseline for muDX400 treatment comparisons. The
- 62 muDX400 differentially expressed genes (DEG) were identified by combining the significantly
- regulated genes across each tumor model (1.5 $\times$  and FDR <0.05, base mean >20). Data were
- 64 analyzed using Ingenuity Pathway Analysis (Qiagen) to obtain the top canonical pathways
- enriched in the muDX400 DEG set, with the enrichment *P* values depicted in the heatmap.
- 66 Sample annotations are listed in Table S3.

## Whole exome sequencing

Genomic DNA (gDNA) was extracted from cell lines grown in vitro using standard protocols. gDNA was sequenced using the Agilent SureSelect Mouse Exon Kit with 90 base paired endreads on the Illumina HiSeq 2500. Somatic mutation calling was performed by aligning the whole exome sequencing reads to the mouse reference genome GRCm38 using the BWA-MEM algorithm (2) followed by preprocessing steps including duplicate marking, indel realignment, and base recalibration with Picard (v1.114) and GATK (Genome Analysis Toolkit, version 3.8) (3) to generate analysis-ready BAM files. Somatic mutations were detected using GATK3.7 MuTect2 (4) with default parameters by inputting the analysis-ready BAM files of tumor and matched normal tissue (parameter "--dbsnp" was assigned with mouse Single Nucleotide Polymorphism Database [dbSNP]; v150) (5). Variants called by MuTect2 that were present in the dbSNP(v150) were removed. Variants with a mutant allele depth <4 or a total read depth <15 were excluded. Variants were annotated with their most deleterious effects on Ensembl transcripts with Ensembl VEP (Variant Effect Predictor, version 86) (6) on GRCm38. Tumor mutational burden was defined as the sum of somatic nonsynonymous variants (including singlenucleotide variants and indels) that passed all the filters described. For neoantigen prediction, mutant 8-11mer peptides that could arise from the identified nonsilent mutations in each tumor cell line were identified. If the variant gave rise to a single amino acid change, the mutant peptide was scanned with a sliding window of 8 to 11 amino acids around the variant to generate all possible 8, 9, 10, and 11mers. If the variant created large novel stretches of amino acids that were not present in the reference genome (eg, stop losses or frameshifts), all possible peptides of 8, 9, 10, and 11mers were extracted from the large novel peptide. The binding ability between all the mutant peptides and mouse H2-D, H2-K, H2-L alleles were predicted by netMHC (4.0) (7) with default parameters. For each specific variant,

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the associated peptides were considered to be neoantigens if the half-maximal inhibitory concentration binding affinity scores of mutant peptides were <500 nM. The number of RNA-sequencing reads covering each of the predicted variants was extracted from the samtools (v1.6) (8) mpileup results (with RNA-sequencing bam files processed by Omicsoft as described above, except that Ensembl.R86 was used as the gene model reference). Neoantigens were considered expressed if both the mutant and the reference alleles were found in ≥5 RNA-sequencing reads.

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Table S1. Protein and RNA expression levels of PD-1 and PD-L1

	Immunohistochemistry <sup>a</sup> RNAseq (FPKM_log <sub>2</sub> )								
			Pdcd1 (Pd1)		Cd274 (Pdl1)			PD-1 Response	
Model	PD-1 Expression	PD-L1 Expression	Baseline	Isotype	muDX400	Baseline	Isotype	muDX400	
MC38	Moderate	High	-0.4	1.1	3.7	3.5	3.5	5.6	Highly responsive
MBT2	High	Moderate to very high	3.8	3.8	4.9	3.9	3.6	5.5	Highly responsive
CM3	Moderate	High	1.1	1.1	3.0	5.2	5.1	6.9	Highly responsive
RENCA	Moderate	Very high	2.0	2.7	3.4	4.6	4.3	5.4	Partially responsive
CT26	Moderate to high	Very high	2.7	1.9	3.2	4.9	3.3	4.1	Partially responsive
MB49	Low to moderate	High	1.1	1.2	1.8	4.0	4.2	4.4	Partially responsive
EMT6	Moderate	Low to moderate to high <sup>b</sup>	-1.2	0.0	0.6	3.2	4.2	5.2	Partially responsive
4T1	Low	Low to moderate to high <sup>b</sup>	-1.2	1.3	1.7	3.6	3.8	3.9	Resistant
TC1	Moderate	High	0.7	-0.9	-0.6	3.1	2.3	2.3	Resistant
B16-F10	Low	Low	-2.2	-3.5	-1.8	0.4	0.6	1.6	Resistant
LL/2	Low to moderate	Low	-0.7	-3.8	-2.5	1.2	1.5	1.3	Resistant

Abbreviations: CR, complete response; FPKM, fragments per kilobase million; PD-1, programmed death 1; PD-L1, programmed death ligand 1; TGI, tumor growth inhibition.

<sup>a</sup>Highly responsive defined as >70% TGI with multiple CRs), partially responsive defined as 30%-70% TGI with occasional CRs, and resistant defined as <30% TGI.

Table S2. Gene expression changes across 11 syngeneic tumor models. <<See Excel Grid>>

Table S3. Sample details of mice in each syngeneic tumor model << See Excel Grid>>

<sup>&</sup>lt;sup>b</sup>Significant interspecimen variability.

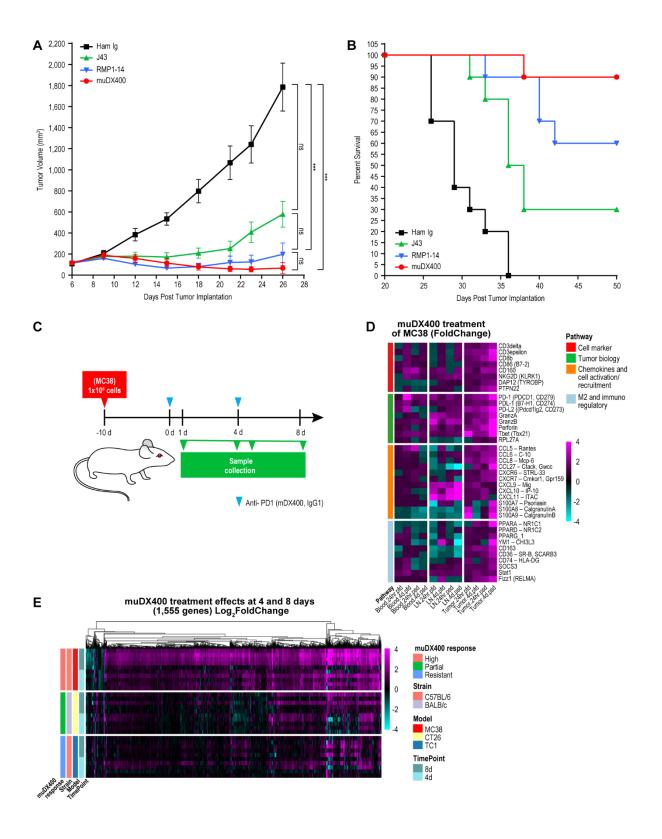


Fig. S1. Comparison of muDX400 in the MC38 model with commercially available anti-PD-1 reagents. A-B, The antitumor activity of muDX400 (muIgG1) was compared with that of the anti-PD-1 clones RMP1-14 (rat IgG2a) and J43 (hamster IgG). Single-agent treatment with 5 mg/kg muDX400 (or muIgG1 isotype control) began when subcutaneous tumors reached 100 mm<sup>3</sup> on average, denoted as day 0. Doses were administered intraperitoneally, with dosing every 5 days for up to five total doses. Tumor volumes of RMP1-14— and muDX400-treated mice were significantly different from those of isotype controls (P<0.001) by one-way analysis of variance but not from each other. Similarly, survival between RMP1-14 and muDX400 was not significant (log-rank test) but was improved over isotype and J43 (P=0.005). C-E, Time course of gene expression in blood, LN, and tumors of MC38. MC38 tumorbearing mice were treated with 5 mg/kg muDX400. (C) Blood, LN, and tumor were harvested at 24 hours and 4 hours after the first dose or the second dose of the antibody. D, Samples from three mice were analyzed with the use of TaqMan Real-Time PCR for a select set of genes. Values were normalized for expression against housekeeping genes and expressed as fold-change compared with isotype-treated samples harvested at the same time. E, As shown in Fig. 2A, RNA-sequencing of bulk tumors excised from syngeneic tumor models following single-agent treatment with 5 mg/kg muDX400 or muIgG1 isotype control, 4 days after the first dose or the second dose (see Methods). Shown in the heatmap are the 1555 genes differentially regulated by muDX400 compared with muIgG1 isotype control in any of the three tumor models shown (1.5× and FDR<0.05, base mean >20). The color gradient represents the log<sub>2</sub>fold change of each mouse (each row) treated with muDX400 compared with the corresponding pooled control mice treated with muIgG1 isotype as baseline (± log<sub>2</sub>-fold). Abbreviations: FDR, false discovery rate; LN, lymph nodes; muIgG1, mouse immunoglobulin G1; PCR, polymerase chain reaction; PD-1, programmed death 1; Q5D, every 5 days.

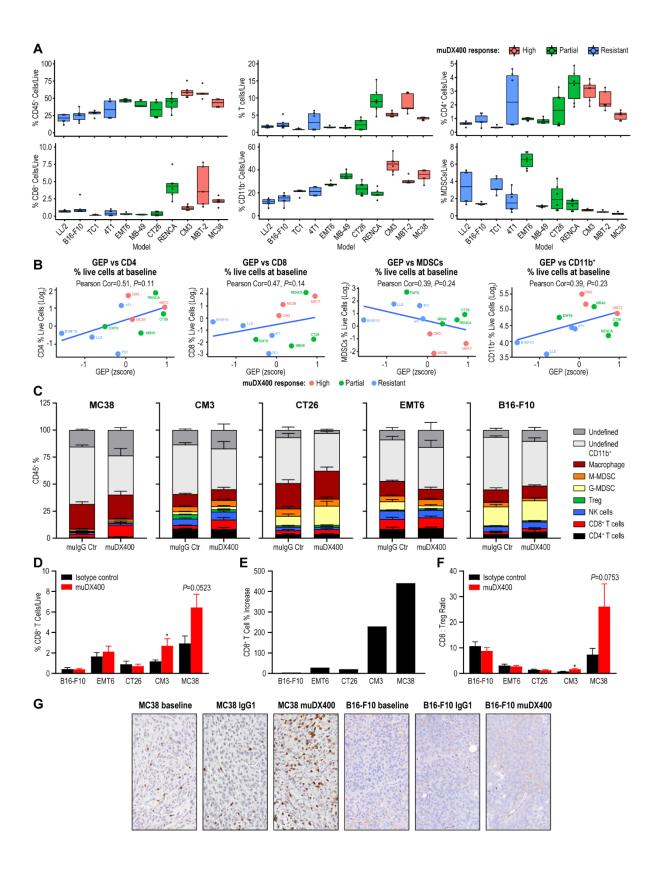


Fig. S2. Immune cell frequencies across differentially responsive syngeneic tumor models at baseline. Immune infiltrate frequency (as percentage of total live cells) in 100 mm<sup>3</sup> tumors was calculated for each syngeneic tumor model. Mice bearing 100 mm<sup>3</sup> tumors received two doses (day 0, day 4) of muIgG1 isotype control antibody or muDX400, and tumors were harvested at day 8. Immune infiltrate frequency (as percentage of total live cells) after treatment (day 8) were analyzed. Data are represented as mean ± SD from a minimum of five tumors and at least two independent experiments for each model. B, The 15-gene murine-GEP scores (mean z-scores of the log<sub>2</sub> FPKM values) are plotted against the percentage of various immune cell types among total live cells, at baseline in each tumor model. C-F, Mice bearing 100 mm<sup>3</sup> tumors received two doses (day 0, day 4) of muIgG1 isotype control antibody or muDX400, and tumors were harvested at day 8. Immune infiltrate frequency (as percentage of total live cells) after treatment (day 8) were analyzed. Frequencies of CD8<sup>+</sup> T cells, CD8/Treg cell ratio, and CD8 percentage increase following muDX400 or muIgG1 isotype control treatment in the B16-F10, EMT6, MC38, and CM3 syngeneic tumor models. G, CD3 expression by immunohistochemistry in the MC38 and B16-F10 models at baseline and day 8 after two doses of muDX400 or muIgG1 isotype control. Data are shown as mean  $\pm$  SEM and are from a minimum of five tumors and at least two independent experiments for each model. Abbreviations: GEP, gene expression profile; muIgG1, mouse immunoglobulin G1; SD, standard deviation; SEM, standard error of the mean.

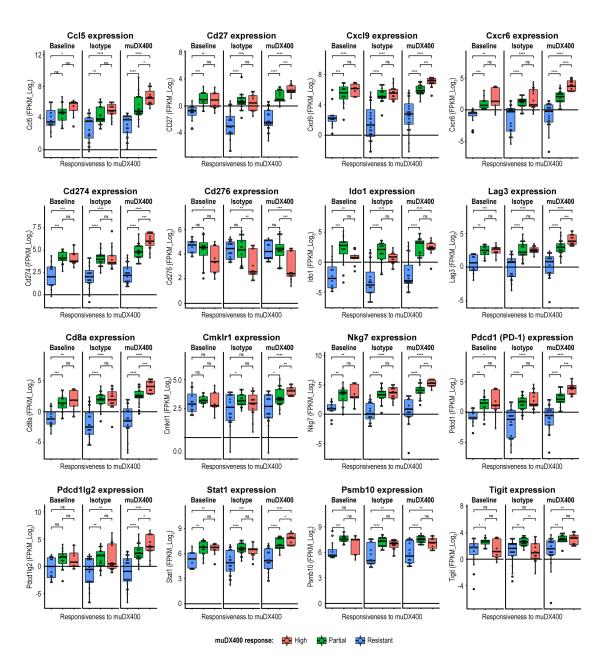
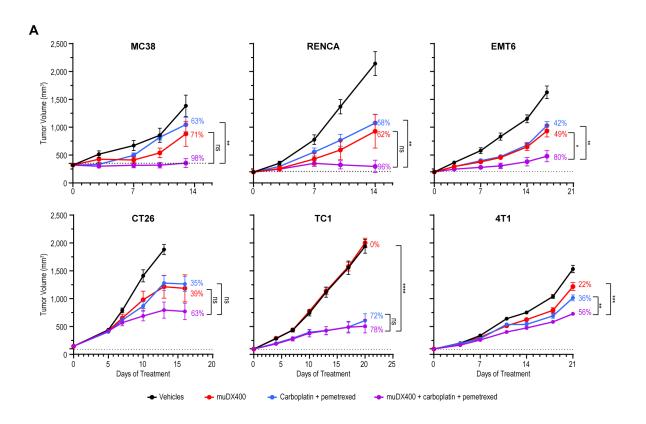


Fig. S3. Expression of the individual murine-GEP genes and Pdcd1 (PD1) across syngeneic tumor models. Boxplots for the 15 murine-GEP genes and Pdcd1 (PD1), depicting the absolute expression levels (FPKM\_log<sub>2</sub>) across the samples within each tumor model and treatment group. Significance was determined by t test (NS, P>0.05; \* $P\le0.05$ ; \*\* $P\le0.01$ ; \*\*\*\* $P\le0.001$ ; \*\*\*\* $P\le0.001$ ; \*\*\*\* $P\le0.001$ . Abbreviations: FPKM, fragments per kilobase million; GEP, gene expression profile; NS, not significant; PD-1, programmed death 1.



Chemotherapy combination emcacy summary	В	Chemotherapy combination efficacy summary
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Model	CR+PR (%)	SD (%)	PD (%)	TGI (%)	GEP (Z-Score)
MC38	40	20	40	98	-0.04
RENCA	33	22	44	96	0.69
EMT6	20	10	70	80	-0.83
CT26	0	0	100	63	0.94
4T1	0	0	100	56	-0.32
TC1	10	0	90	78	-0.44

CR, complete response (absence of detectable tumor); PR, partial response (>30% tumor shrinkage); SD, stable disease (29% tumor shrinkage, to 19% tumor growth); PD, progressive disease (20% or more tumor growth); TGI, tumor growth inhibition; GEP, 15-gene signature score at baseline.

Fig. S4. Evaluation of PD-1 inhibition and chemotherapy across the syngeneic tumor models. A,

Tumor growth curves for six subcutaneous syngeneic tumor models treated with 5 mg/kg muIgG1 isotype control plus saline, 5 mg/kg muDX400 Q5D, 40 mg/kg carboplatin Q7D plus pemetrexed 200 mg/kg Q7D, or muDX400 and carboplatin plus pemetrexed. Dotted lines represent tumor sizes at the initiation of treatment. Percentages indicate tumor growth inhibition for each respective treatment regimen. **B**, Summary of key parameters of response as shown in **A**. Data are shown as mean  $\pm$  SEM and are representative of at least three independent experiments with n $\geq$ 10 mice per group. Statistical significance was determined by two-way ANOVA with Bonferroni post-test analysis \*P<0.05, \*\*P<0.01, \*\*\*P<0.001, and \*\*\*\*P<0.0001. Abbreviations: ANOVA, analysis of variance; CR, complete response

(tumor not detectable); GEP, gene expression profile; muIgG1, mouse immunoglobulin G1; PD, progressive disease (≥20% tumor growth); PD-1, programmed death 1; PR, partial response (>30% tumor shrinkage); Q5D, every 5 days; Q7D, every 7 days; SD, stable disease (29% tumor shrinkage to 19% tumor growth); SEM, standard error of the mean; TGI, tumor growth inhibition.