

General capillary General capillary

14 15 27 27 23 33 23 23 10

SELE<sup>+</sup> venule

Venule Tip cells Lymphatics

Inflamed EC

Aerocyte

Artery

Supplemental fig. 1 (related to fig. 1) | A, Flow cytometry sorting strategy to enrich for stromal cells. EpCAM and CD45 gating removed epithelial and immune cell populations, respectively. Integrin β1 (CD29) and podoplanin (PDPN) positive gating was used to remove any remaining damaged cell that lost surface markers upon tissue digestion (as seen in Fig. S1B). B, CyTOF viSNE representation of pre-gated cisplatin<sup>neg</sup> (for dead cell exclusion) EpCAM<sup>neg</sup> CD45<sup>neg</sup> cells obtained from tumor lesions of two NSCLC patients (#18 and 19). The two viSNE plots show a substantial cell cluster (circled in black) lacking the 15 surface markers in the CyTOF antibody panel (here, 5 surface markers - CD29, FAP, CD146, CD90, CD9 - are shown as representative examples), while preserving levels of intracellular markers (such as keratin and vimentin). These results indicate that these cells likely contain live but damaged cells that lost surface protein expression upon tissue digestion (potentially tumor, immune, or stromal damaged cells). They could also contain red blood cells. Notably, all remaining cells expressed CD29, which was therefore selected as a positive marker including all undamaged stromal cells. C, Boxplot of UMI counts per scRNAseq cluster. D, Mitochondrial gene content for all sequenced cells in the tumor and its adjacent stroma for each patient. E, Highly variable genes across all stromal clusters. Genes were selected if they were highly variable (Log2(var/mean) = 1.25) and met a minimum expression cutoff of 8 UMI across all cells included. F, Heatmap showing the correlation (Pearson) between whole genome expression profiles of major stromal populations. Fibroblast, perivascular, and endothelial lineages show high concordance as expected. Gene expression values per cluster are determined by taking the mean expression of each gene across all cells then taking the log2 value.

## Figure S2, associated with figure 1



Nuclei MCAM MYH11 CD31 Supplemental fig. 2 (related to fig. 1) | A-B, (A) Gene lists highlighting identifying genes and heterogeneity between EC clusters and (B) PvC clusters. C, IHC staining of blood vessel showing pericytes (CD146 and  $\alpha$ SMA), smooth muscle cells (CD146,  $\alpha$ SMA and MYH11) and ECs (CD146 and CD31). All scale bars are 100µm.

## Figure S3, associated with figure 1

Adjacent lung



Supplemental fig. 3 (related to fig. 1) | (A), IHC stains highlighting PI16<sup>+</sup> fib., alv. fib., ADH1B<sup>+</sup> CAF and MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF. All scale bars are 100µm. (B), IHC staining of FAP<sup>+</sup> CAF highlighting heterogeneity within this fibroblast subset demonstrated by  $\alpha$ SMA intensity. FAP<sup>+</sup> CAF (top panels) scale bars are 100µm and FAP<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF scale bars are 400µm. C, Multiplexed IHC highlighting lack of FAP and CD10 staining in ADH1B<sup>+</sup> CAF cells. All scale bars are 100µm.

#### Figure S4, associated with figure 3



FAP<sup>+</sup> CAF FAP<sup>+</sup>αSMA<sup>+</sup> CAF







**Supplemental fig. 4 (related to fig. 3)** | **A**, Correlation (Pearson) of fibroblast subset abundance in scRNAseq tumor samples. **B**, Co-expressed gene 'modules' identified within the fibroblast clusters. Each module contains a group of genes with highly correlated expression regardless of enrichment in any particular cluster. These modules frequently represent identifying genes for specific clusters, such as modules 14 and 15 for FAP<sup>+</sup> CAF, but may also represent groups of genes co-regulated across multiple clusters, like module 7. Genes were selected if they were highly variable (Log2(var/mean) = 0.9) and met a minimum expression cutoff of 10 UMI across all cells included. **C**, Mean log10 gene expression of PI16<sup>+</sup> fib., alv. fib. and FAP<sup>+</sup> CAF-associated gene modules displayed by density histogram. Higher peaks indicate greater cell numbers at the expression level indicated on the X axis. Single-cell gene expression of modules is shown in Figure S4B. **D**, Correlation (Pearson) of ADH1B<sup>+</sup> CAF and FAP<sup>+</sup> CAF gene signature components in TCGA.

## Figure S5, associated with figure 3





Supplemental fig. 5 (related to fig. 3) | A, ADH1B<sup>+</sup>, FAP<sup>+</sup> and FAP<sup>+ $\alpha$ </sup>SMA<sup>+</sup> CAF coverage across IHC samples highlighting differential CAF enrichment between patients. B, FAP<sup>+ $\alpha$ </sup>SMA<sup>+</sup> CAF coverage on tumor islets.

#### Figure S6 associated with figure 3



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Supplemental fig. 6 (related to fig. 3) | Confirmation of ADH1B<sup>+</sup> and FAP<sup>+</sup> CAF in external NSCLC scRNAseq datasets. **A**, Fibroblasts were initially isolated from other cells using positive gating for fibroblasts and negative gating against perivascular cells. Then, alv. fib., meso. fib., and MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF were isolated and removed sequentially. This is shown for our in house dataset and a representative external dataset (24). **B**, The remaining cells are colored by their cluster IDs and plotted against the ADH1B<sup>+</sup> and FAP<sup>+</sup> CAF gene scores. **C**, Cells are colored by the tumor stage of the sample they come from and again plotted against the ADH1B<sup>+</sup> and FAP<sup>+</sup> CAF gene scores. **E**, (top) Expression of MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF gene score versus ADH1B<sup>+</sup> gene scores. A red line depicts the cutoff used to define MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF low gene score cells. (bottom) Expression of MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF genes in low and high gene score cells.

#### Figure S7 associated with figure 3



Supplemental fig. 7 (related to fig. 3) | A, ADH1B<sup>+</sup> and FAP<sup>+</sup> CAF gene signature presentation in other tumor types. Dendrogram visualization of hierarchical clustering of our ADH1B<sup>+</sup> and FAP<sup>+</sup> CAF gene signatures. P values are the chi-square significance of the co-assignment of signatures genes into the same group in the two main subtrees.

## Figure S8, associated with figure 4





Supplemental fig. 8 (related to fig. 4) | A, (left panels) TGF $\beta$ 1 staining is co-localized with MYH11 at the tumor border and supports the observed expression of TGFB1 in MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF as seen in figure 4A. (right panel) As a positive confirmation of TGF $\beta$ 1 specificity, staining is seen co-localized with some CD68<sup>+</sup> alveolar macrophages as expected based on prior literature (74). **B**, TGF $\beta$ 1 staining is not found co-localized with FAP<sup>+</sup> CAF, confirming the specificity of TGF $\beta$ 1 to MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF as observed in the expression data. **C**, IHC quantification of the tumor / stroma FOXP3<sup>+</sup> cells per mm<sup>2</sup> ratio. Tumor samples are stratified by their stroma profile (ADH1B<sup>+</sup> CAF rich or FAP<sup>+</sup> CAF rich) and no significant difference was observed.

1. Yu X, Buttgereit A, Lelios I, Utz SG, Cansever D, Becher B, et al. The Cytokine TGF- $\beta$ Promotes the Development and Homeostasis of Alveolar Macrophages. Immunity. 2017;47:903-912.e4.

## Figure S9, associated with figure 5



**Supplemental fig. 9 (related to fig. 5)** | **A**, The presence or absence of MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF shows no significant differences (t test) in tumor infiltrating FOXP3<sup>+</sup> cells per mm<sup>2</sup> (left) and the ratio of FOXP3<sup>+</sup> cells per mm<sup>2</sup> in the tumor versus stroma (right). Only early stage (tumor stage 1) patients were included to eliminate bias due to MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF rarely being found at later stage. **B & C**, IHC staining of MYH11 and keratin highlights MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF preferential enrichment for acinar versus solid pathologies, in tumor samples harboring histological subtypes heterogeneity, as labeled by a pathologist.

#### Figure S10, associated with figure 5



Supplemental fig. 10 (related to fig. 5) | A, Heatmaps of CD3<sup>+</sup> cell density in the stroma and CD8<sup>+</sup> cell density in the tumor and stroma of the patient 13. Respective dot plots and correlation (Pearson) with MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF score shown below each heatmap. B, MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF score, CD3<sup>+</sup> cell density heatmaps in the tumor and stroma of the patient 8. Dot plots of CD3<sup>+</sup> cell density correlation (Pearson) with MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF score shown below each heatmap. C, CD8<sup>+</sup> cell density in the tumor and stroma of the patient 8. Dot plots of CD8<sup>+</sup> cell density correlation (Pearson) with MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF score shown below each heatmap. C, CD8<sup>+</sup> cell density in the tumor and stroma of the patient 8. Dot plots of CD8<sup>+</sup> cell density correlation (Pearson) with MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF score shown below each heatmap.

#### Figure S11, associated with figure 6



**Supplemental fig. 11 (related to fig. 6)** | **A**, Stroma CD8<sup>+</sup> cell density heatmap of patient 24 (left panel) and corresponding correlation (Pearson) dot plot with  $\alpha$ SMA stroma coverage (right panel). **B**,  $\alpha$ SMA coverage, stroma CD3<sup>+</sup> and CD8<sup>+</sup> cell density heatmap of the patient 54 (top panels) and corresponding correlation (Pearson) dot plots of CD3<sup>+</sup> and CD8<sup>+</sup> cell density with  $\alpha$ SMA stroma coverage (bottom panels). **C**, Correlation (Pearson) of CD3<sup>+</sup> and CD8<sup>+</sup> cell tumor infiltration with stroma  $\alpha$ SMA coverage in patients 24 and 54. **D**, Comparison of  $\alpha$ SMA stroma coverage with CD3<sup>+</sup> and CD8<sup>+</sup> cell tumor infiltration for each patient.  $\alpha$ SMA coverage and tumor infiltration is quantified across the entire tumor lesion. **E**, Example tumor lesions displaying high or low CD3<sup>+</sup> cell infiltration.

## Figure S12, associated with figure 6



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COL4 Patient 58 – Zone 1 Keratin

Patient 58 - Zone 2

Supplemental fig. 12 (related to fig. 6) | A & B, Collagen IV is regularly found associated with MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF and not present when MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF do not exist. C, In samples with heterogenous MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF coverage, collagen IV is also found associated only in the regions with MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF. D, There are exceptions to these observations and collagen IV may be present without MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF or not present in MYH11<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF rich regions.

# Figure S13, associated with figure 6



Supplemental fig. 13 (related to fig. 6) | A & B, FAP<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF co-stains with collagen XI and XII, (B) but not collagen IV, confirming the significant correlation quantified in figure 6E for patient 62. C, In an additional sample (patient 56),  $\alpha$ SMA coverage of the stroma is significantly correlated (Spearman) with collagen XII deposition and not collagen IV, while FAP<sup>+</sup> CAF show no correlation. Collagen XI staining was not detected in this tumor sample. D, Co-localization of collagen XII and  $\alpha$ SMA in the tumor sample of patient 56. E, Additional representative examples showing collagen XII fibers colocalization with FAP<sup>+</sup> $\alpha$ SMA<sup>+</sup> CAF and their aligned organization.