

Supplementary Figures

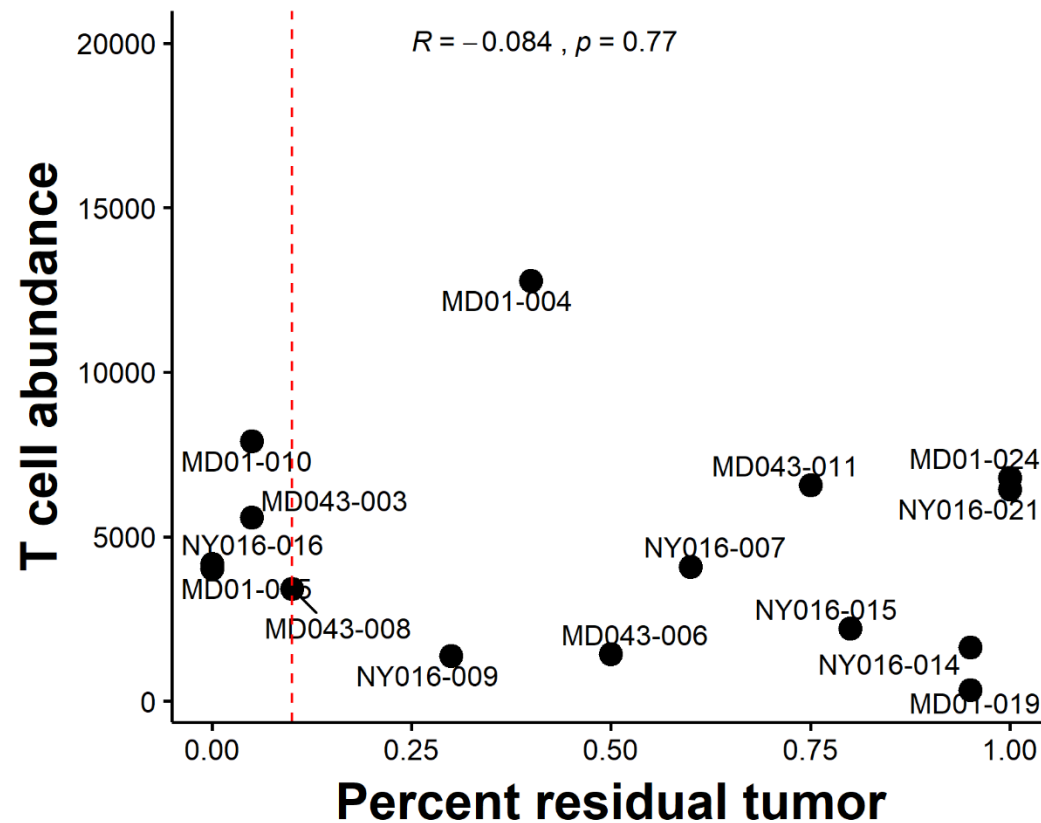


Fig. S1. Association of T cell abundance and percent residual tumor. T cell abundance was defined as the total number of reads obtained from TCRseq of the resected tumor bed, whereby each read corresponds to a single T cell.

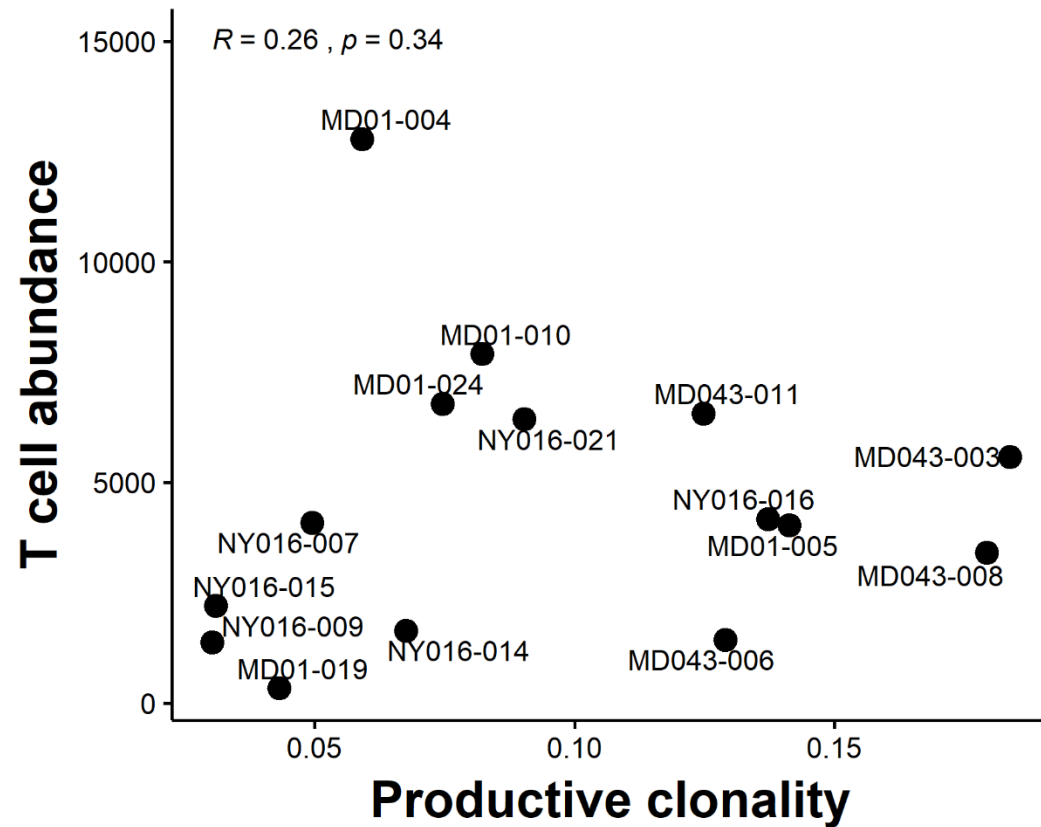


Fig. S2. Association of T cell abundance and clonality in the post-treatment tumor bed. T cell abundance was defined as the total number of reads obtained from TCRseq of the resected tumor bed, whereby each read corresponds to a single T cell.

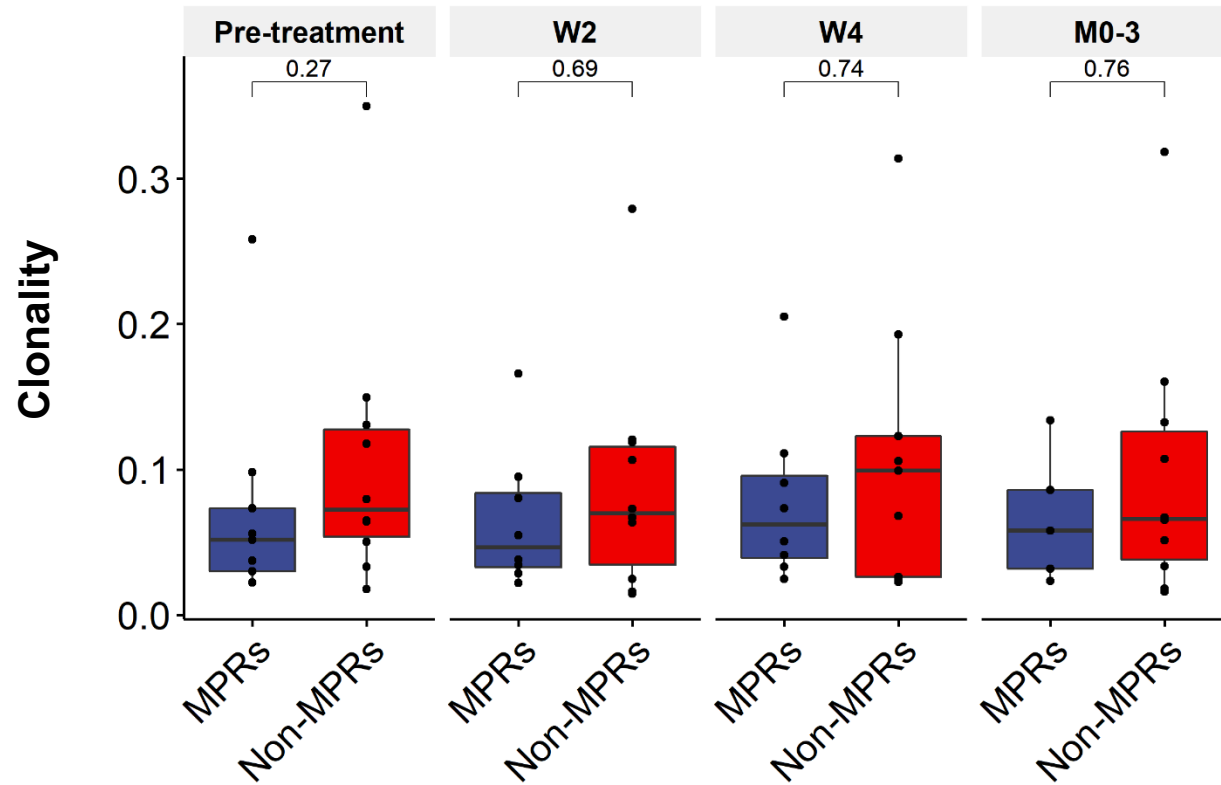


Fig. S3. Median productive clonality of peripheral blood at each timepoint before, during and after anti-PD-1 in MPRs (blue) and non-MPRs (red).

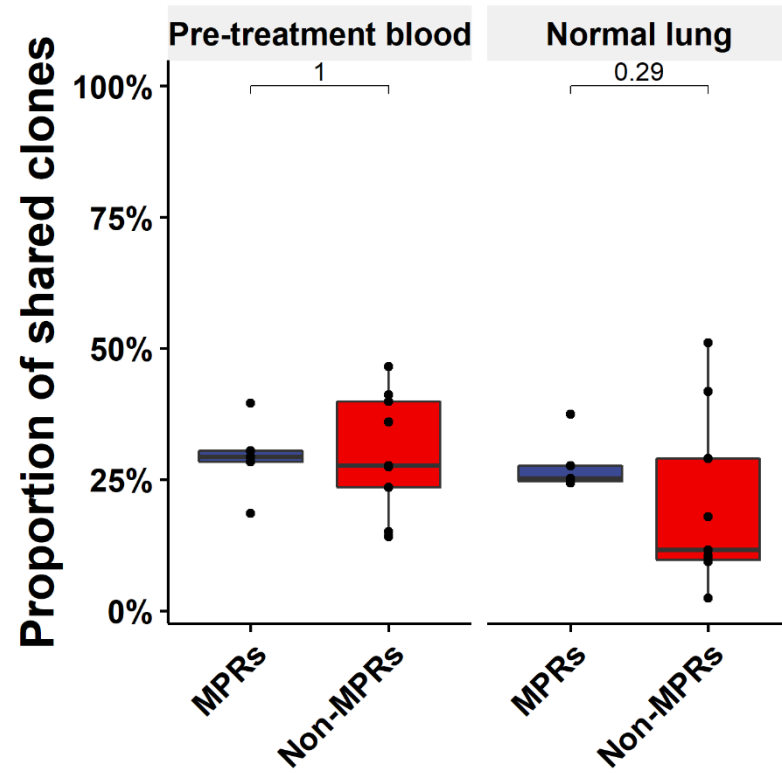


Fig. S4. Median proportion of non-top 1% frequency-ranked ITCs that are shared between pre-treatment blood and normal lung from MPRs (blue) and non-MPRs (red).

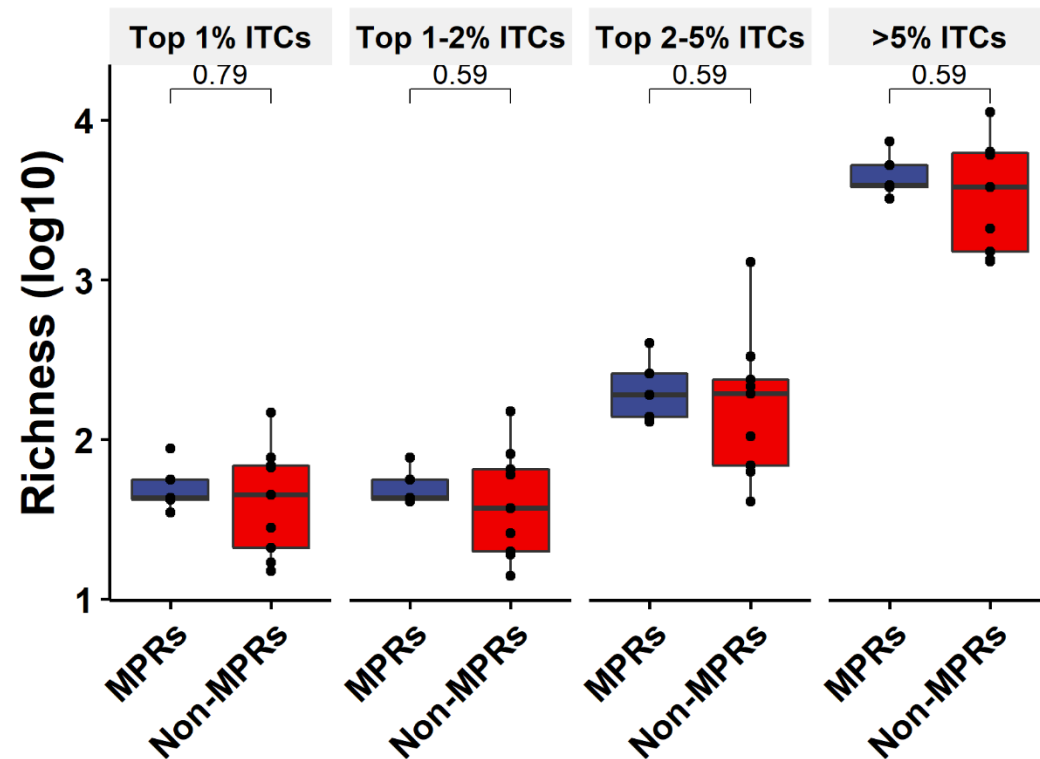


Fig. S5. Richness of ITCs with differential percent ranking. The median richness, defined as the number of unique clonotypes, comprised by the top 1%, 1-2%, 2-5%, and >5% ranked clonotypes in the resected tumor bed is shown for MPRs (blue) and non-MPRs (red).

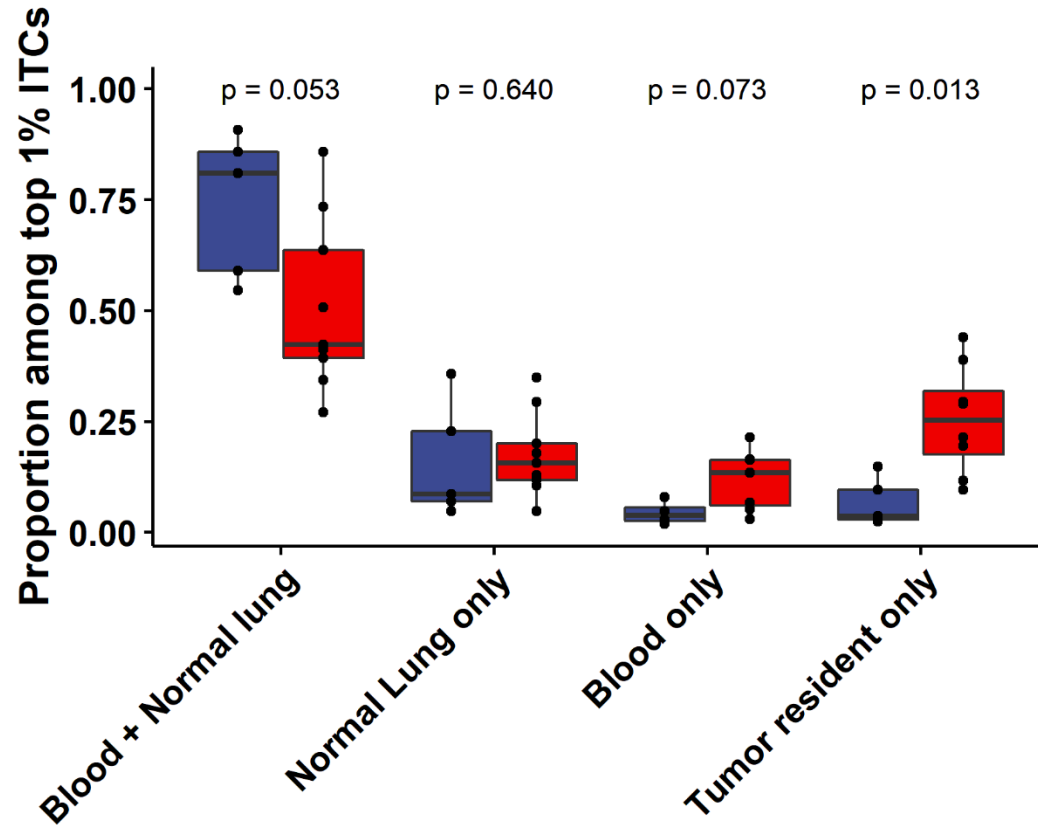


Fig. S6. Proportion of top 1% ITCs shared with different biological compartments. The median proportion of top 1% ITCs that are shared with pre-treatment blood and resected normal lung, resected normal lung only, pre-treatment blood only, or not shared with any other compartment (tumor resident only) is shown for MPRs (blue) and non-MPRs (red).

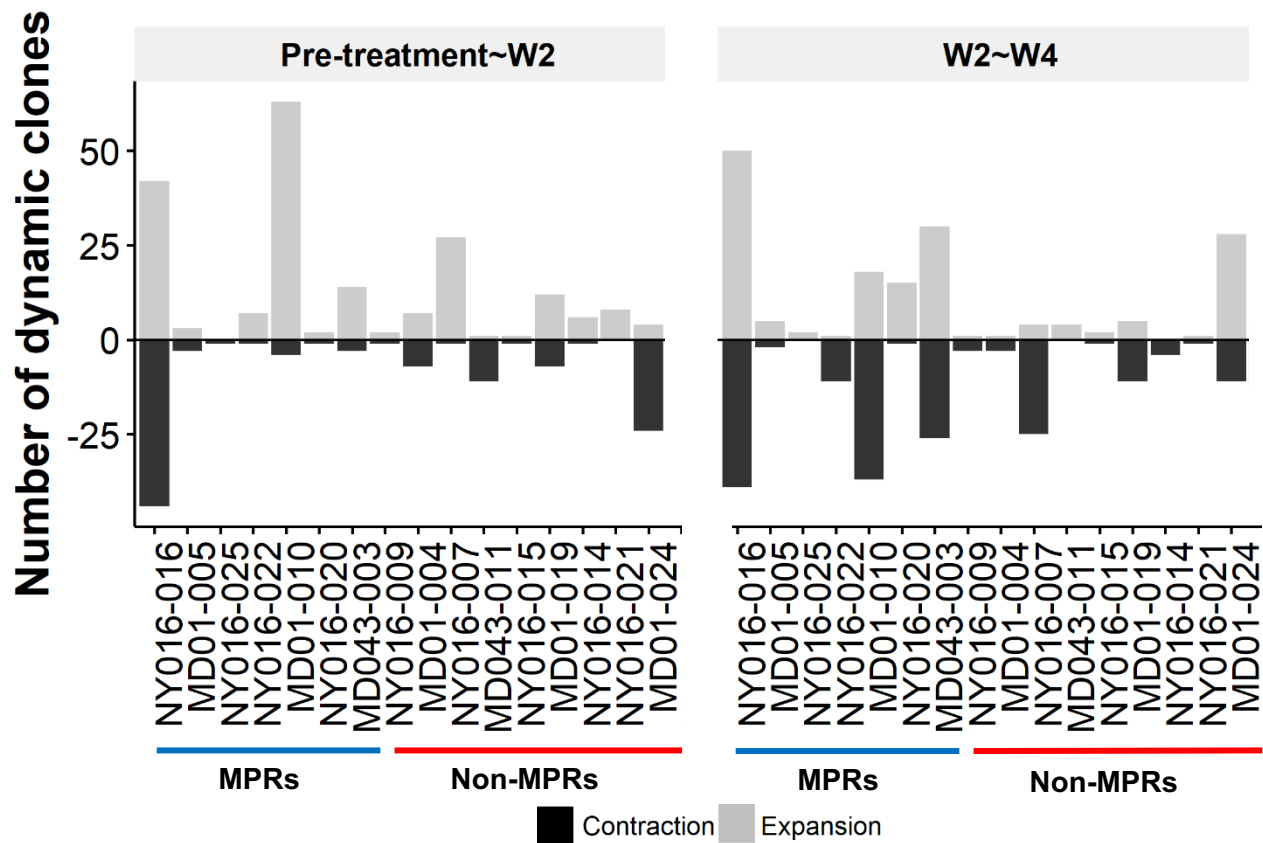


Fig. S7. Dynamic clones detected in the peripheral blood during neoadjuvant anti-PD-1. The number of contracted (black) and expanded (gray) clones detected in the peripheral blood during neoadjuvant PD-1 blockade is shown for each patient, ordered by lowest to highest percent residual tumor at the time of surgery.

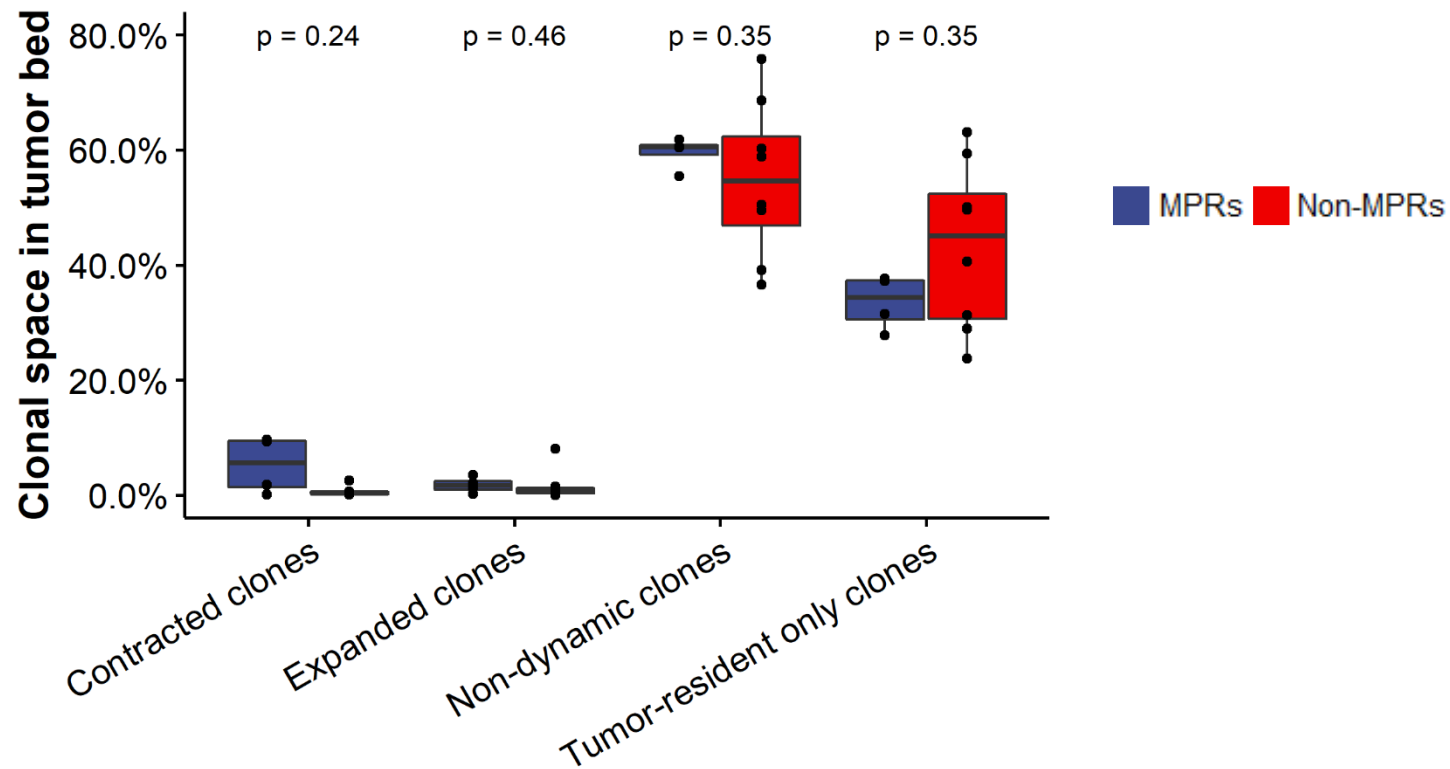


Fig. S8. Intratumoral clonal space occupied by clones with differential dynamic patterns in the periphery. Median clonal space in the tumor bed is shown for clones that contracted, expanded, or were non-dynamic in the periphery between the pre-treatment timepoint and 2 weeks post treatment, as well as clones only detected in the tumor, is shown for MPRs (blue) and non-MPRs (red).