Tumor microenvironment impaired T cell antigen recognition and function were restored
by Lovastatin therapy

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Abstract

CD8$^+$ T cells underpin effective anti-tumor immune responses in melanoma; however, their functions are attenuated due to various immunosuppressive factors in the tumor microenvironment (TME), resulting in disease progression. T cell function is elicited by the T cell receptor (TCR), which recognizes antigen peptide-major histocompatibility complex (pMHC) expressed on tumor cells via direct physical contact, i.e., two-dimensional (2D) interaction. TCR–pMHC 2D affinity plays a central role in antigen recognition and discrimination, and is sensitive to both the conditions of the T cell and the microenvironment in which it resides. Herein, we demonstrate that CD8$^+$ T cells residing in TME have lower 2D TCR–pMHC bimolecular affinity and TCR–pMHC–CD8 trimolecular avidity, pull fewer TCR–pMHC bonds by endogenous forces, flux lower level of intracellular calcium in response to antigen stimulation, exhibit impaired *in vivo* activation, and show diminished anti-tumor effector function. These detrimental effects are localized in the tumor and tumor draining lymph node (TdLN), and affect both antigen-inexperienced and antigen-experienced CD8$^+$ T cells irrespective of their TCR specificities. These findings implicate impaired antigen recognition as a mechanism of T cell dysfunction in the TME.

Introduction

Spontaneous development of CD8^{+} T cell immunity against melanomas is associated with improved clinical outcomes (*1, 2*). Immunotherapy therefore has a high potential for the treatment of advanced melanoma, which is among the common cancer types with poor clinical outcomes at advanced disease stages (*3*). The protective effects of effector CD8^{+} T cells are often inhibited within the tumor microenvironment (TME), however, resulting in unchecked tumor growth (*4-8*). To this end, therapeutic immune checkpoint blockade (ICB) of programmed cell death 1 (PD-1) signaling, thought to work both by expanding the pool of pre-existing stem-like CD8^{+} T cells (*9*) and reinvigorating exhausted tumor-infiltrating lymphocytes (TILs) from immune-suppression (*10, 11*), has emerged as a successful treatment that induces durable objective responses in 25-30% of patients with advanced melanoma (*12, 13*). ICB therefore represents a highly promising therapy class to address the high and increasing mortality associated with melanoma. However, the success of ICB therapies relies on the existence of robust, pre-existing CD8^{+} T cell immunity (*14, 15*). Elucidating the mechanisms suppressing both the development and function of CD8^{+} T cell anti-tumor immunity against endogenously generated tumor neoantigens during disease progression or through therapeutic vaccination can therefore help develop strategies to improve the success of melanoma immunotherapy.

T cell anti-tumor immunity is initiated by antigen recognition of the T cell receptor (TCR) via interaction with peptide-major histocompatibility complex (pMHC). TCR–pMHC affinity is an important driver of CD8^{+} T cell anti-tumor immunity, which is conventionally measured by the surface plasmon resonance (SPR) technology using aglycosylated soluble proteins of TCR ectodomain produced by *E. coli* or pMHC-tetramer staining of T cells (*16*). However, *in vivo* TCR–

pMHC interaction requires direct physical contact between the T cell and the tumor cell as the two

molecules reside on the respective cell surfaces and interact across the junctional gap between the

two opposing cell membranes.

We (*17-22*) and others (*23*) have shown that TCR–pMHC binding affinity measured *in situ*

at the T cell surface better correlates with T cell function. Such a measurement is termed two-

dimensional (2D) affinity because it has a unit of area, in contrast to the 3D affinity measured by

SPR that has a unit of volume. Similar to 3D affinity whose value may depend on pH or chemical

composition of the medium, the value of 2D affinity can be regulated by pharmacological

perturbations of the cellular environment *in vitro* (*17, 24*). Importantly, *ex vivo* measurements

found differential 2D affinities of monoclonal TCR on membranes of T cells isolated from splenic

red pulp vs white pulp, which are well correlated with differential transcriptomic changes,

differential effector functions, and differential developmental fates of these cells *in vivo* (*25*).

Remarkably, it was found that 2D affinity correlated with these phenotypes even in the cases where

the surface markers for cell subsets did not (*25*), highlighting the predictive power of our 2D

affinity measurement.

Using the B16F10 melanoma model most widely used for the preclinical investigation of

immunotherapeutic resistance, we reveal that the 2D affinity for and spontaneous pulling of TCR

on its cognate pMHC by CD8$^+$ T cells is impaired by the TME in which the T cells reside, and that

the lowered 2D TCR–pMHC affinity predicts suppressed effector functions. These findings

suggest altered TCR antigen recognition as a mechanism of immune evasion in melanoma,

independent of the inhibitory effects of immune checkpoint receptors, whose consideration may

help develop diagnostic and immunotherapeutic approaches to manage advanced disease.

Results

TME suppresses antigen-induced expansion and function of CD8^{+} T cells *in vivo*

The influence of the TME on CD8^{+} T cell immunity was explored using a murine tumor model

(Fig. 1A) and a synthetic antigen system in which lymph-draining nanoparticles (NPs, Fig. 1B)

were disulfide-linked to the H2-K^b presented immunodominant peptide of ovalbumin (OVA) with

a C-terminal cysteine, CSIINFEKL , (CSIINFEKL-NP or Ag-NP, Fig. 1C) that result in dose-

dependent cross-presentation in *in vitro* splenocyte cultures (Fig. 1D) (*26*). In this model, C57BL/6

mice were implanted in the lateral dorsal skin with a primary B16F10 melanoma at day (d) -8 (Fig.

1A, left). At d-1 (7 days post primary tumor implantation), Ag-NPs were administered

intratumorally (i.t.) into the primary B16F10 melanoma (Tumor-bearing) (Fig. 1A, left).

Alternatively, Ag-NPs were administered into the skin of tumor-naïve animals (Naïve) (Fig. 1A,

right) at d-1. In both schema (Fig. 1A), mice were implanted with OVA-expressing B16F10

(B16F10-OVA) melanoma cells at d0 (one day post Ag-NP administration) in either the dorsal

skin contralateral to the B16F10 melanoma or naïve skin contralateral to the Ag-NP injection site

in mice of the Tumor-bearing and Naïve cohorts, respectively. At d2, the Ag-NP injection site (the

primary B16F10 melanoma for the Tumor-bearing animals or skin for the Naïve animals) was

resected. In so doing, we could compare the influences on the growth of the OVA-expressing

secondary tumor and animal survival by the microenvironment in which the anti-OVA immunity

had been elicited by Ag-NP administration into naïve skin vs the primary tumor. As Ag-NPs result

in priming of CD8^{+} T cells both at the local injection site as well as its draining lymph nodes (dLNs)

(*26*) due to these NPs unique lymph-draining behaviors (*27-32*), this system allowed us to compare

microenvironmental effects on CD8^{+} T cells exerted both locally at the site of injection and within

lymph nodes (LNs) draining the naïve skin vs tumor after synthetic antigen administration without

animals succumbing to the primary tumor. Control of the B16F10-OVA secondary melanoma was

found to be less effective when Ag-NP treatment was administered into the primary B16F10

melanoma of the tumor-bearing animals compared to the skin of tumor-naïve animals, reflected in

both larger tumor volumes 14 days post injection (Fig. 1E) and shortened survival (Fig. 1F). These

data indicate that endogenous CD8$^+$ T cells primed by Ag-NP within the TME elicit less effective

anti-tumor responses than those primed by Ag-NP administration in the tumor-free (naïve) skin.

To further test the above contention, we compared the effects of the melanoma TME on

the antigen-specific activation and expansion of carboxyfluorescien succinimidyl ester (CFSE)

labelled CD8$^+$ OT-I T cells transferred to C57BL/6 animals in response to the OVA antigen

delivered by Ag-NP (Fig. 1G). Tumor-bearing CD45.1$^+$ recipient mice were implanted with

B16F10 melanomas at d-7, received adoptive transfer of CD8$^+$ T cells isolated from CD45.2$^+$ OT-

I donor mice at d-1, were injected i.t. with either Ag-NPs or saline on d0, and were sacrificed at

d3 to recover the donor CD8$^+$ T cells to measure their quantity and quality (Fig. 1G, left). For

comparison, donor CD8$^+$ T cells were likewise assessed after recovered from tumor-naïve CD45.1$^+$

recipient mice (comprising the Naïve cohort) that received adoptive transfer of CD8$^+$ T cells

isolated from CD45.2$^+$ OT-I donor mice d-1, were intradermally (i.d.) administered Ag-NPs or

saline one day later (d0), and were sacrificed at d3 (three days post injection of Ag-NP) (Fig. 1G,

right). No statistically significant differences in the overall extent of proliferation by donor CD8$^+$

T cells localized within the tissue site of injection were seen between the Tumor-bearing and -

Naïve groups challenged with Ag-NP (Fig. 1H), in line with reports that antigenic priming induces

a programmed proliferation response in CD8$^+$ T cells (*33*). The frequency and relative number of

donor CD8$^+$ T cells expressing PD-1, which was increased upon recent antigen experience or

chronic antigen stimulation (*34*), was similar in Tumor-bearing and -Naïve recipient animals in

response to Ag-NP challenge (Fig. 1I-J). However, the frequency of CD8$^+$ donor cells expressing

the activation marker CD25 in response to Ag-NP treatment was significantly lower in tumors of

Tumor-bearing animals than the naïve skin injection site of Naïve animals (Fig. 1I). To account

for differences in lymphocyte homing to tumors vs skin (*35*), the overall numbers of donor CD8$^+$

T cells in tumors of Tumor-bearing animals and skin of Naïve animals were respectively

normalized to those measured in animals from each group that had been challenged with saline

instead of Ag-NPs. With this method that accounts for intrinsic microenvironmental differences in

total levels of lymphocyte accumulation in the tissue site of analysis, CD25-expressing donor

CD8$^+$ T cell numbers that resulted specifically from Ag-NP challenge were found to increase in

the skin of saline injected Naïve animals but not in tumors of Tumor-bearing animals. Ag-NP

challenge likewise increased the number of CD44$^-$ donor cells in tumors of Tumor-bearing animals

relative to the skin of Naïve animals (Fig. 1J). These data indicate that the TME locally suppresses

overall levels of antigen-specific CD8$^+$ T cell activation in response to antigen challenge.

Given the known role of LNs draining the tumor (TdLNs) in mediating adaptive immunity

and response to therapy (*26, 36, 37*), responses to Ag challenge of donor CD8$^+$ T cells recovered

from TdLNs of Tumor-bearing animals were compared to those from LNs draining the Ag-NP-

injected skin of Naïve animals. The total numbers of PD-1- and CD25-expressing donor CD8$^+$ T

cells were significantly lower in the TdLNs of Tumor-bearing animals than those draining the Ag-

NP injected skin of Naïve animals (Fig. 1K), in contrast to the lack of local changes within the

tumor of Tumor-bearing animals relative to the skin injection site of Naïve animals. Moreover,

PD-1 expression was significantly lower in donor CD8$^+$ T cells recovered from TdLNs of Tumor-

bearing animals intratumorally challenged with Ag-NPs than LNs draining the Ag-NP injected

skin of Naïve animals (Fig. 1L), an effect observed in both early and late proliferative generations

(Fig. 1M). However, statistically indistinguishable levels of PD-1 or CD25 were observed on

donor CD8$^+$ T cells recovered from spleens of Tumor-bearing and Naïve recipient animals after

Ag challenge (Fig. 1N). Collectively, these results demonstrate that CD8$^+$ T cells within the TME

and TdLNs, but not in spleen, exhibit less robust response to antigenic priming *in vivo*.

Activation by and TCR binding to antigen pMHC is suppressed in CD8$^+$ T cells recovered from TME and TdLNs

The diminished responses of CD8$^+$ T cells to antigen priming within tumor and TdLNs

(collectively referred to as TME) were further explored using CD45.1$^+$ C57BL/6 mice that were

tumor naïve (Naïve) or had been implanted B16F10 melanoma (Tumor) at d-7, received adoptive

transfer of CD45.2$^+$ CD8$^+$ OT-I T cells at d0, and sacrificed at d3 to harvest donor cells from the

tumor, skin or dLNs (Fig. 2A). Donor CD8$^+$ T cells were stimulated *in vitro* with SIINFEKL, and

responses were measured by intracellular cytokine staining, finding lower frequency of activation

marker CD69-expressing cells harvested from the tumor than from the skin of naïve animals (Fig.

2B). Furthermore, a higher frequency of donor cells from the tumor than skin expressed tumor

necrosis factor (TNF) α, whereas similar frequencies of donor cells from the same two sites

expressed interferon (IFN) γ, interleukin (IL) 2, and granzyme (GzmB) (Fig. 2B). Moreover,

significantly lower frequency of donor CD8$^+$ T cells from TdLNs of Tumor-bearing animals than

skin-dLNs of Naïve animals expressed CD69 and PD-1, whereas similar frequencies of donor cells

from the same two sites expressed TNF-α, IFN-γ, IL-2, and GzmB (Fig. 2C). By comparison,

statistically indistinguishable numbers of donor CD8$^+$ T cells were found from the spleens of

tumor-bearing and -naive recipient mice that expressed CD69, PD-1, TNF-α, IFN-γ, IL-2, and

GzmB (Fig. 2D). These results corroborate data generated in response to *in vivo* antigen encounter

and show that microenvironmental factors derived from the tumor, which are present in TdLNs

but not spleens in this model (*37, 38*), suppresses CD8$^+$ T cell activation induced by antigen

recognition.

Antigen recognition is initiated by TCR–pMHC interaction that occurs at the cross-

junctional space spanning the gap between the membranes of the T cell and the tumor cell, i.e., 2D

binding, which could be regulated by cellular and cytokine environment (*25*). The effects of the

TdLN on TCR–pMHC 2D affinity on donor CD45.2$^+$ CD8$^+$ OT-I T cells recovered 7 days post

adoptive transfer into CD45.1$^+$ recipient animals co-implanted with (Tumor, Fig. 2E, left) or

without (Naïve, Fig. 2e, right) B16F10 tumors were evaluated by the micropipette adhesion

frequency (MAF) assay (*17, 39*). MAF employs a human red blood cell (RBC) coated with pMHC

as a surrogate tumor cell to interact with the T cell, which were respectively aspirated by two

opposing micropipettes (Fig. 2F). The ultrasoft RBC acts as a force transducer to detect TCR–

pMHC binding from RBC elongation after its retraction from contact with the T cell. Instead of

H2-K^b, a mutant H2-K^{b}α3A2 was used to present the OVA peptide SIINFEKL, which replaced

the mouse α3 domain of H2-K^b by that of human HLA-A2, in order to abolish any mouse CD8–

MHC interaction (*17*). Each T cell was repeatedly contacted by the RBC 50 times to determine an

adhesion frequency from which a 2D affinity was evaluated (*17, 39*). Similar TCR–pMHC 2D

affinities were found from donor CD8$^+$ OT-I T cells isolated from LNs and spleens of naïve

recipient animals; however, significantly lower 2D affinities were found from OT-I CD8$^+$ T cells

isolated from TdLNs than spleens of the same tumor-bearing recipient animals (Fig. 2G). This

shows that the TdLN diminished TCR binding affinity for antigen pMHC, explaining, at least in

part, the observed TME suppression of CD8$^+$ T cell activation in vivo (Fig. 1E, F, H-M) and in

vitro (Fig. 2B, C).

Characterization of TME suppression of TCR–pMHC and TCR–pMHC–CD8 interactions

To further characterize the localized suppressive effects of tumor and TdLN on TCR antigen

recognition, TCR 2D affinity for antigen pMHC was systematically evaluated comparing among

CD8$^+$ T cells recovered from tumors, TdLNs, non-tumor associated LNs (NdLNs), the spleen and

blood. For these experiments, B16F10 cells not expressing the OVA antigen were directly

implanted into OT-I mice and the endogenous CD8$^+$ T cells were isolated from compartments of

interest at various days post tumor implantation for MAF analysis (Fig. 3A). This model was used

to overcome the overall low levels of donor cell recovery in the adoptive transfer models (Fig. 1G,

2E), yielding as many as 100-fold CD8$^+$ T cells expressing OT-I TCR specific for SIINFEKL:H2-

K^b from not only lymphoid tissues but also the tumor itself. B16F10 melanoma growth in the two

tumor-recipient mouse strains was comparable (Fig. S1A). Lymphoid tissues including TdLNs

(Fig. S1B) and spleen also exhibited no gross differences in the frequencies of major immune cell

types except for decreased macrophage and increased B lymphocyte frequencies in OT-I animals

relative to C57BL/6 animals (Fig. S1C). Immune phenotyping the melanoma-implanted OT-I and

C57BL/6 mice over the course of tumor development also revealed no significant differences in

the numbers of CD8$^+$ T cells infiltrating the tumor, within TdLN or spleen between the OT-I and

C57BL/6 mice, except for a mild expansion of CD8$^+$ T cells in the spleen of OT-I animals from

d7 to d11 post tumor implantation (Fig. S1D). No gross differences were found in antigen

activation phenotypes as assessed by the numbers of PD-1 (Fig. S1E) or CD25 (Fig. S1F)

expressing CD8$^+$ T cells, except for an increase in splenic PD-1$^+$CD8$^+$ population in OT-I animals

at d11. However, the number of CD4$^+$ T cells were ~10-fold lower in OT-I than C57BL/6 animals

(Fig. S1G), including CD25$^+$Foxp3$^+$CD4$^+$ regulatory T cells (Tregs) (Fig. S1H), as expected (*40*).

The number of myeloid-derived suppressor cells (MDSCs) and PD-1 ligand-1 (PD-L1)-expressing

lymphocytes (PD-L1$^+$CD45$^+$) were equivalent between analyzed tissues of OT-I and C57BL/6

animals throughout tumor progression, except for subtle increases in in spleens or tumors of the

OT-I animals on d7-d11 or d11 respectively (Fig. S1I-J). Thus, the abundance and phenotype of

CD8$^+$ T cells as well as immune suppressive cell subsets are roughly similar for OT-I and C57BL/6

tumor-bearing mice, indicating similar TMEs established in both C57BL/6 and OT-I hosts.

The TCR–SIINFEKL:H2-K^{b}α3A2 2D affinities were measured by the MAF assay (Fig.

2F) using CD8$^+$ T cells isolated from various tissue compartments of OT-I mice. Cells from tumor

and TdLNs had much lower affinities than those from NdLN, spleen, and blood (Fig. 3B), agreeing

with previous results (Fig. 2G) obtained using the model in which OT-I donor cells were adoptively

transferred into melanoma-bearing C57BL/6 recipients and harvested from the TdLN 7 days post

tumor implantation (Fig. 2E). Furthermore, CD8$^+$ T cells from NdLN, spleen, and blood of tumor-

bearing OT-I mice exhibited comparable TCR–pMHC 2D affinities to that of CD8$^+$ T cells isolated

from LNs of tumor-free OT-I mice (Fig. 3B), suggesting the local nature of this suppressive effect

that is limited to the tumor and TdLN. However, MHC–CD8 2D affinities measured using a null

pMHC (VSV:H2-K^b) not recognized by the OT-I TCR showed no compartmental differences (Fig.

3C), isolating the TME-induced defect to the TCR molecule. Moreover, OT-I T cells from TdLN

and NdLN generated similar levels of binding frequencies to an anti-TCR Vα2 antibody (Fig. 3D),

indicating the antigen-specific nature of this suppressive effect that impairs the ability for the TCR

to recognize antigen. Still, when OT-I T cells were tested against SIINFEKL:H2-K^b to allow CD8

to interact with the MHC to form TCR–pMHC–CD8 trimolecular bonds (*18, 41*), a decrease in the

average number of bonds ($<n>$) normalized by the densities of TCR (m_{TCR}) and pMHC (m_{pMHC})

was again observed using CD8$^+$ T cells from NdLN to TdLN (Fig. 3E). However, the

compartmental differences between NdLN and TdLN disappeared when the 2D affinities of CD8

to bind MHC pre-bound by TCR were compared (*42*) (Fig. 3F). Thus, the impaired TCR–pMHC–

CD8 trimolecular interaction can be attributed to a reduced TCR–pMHC 2D affinity rather than

the synergy between TCR and CD8 for pMHC binding. Finally, the reduced TCR–pMHC 2D

affinity of CD8$^+$ T cells from NdLNs to TdLNs was detectable as early as d3 post tumor

implantation, and was sustained in OT-1 mice bearing d11 tumors (Fig. 3G). This reduction in

TCR–pMHC 2D affinity ranged from 20-40% in d3, d7, and d11 post tumor implantation (Supp

Fig. 2A). Thus, antigen recognition by CD8$^+$ T cells was persistently suppressed during tumor

progression in both tumor and TdLN as signified by the decreased TCR–pMHC bimolecular

affinity and TCR–pMHC–CD8 trimolecular avidity. Note that 2D affinity differences were found

despite no difference in TCR expression and staining by tetramers with SIINFEKL:H-2K^b and

SIINFEKL:H-2K$^b\alpha$3A2 on T cells isolated from various tissues of tumor-bearing and -naive OT-

I mice (Fig. S2B-C), consistent with previous findings that 2D analysis is superior to tetramer

analysis (*18, 21, 25*).

Transforming growth factor (TGF) β in TME is known to play pleiotropic roles, including

modulating tumor growth and the functions of CD8$^+$ T cells (*43-45*). TGF-β has furthermore been

shown to be a determinant of the differential TCR–pMHC 2D affinities of CD8$^+$ T cells from

splenic red pulp and white pulp of virial infected mice (*25*) and to negatively regulate tumor-

specific CD8$^+$ T cell cytotoxicity (*46*). The effect of inhibiting TGF-β signaling on TCR–pMHC

2D affinity was examined through daily intraperitoneal injection of TGF-β R1 inhibitor SB431542

in OT-I mice bearing B16F10 melanomas (Fig. 4A). In contrast to vehicle controls, the difference

in TCR–pMHC 2D affinities between CD8$^+$ T cells from TdLNs and NdLNs of TGF-β R1 inhibitor

treated animals was no longer observed (Fig. 4B). This implicates the TME-related soluble factor

TGF-β in deficient CD8$^+$ T cells antigen recognition.

TdLN suppresses CD8$^+$ T cells pulling forces on antigen pMHC

To elicit anti-tumor immunity, T cells must interact physically with tumor cells. Upon engaging

their TCR with (neo)antigenic pMHC, T cells may exert endogenous forces on the TCR–pMHC

and TCR–pMHC–CD8 bonds as part of their mechano-sensing and -responsive processes, which

has been observed *in vitro* using DNA-based molecular tension probes (MTP) (*47, 48*). MTPs are

a class of powerful tools for measuring ligand-induced, signaling-dependent, and actomyosin-

powered endogenous forces exerted by the cell on the receptor–ligand bonds (*49-51*). An MTP

consists of a fluorophore-quencher pair flanking a DNA hairpin to unfold at a designed tension

adjustable by changing the GC contents and length of the DNA strands (*49, 52, 53*) (Fig. 5A). One

end presents a ligand or antibody to the cell surface receptor and the other end is linked to the

cover glass *via* a gold nanoparticle to further quench the fluorophore (e.g., Cy3B). Forced-

unfolding of the DNA-hairpin de-quenches the Cy3B to yield a fluorescent signal, thereby

reporting an above-threshold tension exerted on the receptor by the cell (Fig. 5A). The fluorescent

intensity is proportional to the number of unfolded DNA hairpins, hence reads out the ability of

the TCR and/or CD8 to bind, stay engaged, and be activated by pMHC, and of the T cell to generate

and apply above threshold forces on the TCR–pMHC and TCR–pMHC–CD8 bonds, all of which

are features of CD8$^+$ T cells that we would like to test whether TME would suppress.

CD8$^+$ T cells from TdLNs or NdLNs of OT-I mice bearing d7 B16F10 tumors (Fig. 3A)

were placed on glass surface functionalized with SIINFEKL:H2-K^b tagged by MTP of a 4.7 pN

threshold force. Twenty min post cell seeding, the area of T cell spreading was measured by

reflection interference contrast microscopy (RICM) and the average fluorescence intensity over

that area was measured by total internal reflection fluorescence (TIRF) microscopy (Fig. 5B). As

shown by the quantification obtained from a large number of cells, CD8$^+$ T cells from TdLNs were

found to spread less (Fig. 5C) and pull on less pMHC molecules with >4.7 pN forces (Fig. 5D)

than cells from NdLNs. Remarkably, no such differential spreading areas and force signals

between TdLN and NdLN CD8$^+$ T cells were observed when the MTP tag was changed from the

SIINFEKL:H2-K^b ligand to an anti-TCR antibody (Fig. 5C, D). The antigen-specific nature of

these two differential readouts correlates with that of the differential TCR interactions with pMHC

and lack of difference of TCR interactions with the same anti-TCR antibody (Fig. 3B, D),

supporting a hypothetical relationship between the TdLN impaired TCR 2D affinity and the TdLN

impaired T cell activation, spreading as well as force generation, transmission, and exertion on

pMHC.

TdLN suppresses calcium signaling of CD8$^+$ T cells stimulated by antigen pMHC

To directly test the hypothesis that TdLN impairs antigen-induced T cell activation, OVA pMHC-

triggered calcium signaling of CD8$^+$ T cells from TdLNs and NdLNs of OT-I mice bearing d7

B16F10 melanomas (Fig. 3A) were compared. T cells were loaded with a calcium indicator Fluo-

4 and a microfluidic cell trap array device was used to place them on polydimethylsiloxane (PDMS)

surfaces functionalized with SIINFEKL:H2-K^b or bovine serum albumin (BSA) as control (Fig.

6A, *top*) (*54*). Calcium signals of cells imaged in the field of view were recorded continuously for

10 min in real-time at the single-cell level by their fluorescence intensity (Fig. 6A, *bottom*). For

each cell, the moment when a cell settled into the cell trap was defined as "t = 0". The fluorescence

intensity time-courses for different cells were realigned to their respective starting times, which
were displayed on a heatmap as columns and sorted in ascending cumulative calcium intensity
across rows, clearing showing that T cells generated calcium responses to pMHC but not BSA
(Fig. 6B).

Despite cell-to-cell variation, the overall calcium response to SIINFEKL:H2-K^b was much
weaker for CD8$^+$ T cells from TdLNs than NdLNs of the same tumor-bearing animal (Fig. 6B,
right panels). This can also be seen in the averaged calcium fluorescent intensity (FI) vs time (Fig.
6C) and the FI accumulation over time for all individual cells (Fig. 6D), both of which were much
lower for CD8$^+$ T cells from TdLNs than NdLNs. As a positive control, CD8$^+$ T cells from both
tissue sources on BSA surfaces were stimulated by ionomycin, which showed robust and rapid
calcium signals (Fig. 6E), displaying high levels of calcium signals without compartmental
difference (Fig. 6F-G). Thus, rather than a TdLN-induced defect in the T cell's intrinsic ability to
flux calcium, the diminished calcium responses of CD8$^+$ T cells from TdLNs is specific to defects
in their capacity to recognize and respond to antigen. Together, these data indicate the reduced
downstream signaling following TCR triggering in CD8$^+$ T cells freshly isolated from the TdLN
relative to NdLN.

TdLN suppresses TCR 2D affinity and function of antigen-experienced CD8$^+$ T cells

In the preceding sections, an "antigen-inexperienced" model where CD8$^+$ T cells isolated from
OT-I mice bearing B16F10 melanoma without the prior encountering of its cognate antigen *in vivo*
was used to examine the TME effects *in vitro* for binding to (Figs. 3 and 4), pulling on (Fig. 5),
and fluxing calcium on (Fig. 6) OVA pMHC. Whether the TME exerted similar effects on
"antigen-experienced" CD8$^+$ T cells was also explored using three models of *in situ* antigen

recognition (Fig. 7A, D and G). In the first model, CD8$^+$ T cells from CD45.2$^+$ OT-I donor mice were adoptively transferred into CD45.1$^+$ C57BL/6 recipient animals co-implanted in the lateral dorsal skin with B16F10 cells (Tumor) or left untreated (Naïve). Three days later, animals were immunized with Ag-NPs and Toll-like receptor ligand CpG-NP into the forelimb skin, a regimen we have previously shown to elicit robust CD8$^+$ T cell immunity functional in mediating control of B16F10 melanomas (37). After 7 days post adoptive transfer (4 days post immunization), donor cells were harvested from the spleens and LNs and analyzed by FACS for activation markers and MAF for 2D affinity (Fig. 7A). The immunization step caused a population of CD8$^+$ T cells to experience Ag stimulation *in vivo*. Whereas only small percentage of endogenous CD8$^+$ T cells of the tumor-naïve CD45.1$^+$ recipient mice isolated from the spleen and LN were CD44 positive, an indicator of activation by antigen (Fig. 7B, green), nearly all donor cells (CD45.2$^+$) from both the spleen and LN of the recipient animals were CD44 positive (Fig. 7B, red). MAF experiments found lower OT-I TCR–SIINFEKL:H2-K$^b\alpha$3A2 2D affinity of donor cells from TdLNs than spleens of d7 B16F10 melanoma bearing animals; however, no such difference was found in tumor-naive recipient animals (Fig. 7C). This data indicates that TME locally suppresses TCR 2D affinity of CD8$^+$ T cells primed by antigen *in vivo*.

The functional responses of CD8$^+$ T cells that had previously experienced antigen to antigen re-exposure was assessed by the second model (Fig. 7D). Cell suspensions harvested from various tissues of tumor-bearing or -naïve CD45.1$^+$ C57BL/6 recipient animals that had received adoptive transfer of CD8$^+$ T cells from CD45.2$^+$ OT-I mice and subsequently injected with SIINFEKL-NPs into the d7 B16F10 melanoma or naïve skin, respectively, were restimulated *ex vivo* using SIINFEKL peptide. In response to antigen restimulation, fewer donor cells from TdLNs of tumor-bearing mice than LNs of tumor-naïve mice produced TNF-α, IL-2, and GzmB, although

similar numbers of cells produced INF-γ were found in the same two sites (Fig. 7E), implying decreased functional responsiveness by T cells in the tumor-draining vs naïve LN microenvironment. By comparison, donor cells recovered from spleens of tumor-bearing vs -naive animals exhibited no differences in TNF-α, IFN-γ, IL-2, and GzmB producing cells (Fig. 7F). This indicates that TME locally suppresses functional responses of antigen-experienced CD8$^+$ T cells to antigen restimulation.

TCR 2D affinities were compared by the MAF experiments using the third model (Fig. 7G). CD8$^+$ T cells from CD45.2$^+$ OT-I mice were adoptively transferred into CD45.1$^+$ C57BL/6 mice one day prior to implantation with B16F10-OVA melanoma cells. Donor cells isolated from TdLNs of recipients bearing d7 B16F10-OVA tumors exhibited a reduced TCR–pMHC 2D affinity compared to those from the spleen (Fig. 7H), consistent with previous results when the B16F10 melanoma implanted in the recipients was not conjugated with OVA antigen and hence the recovered donor cells were antigen-inexperienced. However, donor T cells harvested from NdLNs also displayed a lower TCR–pMHC 2D affinity than those harvested from spleens of the same recipient (Fig. 7H), in contrast to antigen-naïve models. Collectively, the results showed that the TME impairment of antigen recognition impacts CD8$^+$ T cells not only at naïve stages but also after *in vivo* antigen activation.

Discussion

Despite a functional systemic immunity, the melanoma TME is known to suppress its effects to

allow disease progression (*55*). In the workhorse model of the melanoma immunotherapy field

implemented in this work, antigen-induced activation and anti-tumor responses of CD8^{+} T cells *in*

vivo was likewise suppressed by the TME. Whereas many cell intrinsic and extrinsic factors

contribute the said suppression (*4, 5, 56*), our data reveal a new defect caused by the TME – the

impaired T cell antigen recognition, manifested a reduced TCR–pMHC 2D affinity and bonds

pulled by >4.7 pN T cell-generated forces measured *ex vivo.* This was further correlated

functionally with a lower intracellular calcium signaling induced by *in vitro* antigen stimulation.

These findings collectively indicate the impaired antigen recognition as a novel mechanism of T

cell dysfunction in the TME. Interestingly, this newly identified effect of TME suppression of

TCR antigen recognition may explain two puzzling observations of a recent study of adoptive cell

therapy (ACT) of tumor patients (*57*). The authors reported that CD8^{+} T cells that were transfected

with the same TCRs specific to tumor neoantigen, expanded in vitro, and used in ACT to treat

cancer patients were more effective if 1) the original T cells were isolated from healthy individuals

than from the patients themselves and 2) the original T cells were isolated from peripheral blood

lymphocytes than from TILs of the same patient (*57*). The explanation based on the present work

could be that the latter T cells had been subjected to the TME suppression whereas the former T

cells had not in both cases.

The finding that CD8^{+} T cells from d3-d11 tumors and TdLNs (collectively referred to as

TME) exhibit reduced *in situ* affinity of TCR for specific pMHC is particularly intriguing. Previous

studies have shown correlation of 2D TCR–pMHC affinity with T cell activation and functions

using altered peptide ligands (*17-23*). Unlike 3D affinity measured using soluble proteins, 2D

TCR–pMHC affinity can be altered by perturbations of the T cell cellular environment (*17, 24,*

25). Of particular relevance to the present work, the P14 TCR–gp33:H2-D^b 2D affinity of

adoptively transferred CD8$^+$ T cells was found to be higher when donor cells were isolated from

splenic red pulp than white pulp of C57BL/6 recipients post lymphocytic choriomeningitis virus

infection. The increased antigen recognition of red pulp-derived CD8$^+$ T cells correlates with a

more efficient target cell killing *in vitro* and improved viremia control *in vivo*, whereas the

decreased antigen recognition of white pulp-derived CD8$^+$ T cells anti-correlates with their

enhanced ability to differentiate to memory cells (*25*). Like the previous studies (*25*), differences

in 2D affinity were not detectable by saturating pMHC tetramer staining, supporting the contention

that 2D measurements made herein provide greater power to distinguish functionally relevant

differences in binding propensities of TCR–pMHC interactions.

The TCR–pMHC–CD8 trimolecular avidity was also reduced by the TME, yet the CD8

affinities for both free MHC and TCR-bound MHC were not, isolating the TME-caused defects to

the TCR itself. T cells can be activated by anti-TCR antibodies, yet the 2D binding of an anti-TCR

antibody to TCR was not impacted, highlighting the specificity of the TME suppression on the

ability of TCR to recognize antigen instead of being recognized as an antigen.

T cells spontaneously sample and exert forces on pMHC-coated surfaces. Such forces are

transmitted through the TCR–pMHC complexes and thought to play a key role in antigen

discrimination (*47, 48*). T cell spreading and pulling on pMHC was reduced by the TME, likely

caused in part by the TME-suppressed TCR–pMHC and TCR–pMHC–CD8 interactions, because

neither T cell spreading/pulling on anti-TCR antibody nor TCR–anti-TCR antibody interaction

was suppressed by the TME. Reduced T cell spreading and pulling may be caused by the TME

impairment of not only the recognition of, but also the response to, antigen by the T cell, which

includes T cell signaling. This contention is supported by the results that only the calcium signaling

of T cells stimulated by pMHC but not by ionomycin was reduced by the TME. Thus, the MTP

experiments provide two additional readouts for the TME impairment of TCR recognition of, and

activation by, antigen pMHC.

Chronic tumor antigen stimulation leading to T cell exhaustion is a well-known contributor

to T cell dysfunction in the TME (*58*). However, we found that TME impaired antigen recognition

by not only antigen-experienced but also antigen-inexperienced $CD8^+$ T cells. In the absence of

OVA-expression by tumor cells, antigen-naïve donor OT-I $CD8^+$ T cells suppressed by B16F10

melanomas in recipient mice were not exhausted as evidenced by the low expression of PD-1.

After isolation from the TME, these antigen-naïve cells encountered antigen the first time during

the measurements for TCR–pMHC 2D affinity, endogenous force pulling on the TCR or calcium

response, or during the *ex vivo* stimulation for functional assays. Since any donor T cells from any

TCR transgenic mice can first be adoptively transferred to antigen-free tumor-bearing recipient

mice and later be probed by the pMHC specific for this TCR to observe the TME effects, such

suppressive effects must exert on all T cells of any antigen specificity. Thus, tumors can suppress

the antigen recognition and function of T cells that do not recognize and react against the tumor

itself, and this mechanism is independent of the T cell exhaustion due to chronic tumor antigen

stimulation. This implies that the TME suppresses local $CD8^+$ T cell immunity in general, not just

that against tumor.

As a first step toward elucidating the mechanism underlying the TME suppression of T cell recognition of and response to antigen, we tested the role of TGF-β, a TME-associated immunosuppressive factor. The localized impairment of T cell antigen recognition was partially restored by inhibiting the TGF-β signaling. This indicates that, in addition to its other known effects in TME (*4, 5, 56*), TGF-β also negatively regulates all CD8^{+} T cells' TCR–pMHC 2D affinities regardless of the TCR specificity. This agrees with our previous results that *in vivo* inhibition of TGF-β activity eliminates the differences in the TCR–pMHC 2D affinities between CD8^{+} T cells from splenic red and white pulps of virus infected CD8^{+} T cells and that *in vitro* treatment with recombinant TGF-β reduces TCR–pMHC 2D affinity (*25*). As the tumor progresses, TGF-β in the TME accumulates in the TdLN, which can affect any peripheral T cells trafficking through the TdLN. Comparing to other identified suppressive factors causing T cell tolerance, TGF-β is antigen-independent, unlike chronic tumor-antigen stimulation; and it does not require direct cell-cell contact between an immunosuppressive cell and the T cell, unlike nitration of tyrosine in TCR by MDSCs (*59*).

Together, our data uncover impaired T cell recognition of and response to antigen as a novel mechanism of T cell dysfunction in the TME. This mechanism is independent of T cell exhaustion induced by chronic tumor antigen stimulation and affects both antigen-inexperienced and antigen-experienced T cells irrespective of their antigen specificity. More importantly, the impaired T cell antigen recognition is a cause and an indicator of TME induced T cell dysfunction, which can be regulated by remodeling the soluble factor TGF-β in the TME. Our findings thus have implications for future studies seeking to identify TME extrinsic factors that suppress T cell function through altered TCR–pMHC 2D affinity and responses. Our results also implicate that

466   the alteration of antigen recognition by $CD8^+$ T cells can potentially serve as an additional metric

467   for characterizing the TME and its amenability to immunotherapy.

Methods

Cell culture

B16F10 or B16F10-OVA mouse melanoma cells were maintained in culture in Dulbecco's Modified Eagle Medium (DMEM, Gibco, Thermo Fisher Scientific, Inc., Waltham, MA) with 10% heat-inactivated fetal bovine serum (FBS, Gibco, Thermo Fisher Scientific, Inc.) and 1% penicillin/streptomycin/amphotericin B (Life Technologies, Carlsbad, CA, USA). Cells were passaged at ~80% confluency and maintained at 37 °C with 5% CO_2 in a standard cell incubator.

Animal tumor models

CD45.2$^+$ OT-I transgenic mice were obtained from Charles River Laboratory (Lyon, France) and bred in house at the Georgia Institute of Technology. C57BL/6 and CD45.1$^+$ C57BL/6 mice were purchased at 6 weeks (wk) of age from the Jackson Laboratory (Bar Harbor, ME, USA). All protocols were approved by Georgia Tech's Institutional Animal Care and Use Committee (IACUC) and have been previously described (*26, 38*). For tumor-bearing cohorts, 0.5×10^6 melanoma cells were intradermally injected into the left dorsal skin of 6-8 wk old mice. Tumor dimensions were measured with calipers in three dimensions and reported as ellipsoid volume.

Flow cytometry

Axillary and brachial LNs were pooled and incubated with 1 mg/mL Collagenase D (Sigma-Aldrich) in Dulbecco's phosphate buffered saline (D-PBS) with calcium and magnesium for 75 min at 37 °C, passed through a 70 µm cell strainer (Greiner Bio-One, Monroe, NC, USA), washed, and resuspended in a 96-well U-bottom plate (VWR International, Inc.) for staining. Spleen

capsules were disrupted using 18G needles (Beckton Dickinson, Franklin Lakes, NJ), and pushed

through a 70 μm cell strainer, then pelleted and resuspended in RBC lysis buffer (Sigma-Aldrich)

for 7 min at room temperature, diluted with D-PBS, washed, and 5% of the spleen plated in a 96-

well U-bottom plate. Tumor samples were incubated with 1 mg/mL Collagenase D (Sigma-Aldrich)

in D-PBS for 4 h at 37 °C, passed through a 70 μm cell strainer, washed, and 1-20% (based on

tumor volume) plated in a 96-well U-bottom plate for staining. All antibodies for flow cytometry

were obtained from Biolegend, Inc. (San Diego, CA, USA). Cells were blocked with anti-mouse

CD16/CD32 (clone: 2.4G2) (Tonbo Biosciences, San Diego, CA, USA) for 5 min on ice and

washed. Samples were then stained using fixable viability dye Zombie Aqua (1:100, Biolegend)

for 30 min at room temperature before quenching with 0.1% bovine serum albumin (BSA) in D-

PBS (flow cytometry buffer). Antibodies were prepared in flow cytometry buffer at the following

dilutions based on preliminary titrations: PerCP anti-mouse CD3 (1:40), APC-Cy7 anti-mouse

CD4 (1:640), FITC anti-mouse CD8 (1:320), PE-Cy7 anti-mouse CD25 (1:100), and APC anti-

mouse PD-1 (1:80) to assess T cells in Fig. S1; APC-Cy7 anti-mouse CD45 (1:160), PerCP anti-

mouse F4/80 (1:20), PE anti-mouse CD169 (1:50), APC anti-mouse Gr1 (1:80), PE-Cy7 anti-

mouse CD11c (1:80), BV421 anti-mouse PD-L1 (1:40), FITC anti-mouse B220 (1:400), and

AF700 anti-mouse CD11b (1:80) to assess pan immune cells in Fig. S1; PerCP anti-mouse CD69

(1:80), BV711 anti-mouse CD45.2 (1:80), BV605 anti-mouse CD3 (1:100), APC-Cy7 anti-mouse

CD8 (1:40), and BV786 anti-mouse PD-1 (1:80) for intracellular cytokine staining in Figs. 2B-D

and 7E-F; and PE anti-mouse CD45.2 (1:80), AF700 anti-mouse CD25 (1:100), BV785 anti-mouse

PD1 (1:80), AF647 anti-mouse CXCR5 (1:200), PerCP anti-mouse CD3 (1:40), APC-Cy7 anti-

mouse CD8 (1:40), PE-Cy7 anti-mouse CD39 (1:20), and BV421 anti-mouse CD44 (1:20) for T

cell phenotyping in Fig. 1. Cells were fixed in 2% paraformaldehyde (VWR International, Inc.) to

assess pan-immune cells in Fig. S1. For nuclear staining, cells were incubated with

FoxP3/Transcription Factor Fixation/Permeabilization solution (eBioscience, ThermoFisher, Inc.)

for 60 min on ice in dark. Cells were then incubated with PE anti-mouse FoxP3 (1:20) for T cell

phenotyping in Fig. 1 and Fig. S1 in FoxP3/Transcription Factor Fixation/Permeabilization buffer

for 75 min on ice in dark. For *ex vivo* cytokine staining, cells were suspended in IC Fixation Buffer

(eBioscience, Thermo Fisher, Inc.) for 60 min at room temperature in dark. Cells were then

incubated with APC anti-mouse GzmB (1:40), PE anti-mouse IFN-γ (1:80), AF700 anti-mouse

IL-2 (1:200), and PE-Cy7 anti-mouse TNF-α (1:80) in IC Permeabilization Buffer (eBioscience,

Thermo Fisher, Inc.) for 60 min at room temperature in dark. Cells were then resuspended in FACS

buffer (1% BSA in D-PBS) and kept at 4°C in dark until analyzed with a customized BD LSR

Fortessa flow cytometer (BD Biosciences). Compensation was performed using ArC and

UltraComp compensation beads (Thermo Fisher Scientific, Inc.) and data was analyzed using

FlowJo software v9 and v10 (FlowJo, LLC, Ashland, OR, USA).

CD8$^+$ T Cell Isolation

OT-I animals were sacrificed by CO_2 asphyxiation. For adoptive transfer, spleens were dissected

and placed into sterile PBS. Spleens were digested using 18G needles (Beckon Dickinson), and

pushed through 70 μm cell strainers, washing liberally with PBS. RBCs were lysed using AcK

Lysis Buffer (Lonzo Group AG, Basel, Swirzerland), and washed with PBS. After counting, cells

were resuspended in FACS buffer (1% BSA in PBS) at a concentration of 10^8 cells/mL and 1 μL

negative CD8$^+$ T cell biotin-antibody cocktail (Biolegend)/million cells was added and allowed to

incubate for 15 min on ice. Streptavidin-magnetic beads were added directly to this solution at a

concentration of 1 μL/million cells and allowed to incubate for 15 min on ice. PBS +/+ was then

added for a final volume of 2.5mL and the mixture placed in magnetic separators. The flow-

through was then collected, counted, and resuspended. CFSE was added to the cells for 6 minutes,

followed by quenching with ice cold RPMI medium containing >10% heat-inactivated FBS (Life

Technologies). Purity, viability, and CFSE loading (if applicable) were confirmed using a

customized BD LSR Fortessa flow cytometer prior to transfer. Cells were maintained in sterile

conditions prior to transfer.

For the $CD8^+$ T cell isolation in MAF, MTP, and microfluidic calcium assays, organs of

OT-I mice were mechanically digested into cell suspension, and $CD8^+$ T cells were negative

purified from cell suspension with untouched $CD8^+$ T cell isolation kit (Stemcell Technologies).

For the isolation of donor $CD45.2^+$ OT-I T cells from C57BL/6 $CD45.1^+$ recipient animals, the

selection was achieved by antibody labeled sorting based on congenic marker.

Adoptive Transfer

547 Isolated $CD8^+$ T cells were suspended in sterile saline at a concentration of 2×10^6 cells/200μL.

548 After isoflurane anesthesia, the hair covering the jugular vein of animals was removed using

549 depilatory cream, cleaned using warm water and ethanol wipes, and suspended cells injected

550 intravenously via the jugular vein.

TGF-β signaling inhibition

552 The animals were injected with TGF-β RI Kinase Inhibitor SB431542 (Sigma-Aldrich) at 10

553 mg/kg in 100 μl DMSO intraperitoneally for continuous three days.

Micropipette adhesion frequency assay

The micropipette adhesion frequency (MAF) assay for measuring receptor–ligand 2D affinity has

been described (*17, 39*). Briefly, human RBCs were biotinylated with controled concentration of

biotin-X-NHS linker (Millipore/Sigma). The biotinylated RBCs were sequentially incubated with

saturating amount of streptavidin (ThermoFisher) and the biotinylated proteins of interest. An RBC

coated with ligand (L) and a T cell expressing receptor (R) were respectively aspirated by two

apposing glass micropipettes (Fig. 2F). The two cells were brought into 50 contact-and-retract

cycles by one of the micropipettes mounted to a piezoelectric translater controlled by a computer.

The adhestion frequency (P_a) was calculated by number of adhesion events appeared in the total

of 50 contacts, where the adhesion events were detected by the deflection of the soft RBC

membrane during micropiette retraction. The averaged number of bonds formed per contact $\langle n \rangle$

is calculated as:

$$\langle n \rangle = -\ln(1 - P_a) \qquad \text{Eq. 1}$$

567   In the case of bimolecular interaction, the interaction kinetics is described by a probabilistic

568 kinetics model:

$$\langle n \rangle = m_R m_L A_c K_a [1 - \exp(-(k_{off} t_c)] \qquad \text{Eq. 2}$$

where A_c (in μm^2) and t_c (in s) are contact area and time, respectively, controlled by the

experimenter, K_a (in μm^2) and k_{off} (in s^{-1}) are 2D affinity and off-rate, respectively, m_R and m_L (in

μm^{-2}) are molecule densities of the receptor and ligand, respectively, determined from comparing

the mean fluorescence intensity (MFI) of saturating amount of antibody staining of targeted

proteins, to those of calibration beads (BD Biosciences). P_a reaches steady-state at $t_c \gg 1/k_{off}$ when

$\exp(-k_{off} t_c) \rightarrow 0$, $\langle n \rangle \rightarrow m_R m_L A_c K_a$. Based on previous study (*17*), P_a reached plateau when $t_c > 1$

s for the OT-I TCR–SIINFEKL:H2-K^{b}α3A2 interaction. Therefore, we report the values of

effective 2D affinity A_cK_a (in μm^4) calculated from the equation below using P_a measured at 2 s.

$$A_cK_a = -\ln(1 - P_a)/m_R m_L \qquad \text{Eq. 3}$$

579   In the case where CD8$^+$ OT-I T cells was allowed to interact with RBCs bearing

580   SIINFEKL:H2-K^b, $<n>$ includes three species of bonds, TCR–pMHC and CD8–MHC bimolecular

581   bonds and TCR–pMHC–CD8 trimolecular bonds (*18, 41, 48*). Neglecting the CD8–MHC bond

582   species because of its orders of magnitude lower affinity than those of the other two bond species,

583   we can express the average number of total bonds at steady-state by (*42*):

$$\langle n \rangle = m_{TCR}m_{pMHC}A_cK_{a,TCR}\left(1 + m_{CD8}A_cK^*_{a,CD8}\right) \qquad \text{Eq. 4}$$

585   where $K^*_{a,CD8}$ is the 2D affinity for CD8 to bind MHC pre-bound by TCR and m_{CD8} is the site

586   density of CD8. $K^*_{a,CD8}$ can solved from Eq. 4:

$$K^*_{a,CD8} = \left(\frac{\langle n \rangle}{m_{TCR}m_{pMHC}A_cK_{a,TCR}} - 1\right)/m_{CD8} \qquad \text{Eq. 5}$$

DNA-based molecular-tension probe

The DNA-based molecular tension probes (MTP) were assembled as previously described (*47, 48,*

60). Briefly, three strands of oligonucleotides, the 4.7 pN hairpin strand, the Cy3B strand with

biotin on the opposite end of the Cy3B dye, and the Black Hole Quencher-2 (BHQ2) strand, were

mixed and annealed at a ratio of 1.1:1:1.1, with additional BHQ2 strand added after the annealing

to further lower the background. The DNA-based MTP was then immobilized onto gold

nanoparticles irreversibly anchored on APTES-PEG modified glass surface (*47*). The surface was

sequentially incubated with streptavidin and biotinylated pMHC ligands or antibodies to tag them

to the MTPs through biotin-streptavidin coupling. Working solution, incubation time and washing

buffer for each step were described previously (*47, 48, 60*). The MTPs was assembled on glass

slides and ready for use.

The CD8^{+} OT-I cells were injected into the image chamber, allowed to settle and spread

on the glass surface for 20 min, and imaged for 30 min with a PerkinElmer confocal microscope

with TIRF mode (Hamamatsu sCMOS detector, Nikon Ti-E Microscope, 60× 1.49 TIRF oil

objective). The Reflection interference contrast microscopy (RICM) image of a cell appeared as a

dark area which was defined as the cell-surface contact area. The tension signal of a cell was

measured as the mean Cy3B fluorescence intensity (FI) observed in the total internal reflection

fluorescence (TIRF) mode. It was calculated by subtracting the surrounding background level FI

from the original contact area FI, and averaging over the spreading area, except for the negative

control in which the signal was normalized by the cell size detected on the bright field image, since

no detectable cell-surface contact was formed.

Microfluidic cell trap real-time calcium flux analysis

The microfluidic cell trap arrays have previously been described (*54*). Briefly, a layer of

polydimethylsiloxane (PDMS) (10:1) was poured on the previously designed and fabricated 8-μm

master mold, vacuumed overnight for debubbling, and baked at 70 ºC for 2 h before being peeled

off from the mold, cut out and punched the inlet and outlet holes for individual devices. For each

PDMS block, the side with micro-channels was treated with oxygen plasma to let it firmly bond

to a coverslip. The device was completed by connecting tygon tubing to the inlet and outlet on the

PDMS. To functionalize the inner surface to be contacted by cells, the devices were washed with

PBS, coated in turn with biotin-BSA for 1 h, streptavidin for 30 min, and biotinylated ligand (0.2

mg/ml) for 30 min at room temperature. To avoid unwanted transient stimulation of cells bumping

into the coated surface and inlet filter pillars before entering the trapping zone, the inlet channels

and filter was blocked with BSA during the biotin-BSA coating step, so the ligand would not be

coated to these areas. The device was washed between each coating step by perfusing PBS.

CD8$^+$ T cells were loaded with 5 μM of Fluo-4, AM calcium indicator (Thermo Fisher

F14201) at 37 $^\circ$C for 30 min. Calcium indicator loaded cells at 2×10^6/ml in the imaging buffer

(Hanks' Balanced Salt Solution, or HBSS, with calcium/magnesium and 2% FBS, passed through

a 0.45 μm filter) were stabilized for another 30 min at 37 $^\circ$C. Cell suspension was aspirated into

10 μl pipettor tip and added into the microfluidic device through the inlet. To test the calcium

response to soluble factors, calcium indicator-loaded CD8$^+$ T cells were first trapped in the device

wells, followed by perfusion of the soluble stimulator. The cell trapping and calcium signaling

process was recorded using a PerkinElmer confocal microscope system (Hamamatsu EM-CCD

detector, Nikon Ti-E Microscope, 20× 0.75 Air Objective, LiveCell temperature control incubator).

The fluorescent signal was recorded continuously for 10 min at 2 frame per sec (fps) for the first

5 min and 1 fps for the rest time. Snap shots of bright field images were taken before and after the

10 min recording for the device and cell trap quality control. The experiments were performed at

37 $^\circ$C.

Single-cell real-time calcium intensity was analyzed using fluorescent time series data

stack. The analysis was similar to those described previously in principle, with the current version

of program written in Fiji in house (available upon request). Briefly, the moment that a cell falls

into the cell trap is defined as time zero for this cell. The program generates a mask over this cell

and the MFI of this mask is tracked in the following frames. This analysis was applied to all cells

appeared in the field of view, and then the background FI was subtracted from the MFI. The

calcium signal level vs. time sequences for different cells were then realigned at time zero for

display and sorting.

Synthetic antigen system

Pyridyl-disulfide functionalized nanoparticles were prepared as previously described (*30, 32, 61*).

Cysteine-modified SIINFEKL (CSIINFEKL) was dissolved in MilliQ water at 1 mg/mL and added

1:1 to 40 mg/mL PDS-NP. The disulfide displacement reaction proceeded overnight at room

temperature with stirring after which SIINFEKL conjugated NP were separated from unreacted

peptide by size exclusion chromatography using a CL-6B column. Fractions containing peptide

were identified by reacting with fluorescamine, and PEG-containing fractions (NPs) were

determined using an iodine assay. Fractions containing CSIINFEKL-NP (Ag-NP) were combined

and concentrated to the appropriate dose using 30 kDa MWCO spin filters and sterilized by

filtration through a 0.22 µm syringe filter. In select experiments, NPs were reacted with maleimide-

AlexaFluor647 or maleimide-AlexaFluor700 during synthesis to render the NP fluorescent (*29-*

32). Ag-, AF647-, or AF700-NP in sterile saline were injected intradermally in the center of the

tumor or into the dermal layer of the skin (non-tumor-bearing animals) of C57Bl/6 mice.

Ex vivo **Restimulation**

After cell isolation (as above, in flow cytometry), 30% of LN samples, 5% of spleen samples, or

5% of tumor cells were plated in a sterile 96-well U-bottom plate. 1 µg/mL SIINFEKL peptide in

200 µL IMDM media with 10% heat-inactivated FBS and 0.05 mM betamercaptoethanol (Sigma-

Aldrich) were added to each sample and incubated for a total of 6 h at 37 °C with 5% CO_2. Three

hours into the incubation period, 50 µg/mL Brefeldin A (Sigma-Aldrich) was added to each sample.

Cells were washed and stained for flow cytometry as above.

Imaging by In Vivo Imaging System (IVIS)

Animals were injected intradermally in the left dorsal skin with AF647 conjugated NP as described

above. 24 h after NP injection, animals were sacrificed via CO_2 asphyxiation in accordance with

AVMA and local IACUC guidelines. Animals were dissected to expose axillary and brachial LNs

and imaged using a Perkins Elmer IVIS Spectrum CT (Waltham, MA). LNs were then dissected

and placed on black plastic and imaged using a Perkin Elmer IVIS Spectrum CT.

Tumor Resection

Animals were anesthetized using isoflurane in oxygen, and then given 1 mg/kg sustained release

Buprenorphine and 5 mg/kg ketoprofen via intraperitoneal injection as analgesics. The animals

were placed on a warming bed and a sterile, fenestrated drape, placed to expose only the tumor

and surrounding skin. Povidone-iodine was applied to the skin three times to sterilize the surgical

area. Sterile scissors were used to excise and remove the tumor, and sterile wound clips used to

close the wound. The animal was monitored throughout recovery and returned to the cage. Animals

were monitored every other day to ensure well-being and examine for infection or irritation

surrounding the surgical site. Wound clips were removed 10 days post-surgery. All procedures

were in accordance with AVMA and local IACUC guidelines.

Statistical analysis

Data are presented as the mean accompanied by SEM or SD and statistics were calculated using

Graphpad Prism 6, 7, and 8 software (Graphpad Software, Inc., La Jolla, CA, USA). Statistical

significance was defined as $p < 0.05$, 0.01, 0.05, and 0.001 respectively, unless otherwise specified.

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Author Contributions

689   C.Z. and S.N.T. conceived and supervised the project; Z.Y., M.J.O., J.L., F.Z., P.J., K.B, C.G.,

690   M.N.R., L.C., S. R.-C., N.A.R., M.P.M, and D.M.F. performed experiments and analyzed data;

691   K.L. developed image analysis program; H.L. provided specialized devices; C.Z., S.N.T., Z.Y.,

692   and M.J.O. wrote the paper.

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 Figure legends

Fig. 1. Functionally impaired antigen-specific CD8$^+$ T cell responses in the TME. (A)
Animal models used in (*B*)-(*F*). *Left*, B16F10 melanoma cells were intradermally injected into
the lateral dorsal skin of C57BL/6 mice at d-8. Ag-NPs were administered at d-1 into the tumor.
Right, Ag-NPs were administered into the tumor-naïve lateral dorsal skin at d-1. *Both*, at d0,
B16F10-OVA melanoma cells were injected into the contralateral dorsal skin. Primary
melanomas were resected at d2 and tumor growth as well as animal survival were monitored. **(B)**
IVIS image of AF647 signal 24 h post AF647-labelled NP administration i.d. into the lateral
dorsal skin. *Left*, NP injection site (white arrow) and dLN (green circle). *Right*, dLN and NdLN
after excision. **(C)** Schematic of the Ag-NPs. **(D)** Number of CD3$^-$ cells positively stained by a
mAb against SIINFEKL:H2-K^b (clone 25D1.16) 24 h after *in vitro* coincubation of SIINFEKL
with splenocytes. Each point represents a technical replicate. Mean ± SD (lines). **(E, F)** Mean ±
SEM (n=5) of size of contralateral (secondary) tumor (*E*) and animal survival (*F*) after Ag-NP
challenge in the tumor (red) or naïve skin (gray), corresponding to the model cohorts depicted in
(*A*). **(G)** Animal model used in (*H*)-(*N*). *Left*, B16F10 melanoma cells were injected into
CD45.1$^+$ C57BL/6 recipient mice at d-7. *Left and right*, CD8$^+$ T cells isolated from the spleens of
CD45.2$^+$ OT-I donor mice were adoptive transferred at d-1 and Ag-NPs or saline was
administered i.t. into B16F10 bearing animals (Tumor-bearing) or the naïve skin (Naïve) at d0.
At d3 the donor cells were harvested from recipient mice and analyzed. **(H)** Number of CD45.2$^+$
OT-I cells in each proliferative generation in response to *in vivo* challenge with Ag-NP in the
tumor (red) of the tumor-bearing animals and the naïve skin of the control animals (gray). Data
represents mean ± SEM. n=5. **(I-K)** Comparison of frequency (*I*) and number (*J, K*) of indicated
phenotypic marker expressing CD45.2$^+$ populations between cells harvested from the tumor (*i, j*)
or the LNs draining the tumor (*K*) of the tumor-bearing animals (red) and from naïve skin (*I, J*)
or the LNs draining the naïve skin (*K*) of the control animals (gray) after *in vivo* Ag challenge.
Each point represents individual animal. Data represent mean ± SEM. n=5. **(L, M)** Comparison
of anti-PD-1 mAb fluorescence intensity (FI) profile using representative histogram from donor
cells from an individual animal from each group (*L*) and mean ± SEM (n=5) of mean FI (MFI) of
PD-1$^+$subpopulation in each proliferative generation (*M*) between CD45.2$^+$ cells harvested from
the LNs draining the tumor of the tumor-bearing animals (red) or the naïve skin of the control
animals (gray). **(N)** Frequency of PD-1$^+$ and CD25$^+$ cells over CD45.2$^+$ population in the spleen
of tumor-bearing (red) or tumor-lacking (gray) animals after *in vivo* Ag challenge. Each point
represents individual animal. Data represent mean ± SEM. n=5. "*" indicates significance by
two-way ANOVA with Tukey's post-hoc test; "#" indicates significance compared to theoretical
value of 1.0 by one-sample t-test; "^" indicates significance by Log-rank (Mantel-Cox) test;
$ indicates significance by repeat measures ANOVA; Tumor growth and survival experiments in
(*E*)-(*F*) are representative of two independent experiments.

Fig. 2. Lowered T cell activation response and TCR–pMHC 2D affinity of CD8$^+$ T cells
recovered from tumors and TdLNs. (A) Animal models used in (*B*)-(*D*). *Left*, CD45.1$^+$
C57BL/6J recipients were implanted with B16F10 tumor on d-7. *Left and right*, splenic CD8$^+$ T

cells from CD45.2$^+$ OT-I mice adoptively transferred into recipient animals d0 and donor cells

were harvested d3. **(B-D)** Activation and function in response to *ex vivo* SIINFEKL challenge of

CD45.2$^+$ donor cells harvested from tumor vs naïve skin (*B*), tumor- vs naïve-dLNs (*C*), and

spleens (*D*) of tumor-bearing (red) vs -naïve (gray) animals were analyzed by for the indicated

phenotypical markers. Each point represents data from one individual animal. Data represents

mean ± SEM. Representative results of two independent experiments with n≥3. **(E)** Animal

model used in (*G*). CD45.1$^+$ C57BL/6J recipients that were tumor-naïve (*right*) or had just been

implanted with B16F10 tumors (*left*) were adoptively transferred with splenic CD8$^+$ T cells from

CD45.2$^+$ OT-I mice on d0. At d7, CD45.2$^+$ donor cells were isolated from recipients' TdLNs and

spleen for binding analysis. **(F)** Schematic of micropipette adhesion frequency (MAF) assay. A

micropipette-aspirated RBC coated with SINNFEKL:H2-K^{b}α3A2 (*left*) was driven to repeatedly

contact a donor CD8$^+$ T cell expressing OT-I TCR, aspirated by an opposing micropipette

(*right*). Adhesion mediated by TCR–pMHC interaction, if occurred, was detected visually by

RBC elongation. An adhesion frequency (P_a = # of adhesions/# of total contacts) was evaluated

from 50 times of repeated 2-s contacts between a RBC–T cell pair from which an effective 2D

affinity $A_cK_a = -\ln(1 - P_a)/(m_{TCR}m_{pMHC})$ was calculated. Here A_c is the constant contact area and

m_{TCR} and m_{pMHC} are the respective densities of TCR and pMHC measured separately by FACS.

(G) Comparison of TCR–pMHC 2D affinities measured from indicated conditions. 2D affinity

of each compartment was divided by the mean A_cK_a value of T cells from the spleen of the same

animal (to normalize inter-animal variations). Results shown in (*B*)-(*D*) were from n= 3-5 mice;

"*" indicates significance by two-way ANOVA with Tukey's post-hoc test. Data in (*G*) are

presented as mean (line) ± 75/25% (boxes) and max/min (whiskers) of pooled measurements

from two independent sets of experiments in order to test sufficient number (24-31) of T cells per

condition to ensure reliable statistical comparisons (Mann-Whitney test). ***p<0.001, ns

indicates p≥0.05.

Fig. 3. Suppressed TCR antigen recognition by tumor and TdLN-localized CD8$^+$ T cells.

(A) Animal model used in (*B*)-(*G*) in which CD8$^+$ T cells were isolated from indicated tissues of

B16F10 tumor-bearing OT-I mice at indicated timepoints for analysis. **(B)** Comparison of OT-I

TCR–SIINFEKL:H2-K^{b}α3A2 2D affinities evaluated using CD8$^+$ T cells from the indicated

tissues. **(C)** Comparison of CD8–VSV:H2-K^b 2D affinities evaluated using CD8$^+$ T cells from

TdLN and NdLN of the same OT-I mouse. **(D)** Comparison between adhesion frequencies of

RBCs bearing anti-TCR antibody and CD8$^+$ T cells from TdLN and NdLN of the same OT-I

animal. **(E)** Comparison of average numbers of bonds per contact from OT-I CD8$^+$ T cells–

SIINFEKL:H2-K^b interaction, calculated from adhesion frequencies by $\langle n \rangle = -\ln(1 - P_a)$,

normalized by the densities of the TCR (m_{TCR}) and pMHC (m_{pMHC}), evaluated using CD8$^+$ T

cells from TdLN and NdLN. Since $\langle n \rangle/(m_{TCR}m_{pMHC})$ is the effective 2D affinity $A_cK_{a,TCR}$ of the

TCR–pMHC bonds in the absence of CD8 binding, the 1 log higher $\langle n \rangle/(m_{TCR}m_{pMHC})$ values

observed here (which include not only TCR–pMHC bonds but also TCR–pMHC–CD8 and

CD8–MHC bonds) than the corresponding values in (*B*) (which include only TCR–pMHC

bonds) indicate that the trimolecular bonds greatly outnumber the two bimolecular bonds. **(F)**

Comparison of 2D affinities of CD8 for pre-formed TCR–pMHC complex, $K_a^*{}_{,CD8} =$

$[<n>/(A_cK_{a,TCR}m_{TCR}m_{pMHC}) - 1]/m_{CD8}$, evaluated using CD8$^+$ T cells from TdLN and NdLN of
the same OT-1 mouse. The calculation of $K_a^*{}_{,CD8}$ used the CD8 site density (m_{CD8}) measured
from flow cytometry, and the data from (*B*) and (*E*) by subtracting the contribution of the TCR–
pMHC bonds from the total bonds. The contribution of CD8–MHC bond was neglected since the
CD8–MHC affinity is ~500-fold smaller than the TCR–pMHC affinity. **(G)** Same as (*B*) except
that the experiments were done 3- and 11-days post tumor injection for only two tissue sources.
Data are presented as mean (line) $\pm$ 75/25% (boxes) and max/min (whiskers) of pooled
measurements from 2-6 independent experiments in order to test sufficient number (4-27) of T
cells per condition to ensure reliable statistical comparisons (Mann-Whitney test).

Fig. 4. TGF-β inhibition eliminates differential TCR–pMHC 2D affinities between CD8$^+$ T
cells from TdLNs vs NdLNs. (A) Animal model used in (*B*). B16F10 tumor-bearing OT-I mice
were treated with TGF-β inhibitor or DMSO as control in d4, d5, and d6 post tumor
implantation. **(B)** Comparisons of OT-I TCR–SIINFEKL:H2-K^{b}α3A2 2D affinities evaluated
using CD8$^+$ T cells from TdLN and NdLN of mice treated with TGF-β inhibitor (*left*) or DMSO
(*right*). Data are presented and statistically analyzed the same way as Fig. 3.

Fig. 5. Cell spreading and pulling on antigen pMHC is diminished for CD8$^+$ T cells isolated
from TdLNs. (A) Schematic of DNA-based MTP, consisting of a Cy3B-quencher pair flanking
a DNA hairpin to unfold at >4.7 pN forces. One end presents a pMHC or antibody to the TCR
and/or CD8 and the other end is linked to the cover glass *via* a gold nanoparticle to further
quench the fluorophore. A >4.7 pN force exerted on the pMHC or antibody by the cell unfolds
the DNA-hairpin and de-quenches the Cy3B to yield a fluorescent signal. **(B)** Representative
images of CD8$^+$ T cells from TdLNs or NdLNs of OT-I mice 7 days post tumor implantation
placed on glass surfaces functionalized with MTPs tagged by SIINFEKL:H2-K^b, anti-TCR or
BSA viewed 10 min after cell seeding by bright-field (top row), RICM (middle row) and TIRF
(bottom row). **(C, D)** Quantification of the spreading area (middle row in *B*) (*C*) and mean
fluorescence intensity (MFI) of the force signal (bottom row in *B*) (*D*) using a large number of
cells. Points, mean (line) $\pm$ 75/25% (boxes) and max/min (whiskers) from a representative
experiment that repeated three times. Analyzed CD8$^+$ T cells were recovered from TdLNs vs
NdLNs of d7 B16F10 melanoma-bearing animals as depicted in Fig. 3a. ****$p \leq 0.0001$, *$p \leq 0.05$,
n.s.: $p \geq 0.05$.

Fig. 6. TdLN suppressed calcium response of CD8$^+$ T cells to antigen stimulation. (A)
Bright-field (*top*) and fluorescence (*bottom*) photomicrographs of the microfluidic cell trap array
device used for the real-time calcium flux experiments. **(B)** Heatmaps of single-cell real-time
Fluo-4 fluorescence intensity (FI) of the CD8$^+$ T cells from TdLN (*top row*) or NdLN (*bottom*
row) of an OT-I mouse in d7 post tumor implantation (representative results from three
independent experiments). The inner surface of the cell traps was coated with either BSA (*left*
column) or SIINFEKL:H2-K^b (*right column*). For each cell, time zero was the moment when the

cell was trapped by a well, and each streak indicates the real-time Fluo-4 intensity for a tracked
cell. Streaks were ranked in ascending order of cumulated FI over 300 sec. **(C)** Mean FI of the
real-time calcium flux over all the cells from (*B*). **(D)** Cumulated FI over 300 s for each cell from
(*B*). **(E-G)** Calcium response to perfusion of 1 μM ionomycin of CD8$^+$ T cells from TdLN or
NdLN of an OT-I mouse in d7 post tumor implantation (representative results from two
independent experiments). Data presentation are parallel to (*B-D*), showing heatmaps (*E*),
associated mean FI vs time (*F*) and cumulated calcium intensity (*G*) after ionomycin
administration. Analyzed CD8$^+$ T cells were recovered from TdLNs vs NdLNs of d7 B16F10
melanoma-bearing animals as depicted in Fig. 3A. Data are presented as mean ± SEM in (*C*) and
(*F*), individual cells (points), mean (line) ± 75/25% (boxes) and max/min (whiskers) in (*D*) and
(*G*). Statistical comparisons by Mann-Whitney test, ****p<0.0001, n.s.: p≥0.05.

Fig. 7. TdLN suppressed TCR–pMHC 2D affinity of antigen-experienced CD8$^+$ T cells
associated with altered profiles of activation and function. (A) Animal model used in (*B-C*).
CD45.1$^+$ C57BL/6J recipients implanted with B16F10 melanoma (Tumor) or left untreated
(Naïve) were adoptively transferred with splenic CD8$^+$ T cells from CD45.2$^+$ OT-I mice at d0,
immunized with Ag-NP and CpG-NP at d3, and sacrificed at d7 to isolate donor T cells from
spleen and TdLNs (for Tumor-bearing mice) or LNs (for Naive mice) for analysis. **(B)**
Comparisons of fluorescent histograms of CD44 expression of CD45.2$^+$ (donor) and CD45.1$^+$
(endogenous) CD8$^+$ T cells from LNs and spleens in response to vaccination. Representative
histogram of one sample from each group. **(C)** Comparisons of OT-I TCR–SIINFEKL:H2-
K^{b}α3A2 2D affinities of CD8$^+$ T cells from spleen and TdLN of tumor-bearing recipients (red)
and tumor-lacking recipients (gray), divided by the mean 2D affinity from the spleen of the same
animal for each group to normalize variations between animals. Data presented as mean ±
75/25% (box) and max/min (whiskers) were pooled from two independent sets of experiments to
acquire sufficient number (17-20) of T cells per condition to allow for reliable statistic
comparison (Mann-Whitney test). **(D)** Animal model used in (*E*) and (*F*). *Left*, CD45.1$^+$
C57BL/6J recipient animals were implanted with B16F10 melanoma at d-3. *Left and right*, donor
splenic CD8$^+$ T cells from CD45.2$^+$ OT-I mice were adoptively transferred at d-1, and tumor-
bearing (Tumor) or tumor-naïve (Naïve) animals were challenged with Ag-NP at d0 either i.t. or
i.d., respectively, and animals were sacrificed at d3 to isolate donor T cells from TdLN and
spleen (for tumor-bearing mice) or LN and spleen (for control mice) for analysis. **(E, F)**
Comparisons of responses to *ex vivo* restimulated by SIINFEKL of donor cells harvested from
TdLN vs LN (*E*) and spleens (*F*) of respective tumor-bearing vs -naïve animals by the number of
cells expressing the indicated phenotypical markers. Each point represents data from an
individual mouse. Data is the mean ± SEM. n=5. **(G)** Schematic of the model used in (*H*). Donor
splenic CD8$^+$ T cells from CD45.2$^+$ OT-I mice were adoptively transferred d-1 into CD45.1$^+$
C57BL/6J recipient animals implanted with B16F10-OVA B16F10-OVA tumors on d0. Donor T
cells from spleen and TdLNs (for Tumor-bearing mice) or LNs (for Naive mice) were isolated
from animals d7 for analysis **(H)** Comparisons of OT-I TCR–SIINFEKL:H-2K^{b}α3A2 2D
affinities of CD45.2$^+$CD8$^+$ donor T cells harvested from the indicated tissue compartments of the
CD45.1$^+$ C57BL/6J recipients bearing B16F10-OVA tumors. n=16-20 T cells pooled from

repeated independent experiments. *indicates significance by two-way ANOVA with Tukey's post-hoc test (*E*, *F*), or Mann-Whitney test (*C*, *H*).

Supplemental Fig. 1. Tumor growth and immune phenotyping of B16F10 tumor growth in C57Bl/6 versus OT-I mice. (A) Volumes of B16F10 melanomas implanted in C57BL/6J and OT-I animals. **(B)** Identification of dLN by intratumoral injection of AF700-labelled lymph-draining particles (*top, right*) comparing to saline injection (*bottom*). **(C)** Major immune cell subtypes in animals bearing d7 B16F10. **(D-J)** Number of $CD8^+$ T cells (*D*), PD-1^+CD8^+ T cells (*E*), $CD25^+CD8^+$ T cells (*F*), $CD4^+$ T cells (*G*), Tregs (*H*), MDSCs (*I*), and PD-$L1^+CD45^+$ cells (*J*), in naïve, d3, d7, and d11 B16F10 tumors, dLNs, and spleens. "*" indicates difference between animal type by two-way ANOVA; "^" indicates difference between timepoints in each animal type (against all other timepoints if not specified). Data represent ± SEM (*A*, *D-J*). n=5.

Supplemental Fig. 2. Assessment of $CD8^+$ T cells from various tissue compartments of B16F10-bearing (red) and -lacking (gray) OT-I animals. (A) Ratios of OT-I TCR–SIINFEKL:H2-$K^b\alpha$3A2 2D affinity of $CD8^+$ T cells from TdLN over that from NdLN in d3, d7 and d11 post tumor implantation. Data are presented as mean ± SD and assessed statistically by one sample t tests with hypothesis form zero. **(B, C)** TCR expression on $CD8^+$ T cells from indicated tissue sources in mice bearing (red) or lacking (gray) a d7 tumor, shown as MFI of saturating concentration staining by an anti-TCR antibody (*B*) and FI histograms (curves) and MFI (numbers) of saturating concentration staining by SIINFEKL:H-$2K^b$ (*left*) and SIINFEKL:H-$2K^b\alpha$3A2 tetramers (*right*) (*C*).

Figure 1

Figure 2

Figure 3

Figure 4

A

B

Figure 5

Scale bar: 5μm

Figure 6

Figure 7

Supplemental Figure 1

Supplemental Figure 2