**Development of a Virus Particle-Based Antibody-Dependent Cellular Phagocytosis (ADCP)**
**Assay for HIV**

**Chitra Upadhyay[1*] and Priyanka Gadam Rao[1]**

[1]Division of Infectious Diseases, Department of Medicine, Icahn School of Medicine at Mount Sinai,
New York, New York, USA.

**\* Correspondence:**
Corresponding Author
Chitra.Upadhyay@mssm.edu

**Keywords: HIV, ADCP, Fc-mediated activity, THP-1 cells, virions, flow cytometry**

3405 words, 6 figures.

**Abstract (150 words)**

Antibody-dependent cellular phagocytosis (ADCP) is an Fc-mediated effector function that contributes
to the clearance of pathogens, including HIV. Conventional bead-based ADCP assays using
recombinant Env proteins provide valuable insights but do not recapitulate the structural and antigenic
complexity of intact virions, potentially limiting their physiological relevance. Here, we describe a
virus particle-based ADCP assay that preserves the native conformation and glycosylation of the HIV
envelope glycoprotein (Env), features critical for antibody recognition and Fc$\gamma$ receptor engagement.
The assay utilizes THP-1 monocyte-derived cells as effector cells and sucrose purified HIV-1 virions
coupled with fluorescent beads, as targets. This platform enables sensitive and reproducible
measurement of antibody-mediated phagocytosis in a biologically relevant context, facilitating
accurate assessment of Fc effector functions across monoclonal and polyclonal antibody samples from
multiple species. The approach addresses key limitations of traditional assays and provides a scalable
tool for evaluating humoral immunity in HIV infection and vaccine studies.

## Introduction

Broadly neutralizing antibodies (bNAbs) are a major focus of HIV vaccine and therapeutic research due to their demonstrated ability to prevent infection and suppress viraemia in both preclinical and clinical settings. In nonhuman primate (NHP) and humanized mouse models, passive administration of bNAbs has been shown to protect against simian-human immunodeficiency virus (SHIV) and HIV challenge respectively (1-7). Clinical trials, including the AMP studies, have further validated this approach, demonstrating up to 75% protection against bNAb-sensitive HIV-1 strains in humans (8). These findings highlight the central role of bNAbs as correlates of protection.

The predominant mechanism underlying bNAb-mediated protection is Fab-mediated neutralization, where antibodies block viral entry by targeting the conserved regions of the HIV-1 envelope glycoprotein (Env) (9, 10). However, accumulating evidence indicates that Fc-mediated effector functions such as antibody-dependent cellular phagocytosis (ADCP), antibody-dependent cellular cytotoxicity (ADCC), and complement activation, also contribute to antiviral efficacy, facilitating clearance of infected cells and virions (11-18). The interplay between Fab- and Fc-dependent mechanisms is increasingly recognized as critical for the breadth and durability of bNAb-mediated protection.

In the context of HIV-1, ADCP has been associated with reduced infection risk in NHP vaccine studies (19, 20) and in human clinical trials, including RV144 and HVTN 505, where ADCP activity correlated with decreased HIV-1 acquisition (11, 21). These findings highlight the need to better understand and quantify ADCP as a correlate of protective immunity. Several assay platforms have been developed to evaluate ADCP in the context of HIV. The most widely adopted approach utilizes beads coated with HIV Env proteins, which are opsonized by antibodies and subsequently internalized by monocytic cell lines such as THP-1 (22-27). This bead-based assay format is highly scalable and reproducible, enabling quantitative assessment of Fc-mediated phagocytic activity across diverse antibody specificities. Infected cell-based assays offer greater physiological relevance by presenting native trimeric Env on the surface of infected cells targets (28), but they are technically demanding and subject to variability in antigen density and cell viability (29-31). Despite their utility, both formats share a key limitation: they do not directly measure the phagocytosis of authentic HIV virions (31, 32). Bead-based systems using recombinant Env proteins (e.g., gp120, gp140, V3 or V1V2 proteins) (24-27) oversimplify Env presentation, omitting critical conformational and glycan features of the native trimer, and thus do not fully recapitulate the antigenic landscape of intact virions. Infected cell assays incorporate viral antigens in a more native context but do not capture particle-level clearance, and their technical complexity and variability limit their reproducibility and scalability for large studies. These limitations restrict our ability to fully evaluate how Fab and Fc mechanisms cooperate to mediate phagocytosis of HIV particles in a physiologically relevant context.

The aim of this study was to develop a virion-based ADCP assay that enables direct measurement of antibody-mediated phagocytosis of HIV virions. By coupling native HIV virions to fluorescent beads, this approach integrates the biological relevance of viral particles with the scalability and reproducibility of conventional bead-based platforms. The combination of physiologically relevant antigen presentation and high-throughput compatibility makes the virion-bead ADCP assay well-suited for vaccine evaluation, systems serology, and translational studies focused on identifying correlates of protective immunity. This platform supports robust functional profiling in both research and clinical settings.

## Materials and Methods

**Cell lines.** The HEK293T/17 (293T) were obtained from the American Type Culture Collection (ATCC, Manassas, VA). The following reagent was obtained through the NIH HIV Reagent Program, Division of AIDS, NIAID, NIH: TZM-bl Cells, ARP-8129, contributed by Dr. John C. Kappes, Dr. Xiaoyun Wu, and Tranzyme Inc (33). For all experiments, HEK293T/17 cells (293T) were used to produce infectious HIV-1 viruses and the TZM.bl cell line was used to assay virus infectivity. TZM.bl cell line is derived from HeLa cells and is genetically modified to express high levels of CD4, CCR5 and CXCR4 and contains reporter cassettes of luciferase and β-galactosidase that are each expressed from an HIV-1 LTR. The 293T and TZM.bl cell lines were routinely sub-cultured every 3 to 4 days by trypsinization and were maintained in Dulbecco's Modified Eagle's Medium (DMEM) supplemented with 10% heat-inactivated fetal bovine serum (FBS), HEPES pH 7.4 (10 mM), L-glutamine (2 mM), penicillin (100 U/ml), and streptomycin (100 μg/ml) at 37°C in a humidified atmosphere with 5% CO2.

THP-1 cells are a human monocytic cell line commonly used in ADCP assays to model macrophage-mediated phagocytosis. THP-1 cells were purchased from ATCC and maintained in RPMI 1640 media (ATCC) containing 2 mM L-Glutamine (Gibco), 10% Fetal Bovine Serum (Sigma), 10 mM HEPES (Gibco), 55 μM beta-mercaptoethanol (Gibco), and 1X Penicillin/Streptomycin (Gibco). Cell culture densities were kept below $0.5 \times 10^6$ cells/ml to maintain consistent assay performance.

**Plasmids.** A full-length transmitted/founder (T/F) infectious molecular clone (IMC) of pREJO.c/2864 (REJO, ARP-11746) was obtained through the NIH HIV Reagent Program, Division of AIDS, NIAID, NIH, contributed by Dr. John Kappes and Dr. Christina Ochsenbauer (34). REJO is a tier 2, clade B, T/F isolate. The IMC of RHPA and QH0692 (tier 2, clade B, T/F) were kindly provided by Dr Benjamin Chen. The IMCs were generated by cloning the Env into a pNL4.3 backbone to construct pNL-RHPA and pNL-QH0692, respectively (35). The CMU06 IMC was generated similarly by cloning the Env into a pNL4.3 backbone to construct pNL-CMU06(35).

**Antibodies.** The following antibody reagents used in this study were obtained through the NIH AIDS Reagent Program, Division of AIDS, NIAID, NIH: Anti-HIV-1 gp120 monoclonal VRC01 from Dr. John Mascola (36); anti-HIV-1 gp120 monoclonal antibody NIH45-46 G54W, contributed by Dr. Pamela Bjorkman (37); anti-HIV-1 gp41 monoclonal 2F5 from Polymun Scientific (38); polyclonal HIV-Ig contributed by Dr. Luiz Barbosa. The V2i (830) and V3 (2219) and the irrelevant (non-HIV-1) anti-anthrax 3685 mAbs were obtained from the laboratory of Dr. Susan Zolla-Pazner (39-47). The mAb 3685 was used as a negative control. HIV-1 positive human plasma samples used were a gift from Dr Colleen Courtney (48). Mouse monoclonal antibodies and plasma samples were from vaccination experiments from our lab.

**Virus production and purification.** Infectious viruses were generated by transfecting 293T cells with pREJO, pNL-CMU06, pNL-RHPA and pNL-QH0692 plasmids using jetPEI transfection reagent (Polyplus, New York, NY)(49). Supernatants were harvested after 48 hours and clarified by centrifugation and 0.45μm filtration. Virus infectivity was assessed on TZM.bl cells as described(35, 49). Briefly, serial two-fold dilutions of virus stock in 10% DMEM were incubated with TZM.bl cells (in duplicates for each dilution) in half-area 96-well plates in the presence of DEAE-dextran (12.5 μg/ml) for 48 hours at 37°C. Virus infectivity was measured by β-galactosidase activity (Promega, Madison, WI). Virus stocks were concentrated (20X) by ultracentrifugation over 20% (w/v) sucrose in 1X phosphate buffered saline (PBS) at 25,000 RPM for 2 hours in an SW-28 swinging bucket rotor (Sorvall, Thermofisher Scientific). Supernatants were decanted and pellets dried briefly before resuspension in PBS. Inactivation of virions was carried out using Aldrithiol-2 (AT-2) (50, 51). Briefly,

125 ul of sucrose-purified virus was incubated with 0.5 mM AT-2 in DMSO for 2 hours at 37°C,
followed by centrifugation at 13,000 rpm for 2 hours. The supernatant was discarded, and the pellet re-
suspended in 125 ul PBS. Inactivation was confirmed by measuring infectivity in TZM.bl cells and
Env content was checked by Western blotting.

**Western blotting.** To quantify and monitor the expression of Env in each virus preparation
Western blot analyses were performed. The sucrose-purified virus particles were lysed, resolved by
SDS-PAGE on 4–20% tris-glycine gels (Bio-Rad, Hercules, CA), and blotted onto membranes, which
were then probed with antibodies. A cocktail of anti-human anti-gp120 MAbs (anti-V3: 391, 694, 2219,
2558; anti-C2: 841, 1006; anti-C5: 450, 670, 722; 1μg/ml each) was used to detect Env. MAb 91-5D
(1μg/ml) was used to detect Gag p24. Membranes were developed with Clarity Western ECL Substrate
(Bio-Rad, Hercules, CA) and imaged by iBright FL1500 Imaging System (Invitrogen, Carlsbad, CA).
Purified recombinant gp120 and p24 proteins were also loaded at a known concentration as controls
and quantification standards. Band intensities were quantified using the iBright Analysis Software
Version 5.0.1 (Invitrogen, Carlsbad, CA).

**Coupling of fluorescent beads to virions.** The coupling strategy used in this study is a standard
method widely used in the Luminex based multiplex immunoassays and is published previously(52-
55). Here we applied this approach for coupling the virus to the beads. Sucrose-purified, inactivated
virions were covalently coupled to carboxylate-modified microspheres (1.0 μm) using a two-step
carbodiimide reaction with the xMAP Ab Coupling (AbC) Kit according to manufacturers' instructions
(Luminex, Austin, TX). Carboxylated beads purchased from Thermo Fisher (cat# F8823), were
coupled to 125 μl of 20X concentrated virus preparations (~36.4x10$^9$ beads per reaction). Briefly, the
stock microspheres were vortexed and sonicated to resuspend and disperse the microspheres and 12 μl
was transferred to a tube containing 1200 ul of 1% BSA/1X PBS (per virus). The microspheres were
washed twice with 500 μl of activation buffer followed by vortexing and sonication after each step.
The microspheres were activated with 400 μL of activation buffer, 50 μL of 50 mg/ml Sulfo-NHS (N-
hydroxysulfosuccinimide), 50 μL of 40 mg/mL ethyl dimethylaminopropyl carbodiimide
hydrochloride (EDC) and incubated for 20 min at room temperature with end-to-end rotation. The
microspheres were washed three times in activation buffer, then incubated with AT-2 inactivated virus
in activation buffer for 2 hours at room temperature. We typically used a volume of 20X concentrated
virus that equals ~175ng total as measured by western blotting. The microspheres were subsequently
washed and resuspended in 1.2 mL of 0.1% BSA/PBS and stored at 4°C until ready to use.

**ADCP Assay Protocol.** The coupled microspheres (10 μl/well) were incubated with serial dilutions
of monoclonal antibodies or plasma for 2 hours at 37°C. Antibody opsonized virions coupled
microspheres were washed with 0.1% BSA/PBS twice to remove unbound antibodies. THP-1 cells
were added (200 μL/well) at a concentration of $1.25 \times 10^5$ cells/mL ($2.5 \times 10^4$ cells/well) and incubated
with the immune complexed microspheres overnight for ~16 h at 37°C. Cells were then fixed with 4%
PFA and acquired on a Attune NxT flow cytometer. Data analysis was performed using FCS Express
7 Research Edition (De Novo Software). ADCP scores were calculated as follows: [(% microsphere
positive cells) x (geometric mean fluorescent intensity of the microsphere positive cells)/10,000].
Control wells including virion coupled beads alone, cells alone and virion coupled beads without Ab
and cells (no Ab control for background phagocytosis).

**Statistical analysis.** Statistical analyses were performed as indicated in the figure legends with one
or two-way ANOVA using GraphPad Prism 10.6.0.

## Results

**Development of a virus particle-based ADCP assay.** To establish a physiologically relevant platform for measuring Fc effector activity against HIV-1, we developed a virus particle-based antibody-dependent cellular phagocytosis (ADCP) assay. As shown in Figure 1A, sucrose-pelleted REJO virions were coupled to 1 μm yellow-green, fluorescent beads via a two-step carboxyl chemistry. These virion-coated beads were opsonized with antibody and incubated with THP-1 monocytic effector cells. After fixation, phagocytosis was quantified by flow cytometry using AlexaFluor488 fluorescence to detect bead uptake by THP-1 cells. Gating was performed on singlet THP-1 cells to exclude aggregates, and ADCP scores were calculated by multiplying the geometric mean fluorescence intensity (MFI) of bead-positive cells by the percentage of bead-positive cells, normalized to background.

Initially, we used RHPA, a T/F, clade B, tier 2, HIV-1 isolate and monoclonal antibodies (mAb) that recognize the conformational CD4bs (NIH45-46) epitope on Env. A non-HIV-1 mAb 3685 was used as a negative control. As shown in Figure 1B, the mAb NIH45-46 (red histogram) mediated robust phagocytic activity with an ADCP score of 1179.3, significantly higher than both the non-HIV-1 control mAb 3685 (green histogram; ADCP score = 667.3) and the background control with no antibody (gray histogram; ADCP score = 634.0). These results confirm the specificity and sensitivity of the assay for detecting Fc-mediated phagocytosis of antibody-opsonized HIV-1 virions.

**Detection of ADCP activity by human monoclonal antibodies.** We next applied the assay to evaluate the functional capacity of a panel of well-characterized human HIV-1 mAbs targeting diverse HIV-1 Env epitopes including the CD4 binding site (VRC01, NIH45-46), gp41 (2F5), V2 (830), and V3/linear epitopes (2219). Each mAb was tested across a range of concentrations using RHPA HIV-1 virion coupled to fluorescent beads and THP-1 monocytes. As shown in Figure 2A-B, some HIV-1-specific mAbs mediated dose-dependent phagocytosis, with NIH45-46 and 830 demonstrating the highest ADCP activity, followed by moderate responses from VRC01 and 2F5 (Fig 2A-C). As expected, the irrelevant anthrax-specific mAb 3685 showed no detectable activity, confirming assay specificity. The V3 mAb 2219 did not mediate detectable ADCP. Quantitative analysis of the area under the titration curves (AUC) from both experiments (Figure 2C) confirmed significant differences in potency across the panel, with NIH45-46 and 830 yielding the highest values. The irrelevant anthrax-specific mAb 3685 remained at baseline throughout, validating assay specificity.

**Broad applicability across viral strains and antigens.** To assess the generalizability of the ADCP assay across diverse HIV-1 strains and antigen formats, we tested the same mAb panel against virions from two additional isolates, CMU06 and REJO. With CMU06 (Figure 3A), mAbs 830 and 2219 mediated robust, dose-dependent ADCP, whereas NIH45-46, VRC01, 2F5, and the irrelevant control 3685 showed little or no activity. In contrast, with REJO virions (Figure 3B), 830 retained strong phagocytic activity while NIH45-46 showed only low activity; 2219, effective against CMU06, failed to mediate ADCP. These findings highlight strain-dependent differences in epitope accessibility, with CMU06 appearing more permissive than REJO, emphasizing the need to assess antibody function across multiple viral isolates rather than relying on a single strain.

We next compared ADCP activity against recombinant Env by testing the panel with REJO gp120 monomers coupled to beads (Figure 3C). The mAbs 830, 2219, and NIH45-46 mediated the strongest ADCP, while VRC01 exhibited weak activity only slightly above background. As expected, 2F5, which targets gp41, showed no activity. Overall, responses to gp120 were lower than those seen with intact virions, suggesting that the native conformation and membrane context of Env enhance Fcγ

receptor engagement. These results reinforce the added value of virion-based assays for functional
antibody profiling.

**Polyclonal HIV-1 infected sera mediate virion phagocytosis.** We next assessed whether the
assay developed could detect ADCP mediated by polyclonal antibodies. RHPA virion-coupled
fluorescent beads were incubated with heat-inactivated sera from HIV-1 infected individuals, as well
as with purified polyclonal immunoglobulin G (HIV-Ig) followed by THP-1 monocytes as phagocytic
effector cells. As shown in Figure 4A-B, sera from infected donors consistently mediated dose-
dependent ADCP activity, whereas HIV-1 negative sera (Neg) showed minimal activity. Quantitative
analysis of the area under the titration curves (AUC) confirmed significant higher ADCP activity in
HIV-1 infected sera compared to negative control (Figure 4C). These findings demonstrate that
naturally elicited polyclonal antibodies in chronic HIV-1 infection can direct Fc-mediated clearance of
virions and validate the sensitivity and biological relevance of the virion-based ADCP assay for
profiling humoral immunity.

**Extension of the assay to mouse monoclonal antibodies.** To expand the utility of the ADCP
assay to preclinical models, we tested murine (mu) Env-specific mAbs against RHPA and QH0692
virion-coupled beads. RHPA virions from two independent preparations (Prep 1 and Prep 2) and
QH0692 virions were coupled to fluorescent beads, opsonized with mouse mAbs, and incubated with
THP-1 monocytes. As shown in Figure 5A-B, mu-MAb1 and mu-MAb3 mediated dose-dependent
ADCP activity against RHPA virions, with consistent results across both virus preparations. The
irrelevant control antibody mu-MAb4 showed no activity, and specificity was further confirmed by the
Fc-impaired mu-MAb1 LALA variant, which failed to mediate ADCP (56-58). The assay also
performed well with QH0692 virions (Figure 5C), where Env-specific mAbs again showed strong
phagocytic responses, while mu-MAb4 remained negative. Collectively, these results demonstrate that
the assay is compatible with murine antibodies, reproducible across virus preparations, and effective
with distinct HIV-1 isolates, supporting its utility for evaluating antibody responses in animal models
of HIV-1 vaccination or infection.

**Detection of vaccine-elicited ADCP activity in mouse sera.** To evaluate the applicability of
the virion-based ADCP assay in a vaccination setting, sera from mice co-immunized with HIV-1 gp120
DNA and protein were tested. Serially diluted sera were incubated with REJO virions or REJO gp120
proteins coupled with fluorescent beads, followed by THP-1 phagocytic cells. Vaccinated sera
mediated dose-dependent phagocytosis of both virion- and gp120-coupled beads, whereas sera from
unimmunized controls (normal mouse serum, NMS) showed no activity (Fig 6A-B). Notably, the
magnitude of ADCP was higher with gp120-coated beads, nearly two-fold greater in animal M117 and
M120 compared to the virion-coated beads (Fig 6C). Although these results may appear to indicate
stronger antibody responses, they are confounded by the use of monomeric gp120, which lacks the
native trimeric architecture, membrane association, and extensive glycan shield characteristic of intact
HIV virions. The non-native epitopes are exposed on the monomeric gp120 allowing increased
antibody accessibility, thereby inflating measured ADCP activity relative to assays employing
physiologically relevant viral particles. By contrast, the virion-based assay preserves native antigenic
features, offering a more physiologically relevant measure of vaccine-elicited ADCP. These findings
underscore the importance of intact virions for functional antibody profiling and highlight the potential
of this platform as a robust tool in preclinical vaccine studies.

**Discussion**

Fc-mediated effector functions of antibodies, including ADCP, are increasingly recognized as
important contributors to protective immunity against HIV, complementing Fab-mediated
neutralization. However, current ADCP assays have notable limitations. While bead-based assays
using recombinant Env proteins offer scalability and reproducibility, they fall short in mimicking the
structural and glycan complexity of the native Env trimer found on HIV virions (22, 23). In contrast,
infected cell-based assays provide more physiologically relevant antigen presentation but exhibit
variability in antigen density and are difficult to standardize for broader applications (28).

To address these challenges, we developed a virion-based ADCP assay by coupling intact HIV-
1 particles to fluorescent beads. This format retains critical conformational and glycosylation
determinants of Env that govern antibody recognition and Fcγ receptor engagement, while remaining
compatible with high-throughput flow cytometry. Importantly, it avoids the biosafety concerns and
variability associated with assays that use free virus assays (32), offering a biologically relevant and
scalable alternative. We employed THP-1 monocytes as effector cells due to their standardized and
scalable nature. While they do not fully recapitulate the diversity of Fcγ receptor expression found in
primary monocytes, macrophages, and dendritic cells, their cross-reactivity with IgG from multiple
species enabled robust assessment of murine and rabbit antibodies alongside human IgG (24, 26, 59,
60). Future studies should extend validation to primary myeloid cells and additional viral clades to
further strengthen its translational relevance.

Our findings contrast with those of Gach et al., who reported that HIV-1 virions are largely
resistant to ADCP, even in the presence of potent HIV-specific antibodies (32). Their study used
multiple effector cell types including THP-1 cells, U937 cells, and primary monocytes, but observed
minimal ADCP activity. This inefficiency was attributed to the low density of envelope trimers on the
virion surface, which limits effective Fcγ receptor engagement. In our study, we used virions equivalent
to ~175ng Env per coupling reaction, a relatively low amount that likely does not increase antigen
density compared to free virions. However, the bead-coupling strategy may have improved the spatial
organization and presentation of Env on the particle surface, facilitating more consistent antibody
engagement and downstream phagocytic signaling. This difference in antigen format, rather than
antigen quantity, may have contributed to the robust ADCP activity observed in our assay. Importantly,
we detected strong phagocytic responses mediated by both broadly neutralizing and non-neutralizing
antibodies, as well as polyclonal sera from HIV-infected individuals and vaccinated mice, underscoring
the sensitivity and versatility of the platform.

A key observation was the difference between gp120-coated beads and virion-based targets.
For example, the V3-specific mAb 2219 displayed activity with gp120 beads but not with REJO
virions, likely due to the exposure of non-native epitopes on recombinant proteins. On native HIV-1
particles, the V3 loop is typically masked by the trimeric envelope structure and extensive glycan
shield, maintaining a closed conformation that restricts antibody binding (61-64). This conformational
masking likely rendered the 2219 epitope inaccessible on virions, explaining the absence of ADCP
activity. These findings emphasize the importance of physiologically relevant antigen presentations in
ADCP assays to accurately assess antibody function and highlight the limitations of bead-based
systems employing recombinant proteins.

Overall, the virion-based ADCP assay provides a scalable, reproducible, and biologically
relevant platform that bridges the gap between simplified bead systems and complex infected-cell
assays. By enabling direct measurement of antibody-mediated phagocytosis of authentic HIV particles,

it offers a powerful tool for identifying correlates of protection, benchmarking therapeutic antibodies,
and evaluating vaccine-induced responses. Beyond HIV, this strategy is readily adaptable to other
enveloped viruses, including influenza, SARS-CoV-2, and filoviruses, where Fc effector functions play
critical roles in immunity (65).

**Figure Legends**

**Figure 1**. **ADCP Assay for Detecting Phagocytosis of Antibody-Opsonized HIV-1 Virions.** **(A)** Schematic overview of the assay. Sucrose pelleted REJO virions were carboxyl-coupled to 1 μm yellow-green beads. Virion-coupled bead were then incubated with HIV-1 envelope-specific mAb, washed, incubated with human THP-1 monocytes, fixed, and analyzed by flow cytometry. **(B)** Gates were drawn on singlet THP-1 cells, and phagocytic scores were calculated from data on the AlexaFluor488 fluorescence channel to quantify envelope-specific ADCP. Histograms indicate results with 5 μg/ml positive (NIH45-46; red) and negative control (3685-non-HIV-1; green) mAbs. Background phagocytosis (Bk) of virion-couple beads with no Ab is shown in gray.

**Figure 2**. **ADCP assay for detection of phagocytosis of human antibody opsonized virions.** Sucrose pelleted RHPA virions were carboxyl-coupled to 1 μm yellow-green beads. Virion-coupled bead were then incubated with HIV-1 envelope-specific mAbs, washed, incubated with human THP-1 monocytes, fixed, and analyzed by flow cytometry. Virion coupled beads incubated with cells without Ab were used as background and subtracted. An irrelevant non-HIV-1 mAb specific to anthrax (3685) was used as negative control. **(A)** Experiment 1 and **(B)** Experiment 2. **(C)** Area under titration curve (AUC) values were calculated from Fig 2A and 2B. Shading (gray) indicates the AUC range for the negative control mAb 3685. Comparisons were made between 3685 versus HIV-1 specific mAbs. *, $p \leq 0.05$; **, $p \leq 0.01$; ****, $p < 0.0001$ by 2-way ANOVA. $p > 0.05$ was left unmarked.

**Figure 3**. **Broad Applicability of the ADCP Assay Across HIV-1 Strains and Antigen Formats.** Sucrose pelleted virions were carboxyl-coupled to 1 μm yellow-green beads. Virion-coupled bead were then incubated with HIV-1 envelope-specific mAb,s washed, incubated with human THP-1 monocytes, fixed, and analyzed by flow cytometry. ADCP with **(A)** CMU06 virions, **(B)** REJO virions and **(C)** Rejo gp120. Virion coupled beads incubated with cells without Ab were used as background and subtracted. An irrelevant non-HIV-1 mAb specific to anthrax (3685) was used as negative control. Comparisons were made between 3685 versus HIV-1 specific mAbs. *, $p \leq 0.05$; **, $p \leq 0.01$; ****, $p \leq 0.0001$ by 2-way ANOVA. $p > 0.05$ was left unmarked.

**Figure 4**. **ADCP assay to measure phagocytosis of HIV-1 virions opsonized with polyclonal antibodies from infected individuals.** Sucrose pelleted RHPA virions were carboxyl-coupled to 1 μm yellow-green beads. The virion-coupled bead were incubated with heat-inactivated sera from HIV-1 infected individuals and polyclonal IgG (HIV-Ig), washed, then incubated with human THP-1 monocytes. After fixation samples were analyzed by flow cytometry. Virion coupled beads incubated with cells in the absence of Ab served as background and were subtracted. Sera from healthy individual (Neg) was used as negative control. **(A)** Experiment 1 and **(B)** Experiment 2. **(C)** Area under titration curve (AUC) values were calculated from panel A and B. Gray shading indicates the AUC range for the negative control polyclonal antibody (Neg). Comparisons were made between Neg versus HIV-1 specific antibodies. *, $p \leq 0.05$; **, $p \leq 0.01$; ***, $p \leq 0.0001$ by ANOVA. $p > 0.05$ was left unmarked.

**Figure 5**. **ADCP assay for detection of phagocytosis of mouse antibody opsonized virions.** Sucrose pelleted RHPA virions were carboxyl-coupled to 1 μm yellow-green beads. Virion-coupled bead were then incubated with HIV-1 envelope-specific mouse mAb, washed, incubated with human THP-1 monocytes, fixed, and analyzed by flow cytometry. RHPA viruses from two different transfections are tested **(A)** Prep 1, **(B)** Prep 2. **(C)** Another T/F isolate QH0692 was tested similarly. Non-HIV- mouse mAb mu-MAb4 was included as negative control. Virion coupled beads incubated with cells without Ab were used as background and subtracted. Comparisons were made between mu-MAb4 versus HIV-

1 specific mouse mAbs. **, p≤0.01; *** p≤0.001; ****, p≤0.0001 by 2-way ANOVA. p>0.05 was left
unmarked.

**Figure 6**. **Antibody-dependent cellular phagocytosis (ADCP) mediated by sera from immunized**
**mice against REJO HIV-1 virions and gp120.** Sera from mice co-immunized with HIV-1 gp120
DNA + protein were tested for their ability to mediate ADCP using phagocytic THP-1 cells and
fluorescent beads coated with **(A)** REJO virions and **(B)** REJO gp120. The ADCP scores were
calculated by multiplying the geometric mean fluorescence intensity (MFI) of the bead-positive cells
by the percentage of bead-positive cells. This value is then divided by 1,000. Background value as
determined based on ADCP scores of cells and beads was used to set the background and subtracted.
NMS is negative mouse sera for negative control. **(C)** Area under titration curve (AUC) values were
calculated from panel A and B. Comparisons were made between NMS versus sera from HIV-1
immunized mice. **, p≤0.01; ****, p≤0.0001 by ANOVA. p>0.05 was left unmarked.

**Conflict of Interest**

The authors declare that the research was conducted in the absence of any commercial or financial
relationships that could be construed as a potential conflict of interest.

**Author Contributions**

CU conceived and designed the study. PR performed the experiments. CU and PR analyzed the data.
CU wrote the original manuscript.  CU and PR read and approved the final manuscript.

**Funding**

This work was supported by [NIH], grant number [AI140909 and AI179427] to CU.

**Acknowledgments**

The authors would like to thank Dr. Susan Zolla-Pazner and Ms. Xiaomei Liu for providing HIV-1-
specific mAbs.

**Data Availability Statement**

The datasets generated for this study are available on request to the corresponding author.

**Reference**

1.    Hessell AJ, Hangartner L, Hunter M, Havenith CEG, Beurskens FJ, Bakker JM, Lanigan
CMS, Landucci G, Forthal DN, Parren PWHI, Marx PA, Burton DR. 2007. Fc receptor but
not complement binding is important in antibody protection against HIV. Nature 449:101-
104.

2.    Julg B, Sok D, Schmidt SD, Abbink P, Newman RM, Broge T, Linde C, Nkolola J, Le K, Su
D, Torabi J, Pack M, Pegu A, Allen TM, Mascola JR, Burton DR, Barouch DH. 2017.
Protective efficacy of broadly neutralizing antibodies with incomplete neutralization activity
against simian-human immunodeficiency virus in rhesus monkeys. Journal of Virology 91.

3.    Ko SY, Pegu A, Rudicell RS, Yang ZY, Joyce MG, Chen X, Wang K, Bao S, Kraemer TD,
Rath T, Zeng M, Schmidt SD, Todd JP, Penzak SR, Saunders KO, Nason MC, Haase AT,
Rao SS, Blumberg RS, Mascola JR, Nabel GJ. 2014. Enhanced neonatal Fc receptor function
improves protection against primate SHIV infection. Nature 514:642-5.

4.    Parren PWHI, Marx PA, Hessell AJ, Luckay A, Harouse J, Cheng-Mayer C, Moore JP,
Burton DR. 2001. Antibody protects macaques against vaginal challenge with a pathogenic
R5 simian/human immunodeficiency virus at serum levels giving complete neutralization in
vitro. Journal of Virology 75:8340-8347.

5.    Pegu A, Yang ZY, Boyington JC, Wu L, Ko SY, Schmidt SD, McKee K, Kong WP, Shi W,
Chen X, Todd JP, Letvin NL, Huang J, Nason MC, Hoxie JA, Kwong PD, Connors M, Rao
SS, Mascola JR, Nabel GJ. 2014. Neutralizing antibodies to HIV-1 envelope protect more
effectively in vivo than those to the CD4 receptor. Sci Transl Med 6:243ra88.

6.    Shingai M, Donau OK, Plishka RJ, Buckler-White A, Mascola JR, Nabel GJ, Nason MC,
Montefiori D, Moldt B, Poignard P, Diskin R, Bjorkman PJ, Eckhaus MA, Klein F, Mouquet
H, Lorenzi JCC, Gazumyan A, Burton DR, Nussenzweig MC, Martin MA, Nishimura Y.
2014. Passive transfer of modest titers of potent and broadly neutralizing anti-HIV
monoclonal antibodies block SHIV infection in macaques. Journal of Experimental Medicine
211:2061-2074.

7.    Stephenson KE, Wagh K, Korber B, Barouch DH. 2020. Vaccines and Broadly Neutralizing
Antibodies for HIV-1 Prevention. Annu Rev Immunol 38:673-703.

8.    Corey L, Gilbert PB, Juraska M, Montefiori DC, Morris L, Karuna ST, Edupuganti S, Mgodi
NM, deCamp AC, Rudnicki E, Huang Y, Gonzales P, Cabello R, Orrell C, Lama JR, Laher F,
Lazarus EM, Sanchez J, Frank I, Hinojosa J, Sobieszczyk ME, Marshall KE, Mukwekwerere
PG, Makhema J, Baden LR, Mullins JI, Williamson C, Hural J, McElrath MJ, Bentley C,
Takuva S, Gomez Lorenzo MM, Burns DN, Espy N, Randhawa AK, Kochar N, Piwowar-
Manning E, Donnell DJ, Sista N, Andrew P, Kublin JG, Gray G, Ledgerwood JE, Mascola
JR, Cohen MS, Hvtn H, Teams HHS. 2021. Two Randomized Trials of Neutralizing
Antibodies to Prevent HIV-1 Acquisition. N Engl J Med 384:1003-1014.

9.    Gilbert PB, Huang Y, deCamp AC, Karuna S, Zhang Y, Magaret CA, Giorgi EE, Korber B,
Edlefsen PT, Rossenkhan R, Juraska M, Rudnicki E, Kochar N, Huang Y, Carpp LN,
Barouch DH, Mkhize NN, Hermanus T, Kgagudi P, Bekker V, Kaldine H, Mapengo RE,
Eaton A, Domin E, West C, Feng W, Tang H, Seaton KE, Heptinstall J, Brackett C, Chiong
K, Tomaras GD, Andrew P, Mayer BT, Reeves DB, Sobieszczyk ME, Garrett N, Sanchez J,
Gay C, Makhema J, Williamson C, Mullins JI, Hural J, Cohen MS, Corey L, Montefiori DC,

Morris L. 2022. Neutralization titer biomarker for antibody-mediated prevention of HIV-1
acquisition. Nature Medicine 28:1924-1932.

10.  Pegu A, Borate B, Huang Y, Pauthner MG, Hessell AJ, Julg B, Doria-Rose NA, Schmidt SD,
Carpp LN, Cully MD, Chen X, Shaw GM, Barouch DH, Haigwood NL, Corey L, Burton DR,
Roederer M, Gilbert PB, Mascola JR, Huang Y. 2019. A Meta-analysis of Passive
Immunization Studies Shows that Serum-Neutralizing Antibody Titer Associates with
Protection against SHIV Challenge. Cell Host and Microbe 26:336-346.e3.

11.  Chung AW, Ghebremichael M, Robinson H, Brown E, Choi I, Lane S, Dugast AS, Schoen
MK, Rolland M, Suscovich TJ, Mahan AE, Liao L, Streeck H, Andrews C, Rerks-Ngarm S,
Nitayaphan S, de Souza MS, Kaewkungwal J, Pitisuttithum P, Francis D, Michael NL, Kim
JH, Bailey-Kellogg C, Ackerman ME, Alter G. 2014. Polyfunctional Fc-effector profiles
mediated by IgG subclass selection distinguish RV144 and VAX003 vaccines. Sci Transl
Med 6:228ra38.

12.  Hessell AJ, Hangartner L, Hunter M, Havenith CE, Beurskens FJ, Bakker JM, Lanigan CM,
Landucci G, Forthal DN, Parren PW, Marx PA, Burton DR. 2007. Fc receptor but not
complement binding is important in antibody protection against HIV. Nature 449:101-4.

13.  Berendam SJ, Styles TM, Morgan-Asiedu PK, Tenney D, Kumar A, Obregon-Perko V, Bar
KJ, Saunders KO, Santra S, De Paris K, Tomaras GD, Chahroudi A, Permar SR, Amara RR,
Fouda GG. 2021. Systematic Assessment of Antiviral Potency, Breadth, and Synergy of
Triple Broadly Neutralizing Antibody Combinations against Simian-Human
Immunodeficiency Viruses. J Virol 95.

14.  Schriek AI, Falck D, Wuhrer M, Kootstra NA, van Gils MJ, de Taeye SW. 2024. Functional
comparison of Fc-engineering strategies to improve anti-HIV-1 antibody effector functions.
Antiviral Res 231:106015.

15.  Richardson SI, Chung AW, Natarajan H, Mabvakure B, Mkhize NN, Garrett N, Abdool
Karim S, Moore PL, Ackerman ME, Alter G, Morris L. 2018. HIV-specific Fc effector
function early in infection predicts the development of broadly neutralizing antibodies. PLoS
Pathog 14:e1006987.

16.  Phelps M, Balazs AB. 2021. Contribution to HIV Prevention and Treatment by Antibody-
Mediated Effector Function and Advances in Broadly Neutralizing Antibody Delivery by
Vectored Immunoprophylaxis. Front Immunol 12:734304.

17.  Richard J, Prevost J, Alsahafi N, Ding S, Finzi A. 2018. Impact of HIV-1 Envelope
Conformation on ADCC Responses. Trends Microbiol 26:253-265.

18.  Dugast AS, Tonelli A, Berger CT, Ackerman ME, Sciaranghella G, Liu Q, Sips M, Toth I,
Piechocka-Trocha A, Ghebremichael M, Alter G. 2011. Decreased Fc receptor expression on
innate immune cells is associated with impaired antibody-mediated cellular phagocytic
activity in chronically HIV-1 infected individuals. Virology 415:160-7.

19.  Barouch DH, Stephenson KE, Borducchi EN, Smith K, Stanley K, McNally AG, Liu J,
Abbink P, Maxfield LF, Seaman MS, Dugast AS, Alter G, Ferguson M, Li W, Earl PL, Moss
B, Giorgi EE, Szinger JJ, Eller LA, Billings EA, Rao M, Tovanabutra S, Sanders-Buell E,
Weijtens M, Pau MG, Schuitemaker H, Robb ML, Kim JH, Korber BT, Michael NL. 2013.
Protective efficacy of a global HIV-1 mosaic vaccine against heterologous SHIV challenges
in rhesus monkeys. Cell 155:531-9.

20.    Barouch DH, Alter G, Broge T, Linde C, Ackerman ME, Brown EP, Borducchi EN, Smith
KM, Nkolola JP, Liu J, Shields J, Parenteau L, Whitney JB, Abbink P, Ng'ang'a DM, Seaman
MS, Lavine CL, Perry JR, Li W, Colantonio AD, Lewis MG, Chen B, Wenschuh H, Reimer
U, Piatak M, Lifson JD, Handley SA, Virgin HW, Koutsoukos M, Lorin C, Voss G, Weijtens
M, Pau MG, Schuitemaker H. 2015. Protective efficacy of adenovirus/protein vaccines
against SIV challenges in rhesus monkeys. Science 349:320-4.

21.    Neidich SD, Fong Y, Li SS, Geraghty DE, Williamson BD, Young WC, Goodman D, Seaton
KE, Shen X, Sawant S, Zhang L, deCamp AC, Blette BS, Shao M, Yates NL, Feely F, Pyo
CW, Ferrari G, Team H, Frank I, Karuna ST, Swann EM, Mascola JR, Graham BS, Hammer
SM, Sobieszczyk ME, Corey L, Janes HE, McElrath MJ, Gottardo R, Gilbert PB, Tomaras
GD. 2019. Antibody Fc effector functions and IgG3 associate with decreased HIV-1 risk. J
Clin Invest 129:4838-4849.

22.    Ackerman ME, Moldt B, Wyatt RT, Dugast AS, McAndrew E, Tsoukas S, Jost S, Berger CT,
Sciaranghella G, Liu Q, Irvine DJ, Burton DR, Alter G. 2011. A robust, high-throughput
assay to determine the phagocytic activity of clinical antibody samples. J Immunol Methods
366:8-19.

23.    Tay MZ, Liu P, Williams LD, McRaven MD, Sawant S, Gurley TC, Xu TT, Dennison SM,
Liao HX, Chenine AL, Alam SM, Moody MA, Hope TJ, Haynes BF, Tomaras GD. 2016.
Antibody-Mediated Internalization of Infectious HIV-1 Virions Differs among Antibody
Isotypes and Subclasses. PLoS Pathog 12:e1005817.

24.    Hioe CE, Kumar R, Upadhyay C, Jan M, Fox A, Itri V, Peachman KK, Rao M, Liu L, Lo NC,
Tuen M, Jiang X, Kong XP, Zolla-Pazner S. 2018. Modulation of Antibody Responses to the
V1V2 and V3 Regions of HIV-1 Envelope by Immune Complex Vaccines. Front Immunol
9:2441.

25.    Hioe CE, Li G, Liu X, Tsahouridis O, He X, Funaki M, Klingler J, Tang AF, Feyznezhad R,
Heindel DW, Wang XH, Spencer DA, Hu G, Satija N, Prevost J, Finzi A, Hessell AJ, Wang
S, Lu S, Chen BK, Zolla-Pazner S, Upadhyay C, Alvarez R, Su L. 2022. Non-neutralizing
antibodies targeting the immunogenic regions of HIV-1 envelope reduce mucosal infection
and virus burden in humanized mice. PLoS Pathog 18:e1010183.

26.    Hioe CE, Liu X, Banin AN, Heindel DW, Klingler J, Rao PG, Luo CC, Jiang X, Pandey S,
Ordonez T, Barnette P, Totrov M, Zhu J, Nadas A, Zolla-Pazner S, Upadhyay C, Shen X,
Kong XP, Hessell AJ. 2023. Vaccination with immune complexes modulates the elicitation of
functional antibodies against HIV-1. Front Immunol 14:1271686.

27.    Upadhyay C, Rao P, Behzadi MA, Feyznezhad R, Lambert GS, Kumar R, Kumar M, Yang
W, Jiang X, Luo CC, Nadas A, Arthos J, Kong XP, Zhang H, Hioe CE, Duty JA. 2024. Signal
peptide exchange alters HIV-1 envelope antigenicity and immunogenicity. Front Immunol
15:1476924.

28.    Bournazos S, Klein F, Pietzsch J, Seaman MS, Nussenzweig MC, Ravetch JV. 2014. Broadly
neutralizing anti-HIV-1 antibodies require Fc effector functions for in vivo activity. Cell
158:1243-1253.

29.    Nagel L, Kant S, Leeks C, Routy JP, Tremblay C, Thomas R, Szabo J, Cote P, Trottier B,
LeBlanc R, Rouleau D, Dupuy FP, Bernard NF, investigators in Montreal Primary HIVIc.
2021. Evolution of Antibodies to Native Trimeric Envelope and Their Fc-Dependent
Functions in Untreated and Treated Primary HIV Infection. J Virol 95:e0162521.

30. Kant S, Zhang N, Barbe A, Routy JP, Tremblay C, Thomas R, Szabo J, Cote P, Trottier B,
LeBlanc R, Rouleau D, Harris M, Dupuy FP, Bernard NF. 2020. Polyfunctional Fc
Dependent Activity of Antibodies to Native Trimeric Envelope in HIV Elite Controllers.
Front Immunol 11:583820.

31. Snow BJ, Keles NK, Grunst MW, Janaka SK, Behrens RT, Evans DT. 2024. Potent broadly
neutralizing antibodies mediate efficient antibody-dependent phagocytosis of HIV-infected
cells. PLoS Pathog 20:e1012665.

32. Gach JS, Bouzin M, Wong MP, Chromikova V, Gorlani A, Yu KT, Sharma B, Gratton E,
Forthal DN. 2017. Human immunodeficiency virus type-1 (HIV-1) evades antibody-
dependent phagocytosis. PLoS Pathog 13:e1006793.

33. Platt EJ, Wehrly K, Kuhmann SE, Chesebro B, Kabat D. 1998. Effects of CCR5 and CD4 cell
surface concentrations on infections by macrophagetropic isolates of human
immunodeficiency virus type 1. J Virol 72:2855-64.

34. Ochsenbauer C, Edmonds TG, Ding H, Keele BF, Decker J, Salazar MG, Salazar-Gonzalez
JF, Shattock R, Haynes BF, Shaw GM, Hahn BH, Kappes JC. 2012. Generation of
transmitted/founder HIV-1 infectious molecular clones and characterization of their
replication capacity in CD4 T lymphocytes and monocyte-derived macrophages. J Virol
86:2715-28.

35. Upadhyay C, Feyznezhad R, Cao L, Chan KW, Liu K, Yang W, Zhang H, Yolitz J, Arthos J,
Nadas A, Kong XP, Zolla-Pazner S, Hioe CE. 2020. Signal peptide of HIV-1 envelope
modulates glycosylation impacting exposure of V1V2 and other epitopes. PLoS Pathog
16:e1009185.

36. Wu X, Yang ZY, Li Y, Hogerkorp CM, Schief WR, Seaman MS, Zhou T, Schmidt SD, Wu
L, Xu L, Longo NS, McKee K, O'Dell S, Louder MK, Wycuff DL, Feng Y, Nason M, Doria-
Rose N, Connors M, Kwong PD, Roederer M, Wyatt RT, Nabel GJ, Mascola JR. 2010.
Rational design of envelope identifies broadly neutralizing human monoclonal antibodies to
HIV-1. Science 329:856-61.

37. Diskin R, Scheid JF, Marcovecchio PM, West AP, Jr., Klein F, Gao H, Gnanapragasam PN,
Abadir A, Seaman MS, Nussenzweig MC, Bjorkman PJ. 2011. Increasing the potency and
breadth of an HIV antibody by using structure-based rational design. Science 334:1289-93.

38. Stiegler G, Kunert R, Purtscher M, Wolbank S, Voglauer R, Steindl F, Katinger H. 2001. A
potent cross-clade neutralizing human monoclonal antibody against a novel epitope on gp41
of human immunodeficiency virus type 1. AIDS Res Hum Retroviruses 17:1757-65.

39. Gorny MK, Moore JP, Conley AJ, Karwowska S, Sodroski J, Williams C, Burda S, Boots LJ,
Zolla-Pazner S. 1994. Human anti-V2 monoclonal antibody that neutralizes primary but not
laboratory isolates of human immunodeficiency virus type 1. J Virol 68:8312-20.

40. Gorny MK, Pan R, Williams C, Wang XH, Volsky B, O'Neal T, Spurrier B, Sampson JM, Li
L, Seaman MS, Kong XP, Zolla-Pazner S. 2012. Functional and immunochemical cross-
reactivity of V2-specific monoclonal antibodies from HIV-1-infected individuals. Virology
427:198-207.

41. Nyambi PN, Mbah HA, Burda S, Williams C, Gorny MK, Nadas A, Zolla-Pazner S. 2000.
Conserved and exposed epitopes on intact, native, primary human immunodeficiency virus
type 1 virions of group M. J Virol 74:7096-107.

42.   Pinter A, Honnen WJ, He Y, Gorny MK, Zolla-Pazner S, Kayman SC. 2004. The V1/V2
domain of gp120 is a global regulator of the sensitivity of primary human immunodeficiency
virus type 1 isolates to neutralization by antibodies commonly induced upon infection. J Virol
78:5205-15.

43.   Gorny MK, Conley AJ, Karwowska S, Buchbinder A, Xu JY, Emini EA, Koenig S, Zolla-
Pazner S. 1992. Neutralization of diverse human immunodeficiency virus type 1 variants by
an anti-V3 human monoclonal antibody. J Virol 66:7538-42.

44.   Gorny MK, Williams C, Volsky B, Revesz K, Wang XH, Burda S, Kimura T, Konings FA,
Nadas A, Anyangwe CA, Nyambi P, Krachmarov C, Pinter A, Zolla-Pazner S. 2006. Cross-
clade neutralizing activity of human anti-V3 monoclonal antibodies derived from the cells of
individuals infected with non-B clades of human immunodeficiency virus type 1. J Virol
80:6865-72.

45.   Hioe CE, Wrin T, Seaman MS, Yu X, Wood B, Self S, Williams C, Gorny MK, Zolla-Pazner
S. 2010. Anti-V3 monoclonal antibodies display broad neutralizing activities against multiple
HIV-1 subtypes. PLoS One 5:e10254.

46.   Gigler A, Dorsch S, Hemauer A, Williams C, Kim S, Young NS, Zolla-Pazner S, Wolf H,
Gorny MK, Modrow S. 1999. Generation of neutralizing human monoclonal antibodies
against parvovirus B19 proteins. J Virol 73:1974-9.

47.   Bradley KA, Mogridge J, Mourez M, Collier RJ, Young JA. 2001. Identification of the
cellular receptor for anthrax toxin. Nature 414:225-9.

48.   Courtney CR, Agyingi L, Fokou A, Christie S, Asaah B, Meli J, Ngai J, Hewlett I, Nyambi
PN. 2016. Monitoring HIV-1 Group M Subtypes in Yaounde, Cameroon Reveals Broad
Genetic Diversity and a Novel CRF02_AG/F2 Infection. AIDS Res Hum Retroviruses
32:381-5.

49.   Upadhyay C, Feyznezhad R, Yang W, Zhang H, Zolla-Pazner S, Hioe CE. 2018. Alterations
of HIV-1 envelope phenotype and antibody-mediated neutralization by signal peptide
mutations. PLoS Pathog 14:e1006812.

50.   Rossio JL, Esser MT, Suryanarayana K, Schneider DK, Bess JW, Jr., Vasquez GM, Wiltrout
TA, Chertova E, Grimes MK, Sattentau Q, Arthur LO, Henderson LE, Lifson JD. 1998.
Inactivation of human immunodeficiency virus type 1 infectivity with preservation of
conformational and functional integrity of virion surface proteins. J Virol 72:7992-8001.

51.   Stieh DJ, King DF, Klein K, Aldon Y, McKay PF, Shattock RJ. 2015. Discrete partitioning of
HIV-1 Env forms revealed by viral capture. Retrovirology 12:81.

52.   Weiss S, Itri V, Pan R, Jiang X, Luo CC, Morris L, Malherbe DC, Barnette P, Alexander J,
Kong XP, Haigwood NL, Hessell AJ, Duerr R, Zolla-Pazner S. 2022. Differential V2-directed
antibody responses in non-human primates infected with SHIVs or immunized with diverse
HIV vaccines. Nat Commun 13:903.

53.   Haynes BF, Gilbert PB, McElrath MJ, Zolla-Pazner S, Tomaras GD, Alam SM, Evans DT,
Montefiori DC, Karnasuta C, Sutthent R, Liao HX, DeVico AL, Lewis GK, Williams C,
Pinter A, Fong Y, Janes H, DeCamp A, Huang Y, Rao M, Billings E, Karasavvas N, Robb
ML, Ngauy V, de Souza MS, Paris R, Ferrari G, Bailer RT, Soderberg KA, Andrews C,
Berman PW, Frahm N, De Rosa SC, Alpert MD, Yates NL, Shen X, Koup RA, Pitisuttithum
P, Kaewkungwal J, Nitayaphan S, Rerks-Ngarm S, Michael NL, Kim JH. 2012. Immune-
correlates analysis of an HIV-1 vaccine efficacy trial. N Engl J Med 366:1275-86.

54. Mkhize NN, Durgiah R, Ashley V, Archary D, Garrett NJ, Karim QA, Karim SS, Moore PL,
Yates N, Passmore JA, Tomaras GD, Morris L. 2016. Broadly neutralizing antibody
specificities detected in the genital tract of HIV-1 infected women. AIDS 30:1005-14.

55. Yates NL, deCamp AC, Korber BT, Liao HX, Irene C, Pinter A, Peacock J, Harris LJ, Sawant
S, Hraber P, Shen X, Rerks-Ngarm S, Pitisuttithum P, Nitayapan S, Berman PW, Robb ML,
Pantaleo G, Zolla-Pazner S, Haynes BF, ..., Tomaras GD. 2018. HIV-1 Envelope
Glycoproteins from Diverse Clades Differentiate Antibody Responses and Durability among
Vaccinees. J Virol 92.

56. Lund J, Winter G, Jones PT, Pound JD, Tanaka T, Walker MR, Artymiuk PJ, Arata Y, Burton
DR, Jefferis R, et al. 1991. Human Fc gamma RI and Fc gamma RII interact with distinct but
overlapping sites on human IgG. J Immunol 147:2657-62.

57. Wilkinson I, Anderson S, Fry J, Julien LA, Neville D, Qureshi O, Watts G, Hale G. 2021. Fc-
engineered antibodies with immune effector functions completely abolished. PLoS One
16:e0260954.

58. Schlothauer T, Herter S, Koller CF, Grau-Richards S, Steinhart V, Spick C, Kubbies M, Klein
C, Umana P, Mossner E. 2016. Novel human IgG1 and IgG4 Fc-engineered antibodies with
completely abolished immune effector functions. Protein Eng Des Sel 29:457-466.

59. Lubeck MD, Steplewski Z, Baglia F, Klein MH, Dorrington KJ, Koprowski H. 1985. The
interaction of murine IgG subclass proteins with human monocyte Fc receptors. J Immunol
135:1299-304.

60. Temming AR, Bentlage AEH, de Taeye SW, Bosman GP, Lissenberg-Thunnissen SN,
Derksen NIL, Brasser G, Mok JY, van Esch WJE, Howie HL, Zimring JC, Vidarsson G.
2020. Cross-reactivity of mouse IgG subclasses to human Fc gamma receptors: Antibody
deglycosylation only eliminates IgG2b binding. Mol Immunol 127:79-86.

61. Zolla-Pazner S, Cohen SS, Boyd D, Kong XP, Seaman M, Nussenzweig M, Klein F,
Overbaugh J, Totrov M. 2016. Structure/Function Studies Involving the V3 Region of the
HIV-1 Envelope Delineate Multiple Factors That Affect Neutralization Sensitivity. J Virol
90:636-49.

62. Liu L, Cimbro R, Lusso P, Berger EA. 2011. Intraprotomer masking of third variable loop
(V3) epitopes by the first and second variable loops (V1V2) within the native HIV-1 envelope
glycoprotein trimer. Proc Natl Acad Sci U S A 108:20148-53.

63. Rao PG, Lambert GS, Upadhyay C. 2023. Broadly neutralizing antibody epitopes on HIV-1
particles are exposed after virus interaction with host cells. J Virol 97:e0071023.

64. Zolla-Pazner S, Cardozo T. 2010. Structure-function relationships of HIV-1 envelope
sequence-variable regions refocus vaccine design. Nat Rev Immunol 10:527-35.

65. Zohar T, Alter G. 2020. Dissecting antibody-mediated protection against SARS-CoV-2. Nat
Rev Immunol 20:392-394.

**Figure 1**.

**(A)**

**(B)**

| Name | ADCP score |
|---|---|
| NIH45-46 | 1179.3 |
| 3685 | 667.3 |
| Bk | 634.0 |

**Figure 2**.

**Figure 3**.

**Figure 4.**

**Figure 5**.

**Figure 6**.