


Data-driven learning how oncogenic gene expression locally alters heterocellular networks

David J. Klinke ¹⁻³ , Audry Fernandez^{2,3}, Wentao Deng^{2,3}, and Anika C. Pirkey¹

¹Department of Chemical and Biomedical Engineering, West Virginia University, Morgantown, WV

²Department of Microbiology, Immunology and Cell Biology, West Virginia University, Morgantown, WV

³WVU Cancer Institute, West Virginia University, Morgantown, WV

1 **Discovering and developing pharmaceutical drugs increasingly**
2 **relies on mechanistic mathematical modeling and simulation.**
3 **In immuno-oncology, models that capture causal relations**
4 **among genetic drivers of oncogenesis, functional plasticity,**
5 **and host immunity provide an important complement to wet**
6 **experiments, given the cellular complexity and dynamics within**
7 **the tumor microenvironment. Unfortunately, formulating such**
8 **mechanistic cell-level models currently relies on hand curation**
9 **by experts, which can bias how data is interpreted or the pri-**
10 **ority of drug targets. In modeling molecular-level networks,**
11 **rules and algorithms have been developed to limit a priori bi-**
12 **ases in formulating mechanistic models. To realize an equivalent**
13 **approach for cell-level networks, we combined digital cytometry**
14 **with Bayesian network inference to generate causal models**
15 **that link an increase in gene expression associated with onco-**
16 **genesis with alterations in stromal and immune cell subsets di-**
17 **rectly from bulk transcriptomic datasets. To illustrate, we pre-**
18 **dicted how an increase in expression of Cell Communication**
19 **Network factor 4 (CCN4/WISP1) altered the tumor microenvi-**
20 **ronment using data from patients diagnosed with breast cancer**
21 **and melanoma. Network predictions were then tested using two**
22 **immunocompetent mouse models for melanoma. In contrast to**
23 **hand-curated approaches, we posit that combining digital cy-**
24 **tometry with Bayesian network inference provides a less biased**
25 **approach for elaborating mechanistic cell-level models directly**
26 **from data.**

27 Heterocellular networks | digital cytometry | deconvolution | anti-tumor
28 immunity | Bayesian network inference | functional plasticity
29 Correspondence: david.klinke@mail.wvu.edu

30 Introduction

31 Tissues are dynamic structures where different cell types or-
32 ganize to maintain function in a changing environment. For
33 instance, the mammary epithelium reorganizes during distinct
34 stages of the ovarian cycle in preparation for lactation
35 (Klinke, 2016). At the same time, immune cells clear dead
36 cells and defend against pathogens present in the tissue mi-
37 croenvironment. Ultimately, the number and functional ori-
38 entation of different cell types within a tissue interact to cre-
39 ate a network, that is a heterocellular network. This hetero-
40 cellular network is essential for creating and maintaining tis-
41 sue homeostasis. While we know that tissue homeostasis is
42 disrupted during oncogenesis, our understanding of how ge-
43 netic alterations quantitatively and dynamically influence the
44 heterocellular network within malignant tissues in humans

is not well developed despite large efforts, like The Cancer
Genome Atlas (TCGA), to characterize the genomic and tran-
scriptomic landscape in human malignancy (Hoadley et al.,
2018; Wells and Wiley, 2018). In parallel with these large
scale data gathering efforts, two informatic developments,
namely digital cytometry and Bayesian network inference,
may be helpful in interrogating these datasets.

In cytometry, single-cell sequencing technology elicits a
lot of excitement as it enables unbiased discovery of novel
cell subsets in particular disease states (Papalexi and Satija,
2018; Singer and Anderson, 2019). Unfortunately, per-
sistent challenges related to confounding of batch effects
with biological replicates limit the statistical power of these
datasets to link oncogenic transcriptional changes with re-
organization of the cellular network (Grun et al., 2014; Stuart
and Satija, 2019). Due to the high number of biological repli-
cates, transcriptomic datasets, such as the Cancer Genome
Atlas, provide a rich resource in characterizing the hetero-
geneity of oncogenic transformation. Yet, these data were
obtained from homogenized tissue samples and reflect the ex-
pression of genes averaged across a heterogeneous cell pop-
ulation. Computationally, "Digital Cytometry" can deconvol-
ute the prevalence of individual cell types present within a
mixed cell population (Newman et al., 2019). The approach
stems from the idea that the influx of a particular cell subset
into a tissue corresponds to an increase in a gene signature
uniquely associated with this particular cell subset (Shen-Orr
et al., 2012; Yoshihara et al., 2013; Wang et al., 2018; Zait-
sev et al., 2019). Gene signatures of immune cells have been
developed in a number of studies, which increasingly lever-
age scRNAseq data and machine-learning methods (Shen-
Orr et al., 2010; Becht et al., 2016; Schelker et al., 2017;
Torang et al., 2019). Besides representing different cellu-
lar subsets, gene signatures can also represent intracellular
processes associated with oncogenesis, like the epithelial-
mesenchymal transition (Tan et al., 2014; Koplev et al., 2018;
Malta et al., 2018; George et al., 2017; Klinke and Torang,
2020). Though, the predictive value of many of these tis-
sue "features" in inferring how heterocellular networks are
altered in diseased tissues remain unclear, as establishing cor-
relations among features tends to be the end point of studies
(e.g., (Tosolini et al., 2011; Malta et al., 2018; Thorsson et al.,
2018)).

Increases in size and information content of transcrip-

89 tomic datasets enable using probabilistic inference methods
90 to identify relationships within the data that could not be ob-
91 served using simpler statistical techniques (Hill et al., 2016;
92 Friedman, 2004). However to infer how heterocellular net-
93 works are altered in diseased tissues, we need to be able
94 to identify the direction of information flow within the net-
95 work, that is the causal relationships among interacting com-
96 ponents. One method to identify the topology of a causal
97 network in an unbiased way is to use algorithms that identify
98 Bayesian networks (Scutari, 2010). Bayesian networks are a
99 type of directed acyclic graphs (DAG), where each node rep-
100 represents a random variable, or "feature", and each edge rep-
101 represents a causal relationship between two nodes. As algo-
102 rithms for reconstructing Bayesian networks emerged, they
103 were used to model signaling pathways within cells (Sachs
104 et al., 2002), to identify known DNA repair networks in *E.*
105 *coli* using microarray data (Perrin et al., 2003) and to iden-
106 tify simple phosphorylation cascades in T lymphocytes using
107 flow cytometry data (Sachs et al., 2005, 2009). While many
108 more studies have been published since, a common conclu-
109 sion is that the statistical confidence associated with an in-
110 ferred network improves as the number of samples included
111 in a dataset is greater than the number of random variables.
112 However, transcriptomics data, like that obtained as part of
113 the TCGA, typically have a large number of random vari-
114 ables (n_{genes}) and a small number of biological replicates
115 ($n_{patients}$), which makes inferring gene-level networks com-
116 putationally difficult (Zou and Conzen, 2005).

117 As summarized in Figure 1, we propose an approach that
118 combines digital cytometry with Bayesian network infer-
119 ence to identify how heterocellular networks associated with
120 functional plasticity and anti-tumor immunity change during
121 oncogenesis in humans. Conceptually, digital cytometry im-
122 proves the statistical power by projecting the transcriptomic
123 space onto a smaller number of "features" that estimate the
124 prevalence of stromal and immune cell types and the average
125 differentiation state of malignant cells present within the tu-
126 mor microenvironment, such that $n_{features} \ll n_{patients}$.
127 The causal structure among these features can then be pre-
128 dicted using Bayesian network inference. While data un-
129 structured in time, such as the TCGA datasets, are not ideal
130 for inferring causality, we test the inferred networks using
131 in vivo experiments using syngeneic murine tumor models.

132 To illustrate the approach, we focused on Cell Communi-
133 cation Network factor 4 (CCN4/WISP1), as it is upregulated
134 in invasive breast cancer (Klinke, 2014) and correlates with
135 a lower overall survival in patients diagnosed with primary
136 melanoma (Deng et al., 2019). Functionally, CCN4 promotes
137 metastasis in melanoma by promoting a process similar to the
138 epithelial-mesenchymal transition (Deng et al., 2019, 2020).
139 In developing state metrics that quantify functional plastic-
140 ity in breast cancer and melanoma using an unsupervised ap-
141 proach, CCN4 was the only gene associated with both a mes-
142 enchymal state metric in breast cancer and a de-differentiated
143 state metric in melanoma that results in a secreted protein
144 (Klinke and Torang, 2020). The collective set of features,
145 or simply nodes of a network, were quantified in three tran-

146 scriptomic datasets obtained from bulk tissue samples from
147 patients with breast cancer and melanoma and used to gen-
148 erate a casual network describing how expression of a "gene
149 driver" associated with oncogenesis, such as CCN4, alters
150 the heterocellular network within a tissue using Bayesian net-
151 work inference.

152 Results

153 Generating causal graphs that link oncogenic
154 changes in gene expression with changes in the het-
155 ero-cellular network. Bayesian network inference involves
156 inferring the structure of the network, which captures the
157 specific interactions or edges among the nodes of a network
158 and represents them as a directed acyclic graph (DAG), and
159 then estimating the parameters of the conditional probability
160 distribution from the datasets. We used a two-step process to
161 learn the causal structure associated the cell-level networks.
162 First, we created a collection of edges that were consistently
163 identified among the different structural learning algorithms,
164 that is a consensus seed network. In the initial structure
165 learning step, an overall flow of the network was specified
166 by limiting the inclusion of edges into a proposed network.
167 In particular, we considered only edges into the "CD8 T
168 cells" node (i.e., a leaf node), only edges that originate
169 from the "Cancer" node (i.e., a root node), mostly edges
170 that originate from the "CCN4" node (with exception for
171 the "Cancer" node), and only edges into the "CD4 T cells"
172 and "Neutrophils" nodes. Specifying "CD4 T cells" and
173 "Neutrophils" as leaf nodes follows from the high number of
174 zero values for those features in the dataset, which were 350
175 and 439 samples in the BRCA dataset, respectively. This
176 was implemented by assigning the corresponding edges to a
177 "blacklist". Collectively, this represents a way to incorporate
178 prior knowledge about causal relationships associated with
179 oncogenesis and the roles that specific immune cells play in
180 controlling tumor cell growth.

181 As algorithms for structural learning have different under-
182 lying assumptions, we used an ensemble approach to average
183 across the different algorithms to identify an initial structure
184 of the DAG. Specifically, we used nine different structural
185 learning algorithms (Scutari, 2010), including a pairwise mu-
186 tual information (ARACNE), constraint-based (Incremental
187 association Markov Blanket - IAMB, Incremental associa-
188 tion with false discovery rate control - IAMB.FDR, practi-
189 cal constraint - PC.STABLE), local discovery of undirected
190 graphs (max-min parents and children - MMPC, Hiton par-
191 ents and children - SI.HITON.PC), score-based (hill climbing
192 - HC, Tabu search - Tabu), and hybrid learning (max-min hill-
193 climbing - MMHC) algorithms. Bootstrap resampling was
194 used in learning the network structure with each algorithm,
195 which resulted in generating 10,000 network structures. For
196 each algorithm, an averaged network structure was calculated
197 from the collection of network structures, where the thresh-
198 old for inclusion of an edge into the average network was
199 automatically determined by each algorithm and was nomi-
200 nally 0.5. Whether a particular edge promotes or inhibits
201 the target node was determined based on the sign of the cor-

202 relation coefficient between the two nodes. We applied the
203 same approach to both the breast cancer (BRCA - Figures 2
204 and 3) and the two melanoma datasets (common melanocytic
205 nevi and primary melanoma: GEO and primary melanoma
206 from the TCGA: SKCM - Figures S4 and 5). To generate
207 consensus seed networks, the BRCA dataset was analyzed
208 alone (see Table S1) while results for the two melanoma
209 datasets (see Tables S2 (GEO) and S3 (SKCM)) were used
210 together. Including edges in the consensus seed network
211 was based on consistency among algorithms, strength of the
212 edge, and whether the edge provided a new connection linking
213 the "Cancer" node with effector immune cell nodes, such
214 as "CD4 T cells" or "CD8 T cells", or potential negative feed-
215 back mechanisms, which is illustrated graphically in Figures
216 2 and S4. For instance, in analyzing the BRCA dataset, edge
217 numbers 32 ("Cancer" → "pM1"), 37 ("Cancer" → "B cells
218 naive"), 45 ("CCN4" → "Macrophages"), 46 ("Cancer" →
219 "resting NK cells"), and 53 ("CCN4" → "active NK cells")
220 were included as they provided novel edges to the consen-
221 sus seed network. The inferred direction of a number of
222 edges varied among the algorithms (yellow bars in Figures
223 2 and S4) and were left out of the consensus seed network.
224 The final network for each dataset was generated using a
225 hybrid learning algorithm (mmhc) using a "blacklist" spec-
226 ified based on prior causal knowledge and a "whitelist" cor-
227 responding to the consensus seed network. Similar to the first
228 step, bootstrap resampling ($n_{boot} = 10,000$) and network av-
229 eraging were used to generate the DAGs shown in Figures 3
230 and 5. The averaged DAG was used to generate parameters
231 for a linear Gaussian model estimated by maximum likeli-
232 hood and conditioned on the network structure that approx-
233 imates the joint probability distribution associated with the
234 dataset. Values for the linear coefficients and the average
235 node values were used to annotate the DAGs.

236 Oncogenesis in breast cancer was associated with a shift
237 from epithelial to mesenchymal cell state accompanied by
238 an increase in cell proliferation and a suppression of en-
239 dothelial cells, which were inferred with high confidence. In
240 turn, endothelial cells promote the infiltration of CD4 T cells.
241 The local structure associated with "Cancer"'s influence on
242 the "Mesenchymal" state via "CCN4" suggests an incoherent
243 type-3 feed-forward motif to regulate the mesenchymal state,
244 with CCN4 also inhibiting active NK cells. The high confi-
245 dence edge between active NK and resting NK cells follows
246 from these features being mutually exclusive in the dataset
247 and very few samples having zero values for both features.
248 The mesenchymal state increased cancer-associated fibrob-
249 lasts ("s) with high confidence. Interestingly, oncogenesis
250 was also associated with increasing the prevalence of a type 1
251 macrophage, which in turn promoted the recruitment of CD8
252 T cells. The prevalence of CD8 T cells are also connected to
253 "Cancer" via a larger incoherent feed-forward motif involv-
254 ing "CCN4" and "CAFs" with high confidence.

255 As there was more data supporting the BRCA DAG, the
256 resulting Bayesian network model was compared against the
257 underlying experimental data and used to explore the impact
258 of varying CCN4 expression in the context of normal and

tumor tissue (Figure 4). To simulate "normal" and "tumor"
tissue, we queried the conditional probability distribution by
generating samples from the Bayesian network and filtered
the values based on $p(\text{"Cancer"} < 0.15)$ and $p(\text{"Cancer"} >$
 $0.85)$, which are colored in orange and blue, respectively.
Corresponding experimental data points and trendlines are
overlaid upon the posterior distributions. The posterior dis-
tributions mirror the experimental data points, where there is
an increase in CCN4 expression between "normal" and "tu-
mor" tissue. The posterior distributions mirror the variability
observed in the experimental data when comprised of non-
zero values, such as CD8 T cells. In contrast, the prevalence
of zero values increased the range of the posterior distribu-
tion, such as for CD4 T cells. In comparing "normal" to
"tumor" tissue, CD8 T cells was the only feature, on aver-
age, increased in "tumor" tissue, while CD4 T cells, B cells,
and cancer associated fibroblasts were decreased. Slopes
of the trendlines highlight the influence of CCN4 gene ex-
pression on the prevalence of different immune cell popula-
tions. Increased CCN4 had the most pronounced inhibition
on NK cells and also suppressed CD8 T cells. CCN4 also had
a pronounced positive impact on the prevalence of cancer-
associated fibroblasts, macrophages, and slightly promoted
CD4 T cells. CCN4 seemed to have little to no impact on
B cells in "normal" tissue while inhibited B cells in "tumor"
tissue.

The breast cancer dataset contained 582 samples, of which
8.8% were from normal mammary tissue. In contrast, the
two melanoma datasets contained 78 GEO samples, which
includes 34.6% benign nevi, and 94 SKCM samples of pri-
mary melanoma only. While a lower number of samples
limits the inferential power of a dataset, we decided not to
combine them together as they had different distributions in
transcript abundance as a function of transcript length. As
the Bayesian network inference algorithm leverages differ-
ences in the magnitude of a feature within a population, ap-
proaches to harmonize these two datasets may introduce a
systemic bias that is convoluted with oncogenic transforma-
tion, as the GEO dataset has many samples obtained from be-
nign nevi while the SKCM dataset does not. We decided to
analyze the melanoma datasets separately and combine the
enriched edges in each dataset into a consensus seed net-
work that reflects both datasets. In analyzing the melanoma
datasets, edge numbers 26 ("CAF" → "CD8 T cells") and
30 ("CCN4" → "CAF") in the GEO analysis while edge
numbers 17 ("CCN4" → "CAF"), 18 ("CAF" → "CD8 T
cells"), and 22 ("Active NK cells" → "CD8 T cells") from
the SKCM analysis were included in the consensus seed net-
work. This consensus seed network was then included in the
"whitelist" to learn the structure and parameters associated
with Bayesian network inferred from the melanoma datasets
(see Figure 5).

Given the high prevalence of samples from benign nevi in
the GEO dataset, high confidence edges in the GEO network
focus on changes associated with oncogenesis. Similar to
the breast cancer analysis, oncogenesis was associated with a
shift from an epithelial to a mesenchymal-like cell state and

316 the promotion of cell proliferation. Here, the mesenchymal
317 cell state is promoted by both oncogenesis and CCN4 with
318 a coherent feed-forward motif. Similar to the breast cancer
319 analysis, oncogenesis promoted an increase in CD8 T cells,
320 but indirectly by recruiting active NK cells. In contrast to
321 the breast cancer analysis, CCN4 directly impacted CAFs
322 and resting NK cells, although the "CCN4" → "resting NK
323 cells" edge had both low confidence and low influence pa-
324 rameter. In analyzing the SKCM dataset, less emphasis is
325 placed on the changes associated with oncogenesis but how
326 expression of CCN4 influenced the network. Similarly to the
327 GEO analysis, the SKCM dataset suggested that CCN4 di-
328 rectly impacted the mesenchymal state, CAFs, and resting
329 NK cells, but the influence on resting NK cells changed from
330 a slight inhibition in the GEO dataset (-0.11) to strong pro-
331 motion in the SKCM dataset (0.75). In addition, the edge
332 between CAFs and the mesenchymal state was inferred with
333 high confidence but changing direction between GEO and
334 SKCM datasets suggests that the algorithms were unable to
335 discern edge direction from the data. In both melanoma
336 datasets, CAFs influence CD8 T cells via an incoherent feed-
337 forward motif involving the prevalence of macrophages. In
338 addition, Neutrophils, macrophage polarization, and B cells
339 were independent of oncogenesis and CCN4 expression. In
340 all three analysis, there was high confidence associated with
341 the edges among the nodes quantifying macrophage polariza-
342 tion, which is likely an artifact of formula used to calculate
343 $p(M\Phi_i)$'s. Queries of the conditional probability distribu-
344 tion based on the SKCM DAG for CD8 T cells, active NK
345 cells, Macrophages, B cells, and CAFs were similar to the
346 BRCA analysis (Fig. S5). Similar to the BRCA analysis, a
347 high number of zero values for the CD4 T cell features in the
348 SKCM dataset suggests caution in interpreting differences in
349 CD4 T cell predictions.

350 **Validating the impact of CCN4 on heterocellular net-**
351 **works using syngeneic mouse models.** Syngeneic im-
352 munocompetent mouse models of cancer provide an impor-
353 tant complement to retrospective studies of human data as
354 they can aid in causally linking genetic alterations with cel-
355 lular changes the tumor microenvironment. Here we used
356 two syngeneic transplantable models for melanoma to test
357 the predictions generated by the Bayesian network inference:
358 the spontaneous B16F0 model and the YUMM1.7 model that
359 displays $\text{Braf}^{V600E/WT} \text{Pten}^{-/-} \text{Cdkn2}^{-/-}$ genotype. As
360 these cell lines basally produce CCN4, we generated CCN4
361 knock-out (KO) variants of these parental cell lines using a
362 CRISPR/Cas9 approach and confirmed CCN4 KO by testing
363 conditioned media for CCN4 by ELISA. Tumors were gener-
364 ated by injecting the cell variants subcutaneously in 6-8 week
365 old female C57BL/6 mice and monitoring for tumor growth
366 ($n = 5$ in each group). Once wt tumors reached between 1000
367 and 1500 mm^3 in size, tumors were surgically removed from
368 all mice that were not considered outliers and processed into
369 single cell suspensions ($n = 3$ for YUMM1.7 variants and $n = 4$
370 for B16F0 variants). The single cell suspensions were
371 aliquoted among three antibody panels to characterize the
372 tumor infiltrating lymphocytes by flow cytometry (see Sup-

plementary Figures S8-S10 for gating strategies). While the
373 B16F0 and YUMM1.7 KO variants were generated using a
374 double nickase CRISPR/Cas9 approach, similar results were
375 obtained using a homology directed repair strategy (Fernan-
376 dez et al., 2020; Deng et al., 2020).
377

378 The percentage of CD45⁺ cells among total live cells ex-
379 hibited a semi-log dependence on tumor size (Fig. 6A -
380 B16F0: $R^2 = 0.607$, F-test p-value = 7.27E-6; YUMM1.7:
381 $R^2 = 0.830$, F-test p-value = 1.48E-7), where CCN4 KO
382 resulted in smaller tumors in both cell models with greater
383 CD45⁺ cell infiltration. As illustrated in Figure 6A,
384 YUMM1.7 variants had a much higher dependence on tumor
385 size than B16F0 variants. Conventionally, flow cytometry
386 data are normalized to tumor size to estimate the prevalence
387 of a particular cell type per tumor volume. Yet, the depen-
388 dence on tumor size could be a confounding factor in addi-
389 tion to CCN4 expression that could skew the results. More-
390 over, the Bayesian network analysis predicts the impact of
391 CCN4 alone on the prevalence of specific immune cell sub-
392 sets. Thus, we focused instead on the prevalence of a par-
393 ticular cell type within the live CD45⁺ TIL compartment to
394 compare against the Bayesian network predictions.

395 In comparing the wt B16F0 and YUMM1.7 models, the
396 relative prevalence of NK, CD4⁺ T, and CD8⁺ T cells were
397 similar while B cells were almost 10-times more prevalent in
398 the B16F0 tumors compared to YUMM1.7 tumors (Fig. 6B).
399 The prevalence of these different cell types changed within
400 the CD45⁺ TIL compartment upon CCN4 KO (Fig. 6C and
401 D). Figure 6C highlights the trends among the mouse models
402 and compares against the Bayesian network predictions ob-
403 tained from the BRCA and SKCM datasets. Predictions for
404 the change in cell type prevalence by CCN4 expression were
405 obtained by propagating a change in the "CCN4" node from
406 0 to 1 within the linear Gaussian model to the target node,
407 which is also represented by the slope of the "Cancer" trend-
408 lines in Figures 4 and S5. Specifically, CD4 and CD8 T cells
409 and B cells had analogous nodes in the Bayesian networks
410 as assayed in the flow panel, while NK cells were mapped
411 to "active NK cells" in the Bayesian network. The relative
412 change in abundance was largely consistent among the four
413 systems, with the YUMM1.7 model being the most different.
414 NK cells were most reduced by CCN4, which was observed
415 in the B16F0 model and BRCA and SKCM datasets. A re-
416 duction in CD8⁺ T cells by increased CCN4 expression was
417 consistent in both mouse models and both BRCA and SKCM
418 datasets. The CD4⁺ T cells seemed to vary where YUMM1.7
419 results seemed to be unaffected by CCN4 expression while
420 the BRCA and B16F0 results showed an increase and SKCM
421 showed a decrease. As stated previously, the BRCA and
422 SKCM predictions for CD4 T cells should be interpreted with
423 caution given the high frequency of zero values for the fea-
424 tures. B cell response was mixed with both the BRCA and
425 SKCM results suggesting no change and an increase in the
426 B16F0 model and a decrease in the YUMM1.7 model, with
427 the low number of B cells infiltrating YUMM1.7 tumors ren-
428 dered the results more variable. Given the small sample size
429 of the experimental mouse cohorts, only the extremes were

430 statistically significant, with NK cells significantly increased
431 (p-value = 0.047) and B cells significantly decreased (p-value
432 = 0.002) in B16F0 CCN4 KO tumors (Fig. 6D).

433 **Concordance in CCN4-induced changes in the**
434 **myeloid compartment are less clear.** In addition to
435 changes in T and NK cells within the live CD45⁺ compart-
436 ment, we also assayed myeloid subsets in tumors generated
437 by wt and CCN4 KO variants of the B16F0 and YUMM1.7
438 cell lines. Using the gating strategy summarized in Figure
439 S10, we focused on CD11c⁺ and CD11c⁻ macrophages and
440 three different myeloid-derived suppressor cell (MDSC) sub-
441 sets: granulocytic PMN-MDSC, monocytic Mo-MDSC, and
442 CD11c⁺ Mo-MDSC. In comparing tumors derived from wt
443 cell lines, CD11c⁺ macrophages were the most predomi-
444 nant infiltrating myeloid cell subset and the CD11c⁺ sub-
445 sets (macrophages and Mo-MDSC) were the most consis-
446 tent (Fig. 7A). Upon CCN4 KO in the mouse models, the
447 macrophage subsets tended to increase while the MDSC sub-
448 sets decreased (Fig. 7B-E) within the CD45⁺ compartment.
449 The reduction in granulocytic PMN-MDSC in CCN4 KO
450 variants were most pronounced and statistically significant
451 (p=0.011 in B16F0 and p = 0.0011 in YUMM1.7). Con-
452 versely, neutrophils were increased within the CD45⁺ com-
453 partment in CCN4 KO tumors derived from YUMM1.7 cells
454 (log₁₀ fraction in wt YUMM1.7: -1.49±0.03 versus CCN4
455 KO: -1.32±0.09, p = 0.041) but not statistically different in
456 the B16F0 model (p = 0.10). Other myeloid subsets trended
457 similarly but with differences that were not statistically sig-
458 nificant, as expected given the small sample size. While
459 Ly6G and Ly6C staining may have been a better staining
460 strategy for distinguishing Mo-MDSC from PMN-MDSC,
461 Rose et al. reported that there are likely overlapping epi-
462 topes between the Ly6G component of Gr1 and F4/80 (Rose
463 et al., 2012). When stained simultaneously (as done here),
464 the Gr1 antibody outcompetes the F4/80 mAb such that the
465 F4/80⁻ Gr1⁺ cells are likely Ly6G⁺ Ly6C⁻ (PMN-MDSC)
466 and the F4/80⁺ Gr1⁺ population is Ly6G⁻ Ly6C⁺ (Mo-
467 MDSC) (see Fig. 7C and D). We observed a similar reduction
468 in PMN-MDSCs in YUMM1.7 tumors upon CCN4 KO using
469 Ly6G/Ly6C antibodies (Fernandez et al., 2020).

470 Comparing the trends in the myeloid compartment ob-
471 served among the mouse models and the Bayesian network
472 predictions obtained from the BRCA and SKCM datasets is
473 less clear, given the uncertainty as to how the digital cytome-
474 try features map onto the quantified myeloid subsets in these
475 mouse models. Key myeloid features in the Bayesian net-
476 works were macrophages oriented towards a M1 phenotype.
477 Correspondingly, CD11c⁺ macrophages, a subset that has
478 been associated with pro-inflammatory M1 tumor-associated
479 macrophages (Jeong et al., 2019), were the most predominant
480 myeloid subset in wt B16F0 and YUMM1.7 tumors, which
481 didn't change upon CCN4 KO. In the BRCA dataset, the
482 prevalence of macrophages was influenced by CCN4 expres-
483 sion; yet, the functional orientation away from the M2 and to-
484 wards the M1 phenotype depended solely on oncogenic trans-
485 formation. Similarly, the prevalence of macrophages was in-
486 fluenced by both CCN4 expression and oncogenic transfor-

mation in both melanoma datasets. In contrast to the BRCA 487
488 results, functional orientation of macrophages were indepen-
489 dent of both oncogenic transformation and CCN4 expression.
490 Neutrophils were predicted to be independent of CCN4 in
491 the melanoma datasets, which is not surprising considering
492 that the the majority of tumors had zero values for the Neu-
493 trophil feature (see Figs. S1-S3). Similarly, neutrophils were
494 about 10 times less abundant than CD11c⁺ macrophages in
495 the mouse models. Given the significant changes observed
496 in MDSCs in the mouse models, challenging digital cytome-
497 try predictions in this way highlights features that can be
498 improved, such as discriminating among terminally differ-
499 entiated and immature subsets, like Mo-MDSC and PMN-
500 MDSC.

501 **CCN4 has no direct effect on T cell proliferation but al-**
502 **ters CD8⁺ T cell function.** The local proliferation of CD8⁺
503 T cells correlates with clinical response to immune check-
504 point blockade (Huang et al., 2017; Twyman-Saint Victor
505 et al., 2015). In addition, the DAGs inferred from both the
506 breast cancer and melanoma datasets suggest that a decrease
507 in CD8⁺ T cells is driven indirectly through CCN4 via mod-
508 ulating cancer-associated fibroblasts or the activity of NK
509 cells. While the structural learning algorithms rejected a di-
510 rect edge between CCN4 and CD8⁺ cells, we tested whether
511 CCN4 directly inhibits T cell proliferation (see Fig. 8A
512 and B) using a statistical analysis of Cell Trace distributions
513 in CD4⁺ and CD8⁺ T cells stimulated in vitro (see Table
514 S4). Specifically, splenocytes were stimulated in vitro with
515 α CD3/ α CD28-loaded beads in the presence of media condi-
516 tioned by wt or CCN4 KO B16F0 cells or supplemented with
517 10 ng/ml recombinant mouse CCN4. In both the CD4⁺ and
518 CD8⁺ T cell populations, the presence of tumor-conditioned
519 media significantly inhibited the fraction of cells that divided
520 at least once (Dil - CD4 p-value = 0.022, CD8 p-value =
521 0.018) and the probability that a cell will divide at least once
522 (PF - CD4 p-value = 0.024, CD8 p-value = 0.013) while
523 CCN4 exposure was not a statistically significant factor. For
524 responding cells, the average number of divisions they un-
525 dergo (PI) was not different among experimental conditions
526 for CD4⁺ T cells (p-value = 0.22) but reduced in CD8⁺ T
527 cells exposed to tumor-conditioned media (p-value = 0.0077).
528 Overall, the presence of tumor-conditioned media and not
529 CCN4 influenced T cell proliferation, which was consistent
530 with the DAGs.

531 Another characteristic of CD8⁺ T cells present within the
532 tumor microenvironment is that they are dysfunctional (Li
533 et al., 2019). As the digital cytometry approach used here
534 doesn't estimate the functional state of CD8⁺ T cells only
535 their prevalence within a tissue sample, we decided to test
536 whether CCN4 had a direct impact on CD8⁺ T cell func-
537 tion, as quantified by target-specific ex vivo cytokine release
538 as measured by ELISpot. First we generated YUMM1.7-
539 reactive CD8⁺ T cells by immunizing C57BL/6mice against
540 YUMM1.7 cells and isolated CD8a⁺ T cells from spleno-
541 cytes three days after re-priming with live YUMM1.7 cells.
542 We also created a variant of CCN4 KO YUMM1.7 cells with
543 CCN4 expression induced by doxycycline and vector con-

544 trols that were used as target cells (see Fig. S11). IFN γ
545 and TNF α ELISpots were used to quantify the CD8⁺ T cell
546 functional response to the different tumor targets in the pres-
547 ence or absence of tumor-produced CCN4. As expected for
548 a re-call CD8a⁺ effector T cell response, the most prominent
549 IFN γ and lowest TNF α responses were against wt and CCN4
550 KO YUMM1.7 cells, with a slightly higher IFN γ response to
551 wt YUMM1.7 targets (see Fig. 8C, p-value < 0.05). Inter-
552 estingly, re-expression of CCN4 by CCN4 KO YUMM1.7
553 cells following doxycycline induction significantly reduced
554 both IFN γ and TNF α production (p-value < 0.001), which
555 suggests that CCN4 plays a direct role in inhibiting CD8a⁺
556 T cell function. Of note, CCN4 was predicted to directly in-
557 hibit the activity of NK cells, which share cytokine release
558 and cytotoxicity mechanisms with CD8⁺ T cells. Overall,
559 the changes observed between wt and CCN4 KO variants
560 of the B16F0 and YUMM1.7 mouse models were consistent
561 with the causal networks inferred from the breast cancer and
562 melanoma datasets.

563 Discussion

564 Validating the role that a particular molecule plays in driving
565 the disease state using targeted experiments is central for im-
566 proving understanding of biological mechanisms or selecting
567 among competing drug targets. Given the limited observabil-
568 ity of the biological response in experimental models and pa-
569 tients, mechanistic modeling and simulation is playing an in-
570 creasing role in helping answer many central questions in dis-
571 covering, developing, and receiving federal approval of phar-
572 maceutical drugs and also basic biology (Moore and Allen,
573 2019). In immuno-oncology, there is increasing interest in
574 modeling the heterocellular network of relevance for a spe-
575 cific immunotherapy. The first step in creating mathematical
576 models of cell-level networks is to create the topology of the
577 network, which is expressed in terms of which nodes to in-
578 clude and how they influence each other. The structure of
579 these cell-level models is created using a fully supervised ap-
580 proach, which means by hand using expert knowledge (Gad-
581 kar et al., 2016). For instance, systems of ordinary differen-
582 tial equations have been developed to capture multiple spa-
583 tial compartments containing interacting malignant, antigen
584 presenting, and T cells and to predict a general immune re-
585 sponse (Palsson et al., 2013), a response to immune check-
586 point blockade using CTLA-4, PD-1, and PD-L1 antibodies
587 (Milberg et al., 2019) or adoptive cell transfer (Klinke and
588 Wang, 2016).

589 While leveraging the knowledge of experts is a great start-
590 ing point, hand-curated models can also implicitly impose
591 bias on how data is interpreted. In the context of molecular-
592 level networks, rules and algorithms have been developed
593 to elaborate causal networks based on a limited set of rules
594 (Chylek et al., 2014; Sekar and Faeder, 2012; Boutillier et al.,
595 2018; Vernuccio and Broadbelt, 2019). The rules constrain
596 the types of interactions, or edges, that are realistic between
597 the nodes while the algorithms generate all possible edges
598 that are consistent with the rules and collection of nodes. The
599 resulting rule-based networks are then used to interpret data

by filter the edges for the most consistent and, in the process,
may reveal previously unappreciated pathways. For instance,
a rule-based model was used to interpret single-molecule de-
tection of multisite phosphorylation on intact EGFR to re-
veal new a role for the abundance of adaptor proteins to
redirect signaling (Salazar-Cavazos et al., 2020). Given the
challenges with representing the various activation states of
a 12-subunit Ca²⁺/calmodulin-dependent protein kinase II
(CaMKII) holoenzyme that is essential for memory function,
a rule-based model identified a molecular mechanism sta-
bilizing protein activity that was obscured in prior reduced
models (Pharris et al., 2019). Inspired by engineering better
CAR T cells, Rohrs et al. developed a rule-based model to
interpret site-specific phosphorylation dynamics associated
with Chimeric Antigen Receptors (Rohrs et al., 2018).

To our knowledge, no equivalent approaches exist in the
context of modeling cell-level networks.¹ We posit that cou-
pling digital cytometry with Bayesian network inference is
analogous to rule-based modeling in the context of modeling
cell-level networks. Here, the rules comprise a limited set of
constraints, or heuristics, related to the direction of informa-
tion flow. Specifically, the rules limit how changes in gene
expression within the malignant cell introduced during onco-
genesis propagate to stromal and immune cells present within
the tumor microenvironment and are implemented as a "black
list". The algorithms that underpin Bayesian network infer-
ence search over all possible network topologies for edges
that are consistent with the data. The resulting networks can
be used in multiple ways. As an unsupervised approach, the
network topology could complement existing workflows for
creating mechanistic mathematical models fit for use in test-
ing molecular targets (Gadkar et al., 2016; Ramanujan et al.,
2019). In addition, DAGs represent explicit hypotheses gen-
erated from pre-existing human data that motivate new exper-
iments to validate the predictions, as illustrated by the B16F0
and YUMM1.7 results.

While the focus here is in the context of breast cancer
and melanoma due the pre-existing breadth of data, the ap-
proach could be generally applied to other biological con-
texts and motivate new experimental studies. For instance,
one of the limitations of inferring the network topology in
the form of directed acyclic graphs is that some direct and in-
direct causal relationships can be confounded, such as recip-
rocal feedback modes of communication between cells (Zhou
et al., 2018). Discerning the difference between a direct and
indirect causal relationship has practical importance, such as
for selecting therapeutic targets (Pearl, 2005). Methods, like

¹One might consider agent-based or cellular automata models to apply
as the cellular interactions are specified by rules. In rule-based modeling
of molecular networks, the rules and algorithms elaborate a network space
that encompasses all possible topologies of the network and data is used to
prune the network to the most relevant. Similarly, the edges included in the
"blacklist" and "whitelists" can be considered as a Bayesian prior, where the
strength of inclusion in the final DAG and the coefficient associated with a
particular edge in the conditional probability function depend on the data.
In contrast, agent-based or cellular automata models require specifying all
interactions between cells as rules a priori and are validated qualitatively
by comparing emergent behavior against experimental observations (Hwang
et al., 2009; López et al., 2017; Mallet and De Pillis, 2006).

647 Granger causality and dynamic Bayesian networks (Finkle
648 et al., 2018; Li et al., 2014; Zou and Conzen, 2005), do exist
649 that could reveal direct and indirect causal relationships,
650 but time-series data is required. Unfortunately, human tissue
651 samples, like those in the TCGA, are very rarely sampled
652 with time. Analysis of pre-existing human datasets can be
653 complemented by a more focused experimental study of a
654 pre-clinical model. Specifically, single-cell RNAseq to identify
655 the cell types present and their associated gene signatures
656 can be combined with bulk transcriptomic sequencing to capture
657 the prevalence of all of the cell types within the tissue
658 sample and provide a large number of biological replicates
659 spanning the disease space - normal homeostasis; initiation;
660 early, middle and late progression; and productive resolution
661 or adverse outcomes. Similar network topologies would suggest
662 similar biological mechanisms and help select relevant
663 pre-clinical models for drug development. In short, we feel
664 that combining digital cytometry with Bayesian network inference
665 has the potential to become an indispensable unsupervised
666 approach for discovering relevant heterocellular networks
667 associated with disease.

668 Methods

669 **Digital Cytometry.** Transcriptomics profiling of bulk tissue
670 samples using Illumina RNA sequencing for the breast cancer
671 (BRCA) and cutaneous melanoma (SKCM) arms of the
672 Cancer Genome Atlas was downloaded from TCGA data
673 commons, where values for gene expression were expressed
674 in counts using the "TCGAbiolinks" (V2.8.2) package in R
675 (V3.6.1) and converted to TPM. RNA-seq data expressed in
676 counts assayed in samples acquired from benign melanocytic
677 nevi and untreated primary melanoma tissue and associated
678 sample annotation were downloaded from GEO entry
679 GSE98394 and converted to TPM. TCGA data and the benign
680 nevi and melanoma data were filtered to remove sample
681 outliers and normalized based on housekeeping gene
682 expression (Eisenberg and Levanon, 2013). Digital cytometry
683 features associated with the functional plasticity of tumor
684 cells within an epithelial to mesenchymal-like state space
685 were calculated based on state metrics developed separately
686 for bulk breast cancer and melanoma tissue samples (Klinke
687 and Torang, 2020). Cell proliferation features were calculated
688 based on the median expression of genes associated with
689 cell proliferation identified previously using human cell
690 line data (Deng et al., 2020). Features corresponding to
691 the prevalence of endothelial cells, cancer-associated fibroblasts,
692 macrophages, and CD4⁺ T cells were calculated using
693 CIBERSORTx (<https://cibersortx.stanford.edu>) using the
694 gene signatures derived from single cell RNAseq data (Tirosh
695 et al., 2016) while the prevalence of B cells naïve, CD8⁺
696 T cells, Macrophage M0 ($M\Phi 0$), Macrophage M1 ($M\Phi 1$),
697 Macrophage M2 ($M\Phi 2$), activated NK cells, resting NK
698 cells, and neutrophils were calculated using the LM22 im-
699 mune cell gene signatures in CIBERSORTx run in absolute
700 mode.

701 Given the potential lack of independence among the
702 macrophage features, the LM22 macrophage features were

combined to estimate the probability of the average
functional orientation using the formula described previously
(Kaiser et al., 2016):

$$p(M\Phi i) = \frac{M\Phi i}{M\Phi 0 + M\Phi 1 + M\Phi 2}, \quad (1)$$

where $i = \{0, 1, 2\}$ and denotes the specific macrophage sub-
type. Additional cellular features were excluded from the
analysis as they tended to have a large number of zero values
across the datasets or were disconnected from the rest of the
network in preliminary network inference studies. Sample
attributes were transformed to numerical values, which were
assumed to be extremes of a continuous variable (e.g.,
Normal = 0, Cancer = 1). The sample attributes, CCN4 gene
expression, and estimated cellular features extracted from the
bulk RNAseq data calculated for each sample are included in
the GitHub repository.

Bayesian Network Inference. Prior to network inference,
feature values were log transformed, normalized to values
between 0 and 1, and discretized (BRCA: 15 intervals; GEO
and SKCM: 6 intervals), as summarized in supplemental
Figures S1-S3. The features were then assigned to nodes. The
relationships among the nodes, or edges, were represented
by directed acyclic graphs inferred from the datasets using a
two-stage process, as detailed in the results section. Given
the inferred structure, a Bayesian network in the form of a
linear Gaussian model was fit to the datasets using maximum
likelihood estimation of the model parameters. Conditional
probability queries of the Bayesian networks were performed
by logic sampling with 10^5 samples. Bayesian network inference
was performed using the 'bnlearn' package (V4.5) in R
(V3.6.1).

Reagents and Cell Culture. Cytokines and antibodies
were obtained from commercial sources and used according
to the suppliers' recommendations unless otherwise indicated.
The mouse melanoma line B16F0 (purchased in 2008, RRID:
CVCL_0604) was obtained from American Tissue Culture
Collection (ATCC, Manassas, VA). The mouse melanoma line
YUMM1.7 (received in September 2017, RRID: CVCL_JK16)
was a gift from Drs. William E. Damsky and Marcus W.
Bosenberg (Yale University) (Meeth et al., 2016). B16F0
and YUMM1.7 cells were cultured at 37°C in 5% CO₂ in
high-glucose DMEM (Cellgro/Corning) supplemented with
L-glutamine (Lonza), penicillin-streptomycin (Gibco), and
10% heat-inactivated fetal bovine serum (Hyclone). All cell
lines were revived from frozen stock, used within 10-15
passages that did not exceed a period of 6 months, and
routinely tested for mycoplasma contamination by PCR.
CCN4 knock-out variants of B16F0 and YUMM1.7 cells were
generated using a double-nickase CRISPR/Cas9 editing
strategy described previously (Deng et al., 2019). Briefly,
two pairs of mouse CCN4 double nickase plasmids that
target the mouse CCN4 gene at different locations were
purchased from Santa Cruz Biotechnology, Inc. (Dallas,
TX) and transfected into B16F0

756 and YUMM1.7 cells following the manufacturer's instruc- 813
757 tions. Following antibiotic selection, surviving single clones 814
758 were isolated and expanded on 6-well plates. The concen- 815
759 tration of CCN4 in the cell culture media from those wells 816
760 was assayed using the Human WISP-1/CCN4 DuoSet ELISA 817
761 Kit (R&D Systems, Minneapolis, MN) to confirm CCN4 818
762 knockout. CCN4-knockout cells were further expanded and 819
763 aliquoted to create a low passage frozen stock. 820

764 **In vivo Tumor Assays and in vitro T cell proliferation** 821
765 **assays.** All animal experiments were approved by West Vir- 822
766 ginia University (WVU) Institutional Animal Care and Use 823
767 Committee and performed on-site. C57BL/6Nrl mice (6- 824
768 8 week-old female) were from Charles River Laboratories. 825
769 Mice were randomly assigned to treatment groups and co-
770 housed following tumor initiation. Subcutaneous tumors
771 were initiated by injecting mice subcutaneously with 3×10^5
772 of the indicated YUMM1.7 cells and 2.2×10^5 of the in-
773 dicated B16F0 cells in 100 μ L and, once palpable, tumor
774 sizes were recorded every other day via caliper. Tumor vol-
775 ume was calculated using the formula: $0.5236 \times \text{width}^2 \times$
776 length , where the width is the smaller dimension of the tu-
777 mor. Once WT tumors reached between 1000 and 1500 mm^3
778 in size, the tumors were surgically removed from mice in
779 both arms of the study (WT and CCN4 KO) after euthana-
780 sia and processed into single cell suspensions. This normally
781 occurred at Day 14 with the B16F0 model and at Day 27
782 with the YUMM1.7 model. Three tumors were processed
783 separately for each YUMM1.7 variant while four tumors
784 were processed for each B16F0 variant. Single-cell suspen-
785 sions were obtained by enzymatically digesting the excised
786 tumors using the Tumor Dissociation Kit and gentleMACS
787 C system (Miltenyi Biotec, Auburn, CA). In addition to
788 following the manufacturer's instructions, the gentleMACS
789 program 37C_m_TDK_1 was used for B16F0 tumors and
790 37C_m_TDK_2 was used for YUMM1.7 tumors. Following
791 lysing of the red blood cells, the remaining single-cell sus-
792 pensions were washed and stained with Live/Dead Fixable
793 Pacific Blue Dead Cell Stain Kit (ThermoFisher). Following
794 blocking with Mouse BD Fc Block (BD Biosciences), the
795 surface of the cells were stained with one of three different
796 antibody mixes that focused on T cells (CD45, CD3, CD4,
797 CD8, and PD1), NK and B cells (CD45, B220, NK11, DX5,
798 and PD1), and myeloid cells (CD45, CD11b, CD11c, Gr-1,
799 F4/80, and MHCII) and quantified by flow cytometry. The
800 specific antibodies used are listed in Supplemental Table S1.

801 To assess the impact of CCN4 on T cell proliferation
802 in vitro, splenocytes were obtained from naive C57BL/6
803 mice and stained with CellTrace Pacific Blue Cell Prolifera-
804 tion Kit (ThermoFisher). Stained splenocytes (2.5×10^5)
805 were stimulated for 3 days in 96 well plate with MACSi-
806 Beads loaded with anti-mouse CD3 and anti-mouse CD28
807 antibodies (AP beads, Miltenyi Biotec), at a 1:1 propor-
808 tion. Fresh serum-free DMEM media conditioned for 24
809 hours by either confluent wild-type (WT TCM) or conflu-
810 ent CCN4 KO (CCN4 KO TCM) melanoma B16F0 cells
811 were collected, centrifuged to remove cells and cell debris,
812 and added at 50% final volume during T cell stimulation

with AP beads. In addition, splenocytes were either left
unstimulated or stimulated with AP beads alone, or stimu-
lated in the presence of recombinant mouse CCN4 (rCCN4,
R&D) at a final concentration of 10 ng/mL. After 72h, cells
were washed and stained with Live/Dead Fixable Green Dead
Cell Stain Kit (ThermoFisher). Surface staining with anti-
mouse CD8/APC (Miltenyi Biotec), anti-mouse CD4/APC-
Cy7 (BD Biosciences), anti-mouse CD62L/PE (eBioscience,
ThermoFisher) and anti-mouse CD44/PerCPCy5.5 (eBio-
science, ThermoFisher) was performed after incubating the
cells with Mouse BD Fc Block (BD Biosciences). The pro-
liferation of both CD4 and CD8 T cells were quantified by
flow cytometry.

826 **In vitro suppression of CD8⁺ T cell function.** Inducible 826
827 mouse CCN4 expression lentiviral vector (IDmCCN4) was 827
828 constructed with Gateway cloning using Tet-on destination 828
829 lentiviral vector pCW57.1 (Addgene Plasmid #41393, a 829
830 gift from David Root) and pShuttle Gateway PLUS ORF 830
831 Clone for mouse CCN4 (GC-Mm21303, GeneCopoeia). 831
832 Lentiviruses were packaged as described (Deng et al., 2019) 832
833 to transduce YUMM1.7 cell with *Ccn4* CRISPR knockout 833
834 (Ym1.7-KO1) (Deng et al., 2019). After puromycin selec- 834
835 tion, two pools of cells with inducible mCCN4 (Ym1.7- 835
836 KO1-IDmCCN4) or vector control (Ym1.7-KO1-IDvector) 836
837 were obtained. ELISA tests with doxycycline (Dox, final 837
838 0.5 μ g/ml) induction revealed the mCCN4 expression was un- 838
839 der stringent control and the secreted protein was in the sim- 839
840 ilar level as compared with wild-type YUMM1.7 cells (data 840
841 not shown).

842 To generate YUMM1.7-reactive CD8⁺ T cells, healthy 842
843 C57BL/6Nrl mice were inoculated subcutaneously with 843
844 irradiated YUMM1.7 cells (10^5 /mouse), followed by live 844
845 YUMM1.7 cells (3×10^5 /mouse) 3 weeks later. The mice 845
846 without tumor growth in the next five weeks were main- 846
847 tained. Three days before the assay, the mice were injected 847
848 again with live YUMM1.7 cells (10^5 /mouse). On the day 848
849 of assay, these mice were euthanized and the YUMM1.7- 849
850 reactive cells were isolated from mouse splenocytes using 850
851 mouse CD8a⁺ T Cell Isolation Kit (130-104-075, Miltenyi 851
852 Biotec), resuspended in a concentration of 10^6 /ml. 50μ l 852
853 (5×10^4) of the YUMM1.7-reactive CD8⁺ T cells were 853
854 aliquoted into each well on a 96-well plate for ELISpot assay 854
855 using Mouse IFN γ /TNF α Double-Color ELISpot kit (Cellu- 855
856 lar Technology Limited, CTL) following manufacturer's in- 856
857 structions. Briefly, target tumor cells were stimulated with 857
858 IFN γ (200U/ml, or, 20ng/ml) for 24 hours, harvested and 858
859 resuspended in a concentration of 2×10^6 /ml. 50μ l (10^5) 859
860 of indicated tumor cells in triplicates were aliquoted into 860
861 each well, with or without doxycycline (Dox, final 0.5 μ g/ml). 861
862 The reactions were incubated at 37°C for 24 hours and 862
863 colored spots were developed (Red for IFN γ and blue for 863
864 TNF α). The spots were counted and imaged using an Olym- 864
865 pus MVX10 Microscope and the result was plotted and ana- 865
866 lyzed by GraphPad Prism (version 5).

867 **Flow Cytometry.** Single cell suspensions described above 867
868 were stained with specific antibodies or isotype controls 868

869 using conventional protocols. Fluorescence-activated cell
870 counting was performed using a BD LSRFortessa and FACS-
871 Diva software (BD Biosciences) as where the fluorescence
872 intensity for each parameter was reported as a pulse area
873 with 18-bit resolution. Unstained samples were used as nega-
874 tive flow cytometry controls. Single-stain controls were used
875 to establish fluorescence compensation parameters. For TIL
876 analysis, greater than 5×10^5 events were acquired in each
877 antibody panel in each biological replicate. In analyzing en-
878 riched cell populations, 2×10^4 events were acquired in each
879 biological replicate. Flow cytometric data were exported
880 as FCS3.0 files and analyzed with using R/Bioconductor
881 (V3.5.1), as described previously (Klinke and Brundage,
882 2009). The typical gating strategies for T cells, NK and B
883 cells, and myeloid cells are shown in supplementary Figures
884 S4-S6, respectively. The statistical difference in tumor infil-
885 trating lymphocytes between wt and CCN4 KO variants was
886 assessed using log-transformed values and a two-tailed ho-
887 moscedastic Student's t test. Cell proliferation was quantified
888 using metrics: fraction diluted (Dil), Precursor frequency,
889 %dividing cells (PF), Proliferation index (PI), and prolifer-
890 ation variance (SD^D) (Roederer, 2011). Statistical differ-
891 ences among these proliferation parameters were assessed us-
892 ing type III repeated measures ANOVA in the "car" (V3.0-7)
893 package in R. A p-value < 0.05 was considered statistically
894 significant.

895 **Data and Code Availability.** The code used in the analysis
896 can be obtained from the following GitHub repository:

- 897 • https://github.com/KlinkeLab/CellNetwork_2020

898 ACKNOWLEDGEMENTS

899 This work was supported by National Science Foundation (NSF CBET-1644932
900 to DJK) and National Cancer Institute (NCI 1R01CA193473 to DJK). The content is
901 solely the responsibility of the authors and does not necessarily represent the official
902 views of the NSF or NCI. We also used equipment from the WVU Flow Cytometry
903 & Single Cell core, which was supported by the National Institutes of Health Grants
904 GM103488/RR032138, GM104942, GM103434, and OD016165.

905 AUTHOR CONTRIBUTIONS

906 These contributions follow the International Committee of Medical Journal Edi-
907 tors guidelines: <http://www.icmje.org/recommendations/>. Conceptualization: DJK;
908 Study Design: DJK; Data Acquisition: DJK, AF, and WD; Data Analysis: DJK
909 and WD; Data Interpretation: DJK; Funding acquisition: DJK; Methodology: DJK;
910 Project administration: DJK; Software: DJK and ACP; Supervision: DJK; Writing -
911 original draft: DJK; Writing - review & editing: all authors.

912 COMPETING FINANCIAL INTERESTS

913 The authors declare no competing financial interests.

914 Bibliography

915 Becht, E., Giraldo, N.A., Lacroix, L., Buttard, B., Elaroui, N., Pettiprez, F., Selves, J., Laurent-
916 Puig, P., Sautes-Fridman, C., Fridman, W.H., de Reynies, A., 2016. Estimating the population
917 abundance of tissue-infiltrating immune and stromal cell populations using gene expression.
918 *Genome Biol.* 17, 218.
919 Boutillier, P., Maasha, M., Li, X., Medina-Abarca, H.F., Krivine, J., Feret, J., Cristescu, I., Forbes,
920 A.G., Fontana, W., 2018. The Kappa platform for rule-based modeling. *Bioinformatics* 34,
921 i583–i592.
922 Chylek, L.A., Harris, L.A., Tung, C.S., Faeder, J.R., Lopez, C.F., Hlavacek, W.S., 2014. Rule-
923 based modeling: a computational approach for studying biomolecular site dynamics in cell
924 signaling systems. *Wiley Interdiscip Rev Syst Biol Med* 6, 13–36.
925 Deng, W., Fernandez, A., McLaughlin, S.L., Klinke, D.J., 2019. WNT1-inducible signaling pathway
926 protein 1 (WSP1/CCN4) stimulates melanoma invasion and metastasis by promoting the
927 epithelial-mesenchymal transition. *J. Biol. Chem.* 294, 5261–5280.
928 Deng, W., Fernandez, A., McLaughlin, S.L., Klinke, D.J., 2020. Cell Communication Network
929 Factor 4 (CCN4/WISP1) Shifts Melanoma Cells from a Fragile Proliferative State to a Resilient
930 Metastatic State. *Cell Mol Bioeng* 13, 45–60.
931 Eisenberg, E., Levanon, E.Y., 2013. Human housekeeping genes, revisited. *Trends Genet.* 29,
932 569–574.

Fernandez, A., Deng, W., McLaughlin, S., Pirkey, A., Rellick, S., Klinke, D.J., 2020. Cell com- 933
munication network factor 4 (ccn4/wisp1) promotes tumor-induced immunosuppression in 934
melanoma. *bioRxiv*, (submitted). 935
Finkle, J.D., Wu, J.J., Bagheri, N., 2018. Windowed Granger causal inference strategy improves 936
discovery of gene regulatory networks. *Proc. Natl. Acad. Sci. U.S.A.* 115, 2252–2257. 937
Friedman, N., 2004. Inferring cellular networks using probabilistic graphical models. *Science* 303, 938
799–805. 939
Gadkar, K., Kirouac, D.C., Mager, D.E., van der Graaf, P.H., Ramanujan, S., 2016. A Six-Stage 940
Workflow for Robust Application of Systems Pharmacology. *CPT Pharmacometrics Syst 941
Pharmacol* 5, 235–249. 942
George, J.T., Jolly, M.K., Xu, S., Somarelli, J.A., Levine, H., 2017. Survival Outcomes in Cancer 943
Patients Predicted by a Partial EMT Gene Expression Scoring Metric. *Cancer Res.* 77, 6415– 944
6428. 945
Grun, D., Kester, L., van Oudenaarden, A., 2014. Validation of noise models for single-cell tran- 946
scriptomics. *Nat. Methods* 11, 637–640. 947
Hill, S.M., Heiser, L.M., Cokelaer, T., Unger, M., Nesser, N.K., Carlin, D.E., Zhang, Y., Sokolov, 948
A., Paull, E.O., Wong, C.K., Graim, K., Bivol, A., Wang, H., Zhu, F., Afsari, B., Danilova, L.V., 949
Favorov, A.V., Lee, W.S., Taylor, D., Hu, C.W., Long, B.L., Noren, D.P., Bisberg, A.J., Mills, 950
G.B., Gray, J.W., Kellen, M., Norman, T., Friend, S., Qutub, A.A., Fertig, E.J., Guan, Y., Song, 951
M., Stuart, J.M., Spellman, P.T., Koeppl, H., Stolovitzky, G., Saez-Rodriguez, J., Mukherjee, 952
S., Afsari, B., Al-Ouran, R., Anton, B., Arodz, T., Sichani, O.A., Bagheri, N., Berlow, N., 953
Bisberg, A.J., Bivol, A., Bohler, A., Bonet, J., Bonneau, R., Budak, G., Bunesco, R., Caglar, 954
M., Cai, B., Cai, C., Carlin, D.E., Carlon, A., Chen, L., Ciaccio, M.F., Cokelaer, T., Cooper, G., 955
Coort, S., Creighton, C.J., Daneshmand, S.M., de la Fuente, A., Di Camillo, B., Danilova, L.V., 956
Dutta-Moscato, J., Emmett, K., Evelo, C., Fassia, M.K., Favorov, A.V., Fertig, E.J., Finkle, J.D., 957
Finotello, F., Friend, S., Gao, X., Gao, J., Garcia-Garcia, J., Ghosh, S., Giaretta, A., Graim, 958
K., Gray, J.W., Grosseholz, R., Guan, Y., Guinney, J., Hafemeister, C., Hahn, O., Haider, S., 959
Hase, T., Heiser, L.M., Hill, S.M., Hodgson, J., Hoff, B., Hsu, C.H., Hu, C.W., Hu, Y., Huang, 960
X., Jalili, M., Jiang, X., Kacprowski, T., Kaderali, L., Kang, M., Kannan, V., Kellen, M., Kikuchi, 961
K., Kim, D.C., Kitano, H., Knapp, B., Komatsoulis, G., Koeppl, H., Kramer, A., Kurasa, M.B., 962
Kutmon, M., Lee, W.S., Li, Y., Liang, X., Liu, Z., Liu, Y., Long, B.L., Lu, S., Lu, X., Manfrini, 963
M., Matos, M.R., Meerzaman, D., Mills, G.B., Min, W., Mukherjee, S., Muller, C.L., Neapolitan, 964
R.E., Nesser, N.K., Noren, D.P., Norman, T., Oliva, B., Opiyo, S.O., Pal, R., Palinkas, A., Paull, 965
E.O., Planas-Iglesias, J., Poglajen, D., Qutub, A.A., Saez-Rodriguez, J., Sambo, F., Sanavia, 966
T., Sharifi-Zarchi, A., Slawek, J., Sokolov, A., Song, M., Spellman, P.T., Streck, A., Stolovitzky, 967
G., Strunz, S., Stuart, J.M., Taylor, D., Tegner, J., Thobe, K., Toffolo, G.M., Trifoglio, E., Unger, 968
M., Wan, Q., Wang, H., Welch, L., Wong, C.K., Wu, J.J., Xue, A.Y., Yamanaka, R., Yan, C., 969
Zairis, S., Zengerling, M., Zenil, H., Zhang, S., Zhang, Y., Zhu, F., Zi, Z., 2016. Inferring causal 970
molecular networks: empirical assessment through a community-based effort. *Nat. Methods* 13, 310–318. 971
972
Hoadley, K.A., Yau, C., Hinoue, T., Wolf, D.M., Lazar, A.J., Drill, E., Shen, R., Taylor, A.M., Cherni- 973
ack, A.D., Thorsson, V., Akbani, R., Bowlby, R., Wong, C.K., Wiznerowicz, M., Sanchez-Vega, 974
F., Robertson, A.G., Schneider, B.G., Lawrence, M.S., Nouthmeh, H., Malta, T.M., Cancer 975
Genome Atlas Network, Stuart, J.M., Benz, C.C., Laird, P.W., 2018. Cell-of-Origin Patterns 976
Dominate the Molecular Classification of 10,000 Tumors from 33 Types of Cancer. *Cell* 173, 977
291–304. 978
Huang, A.C., Postow, M.A., Orłowski, R.J., Mick, R., Bengsch, B., Manne, S., Xu, W., Harmon, 979
S., Giles, J.R., Wenz, B., Adamow, M., Kuk, D., Panageas, K.S., Carrera, C., Wong, P., 980
Quagliarello, F., Wubbenhorst, B., D'Andrea, K., Pauken, K.E., Herati, R.S., Staup, R.P., 981
Scheindel, J.M., McGettigan, S., Kothari, S., George, S.M., Vonderheide, R.H., Amaravadi, 982
R.K., Karakousis, G.C., Schuchter, L.M., Xu, X., Nathanson, K.L., Wolchok, J.D., Gangadhar, 983
T.C., Wherry, E.J., 2017. T-cell invigoration to tumour burden ratio associated with anti-PD-1 984
response. *Nature* 545, 60–65. 985
Hwang, M., Garbey, M., Berceli, S.A., Tran-Son-Tay, R., 2009. Rule-Based Simulation of Multi- 986
Cellular Biological Systems-A Review of Modeling Techniques. *Cell Mol Bioeng* 2, 285–294. 987
Jeong, H., Hwang, I., Kang, S.H., Shin, H.C., Kwon, S.Y., 2019. Tumor-Associated Macrophages 988
as Potential Prognostic Biomarkers of Invasive Breast Cancer. *J Breast Cancer* 22, 38–51. 989
Kaiser, J.L., Bland, C.L., Klinke, D.J., 2016. Identifying causal networks linking cancer pro- 990
cesses and anti-tumor immunity using Bayesian network inference and metagene constructs. 991
Biotechnol. Prog. 32, 470–479. 992
Klinke, D.J., 2014. Induction of Wnt-inducible signaling protein-1 correlates with invasive breast 993
cancer oncogenesis and reduced type 1 cell-mediated cytotoxic immunity: a retrospective 994
study. *PLoS Comput. Biol.* 10, e1003409. 995
Klinke, D.J., 2016. Eavesdropping on altered cell-to-cell signaling in cancer by secretome profiling. 996
Mol Cell Oncol 3, e1029061. 997
Klinke, D.J., Brundage, K.M., 2009. Scalable analysis of flow cytometry data using 998
R/Bioconductor. *Cytometry A* 75, 699–706. 999
Klinke, D.J., Torang, A., 2020. An unsupervised feature extraction and selection strategy for 1000
identifying epithelial-mesenchymal transition state metrics in breast cancer and melanoma. 1001
iScience, (in press). 1002
Klinke, D.J., Wang, Q., 2016. Inferring the Impact of Regulatory Mechanisms that Underpin CD8+ 1003
T Cell Control of B16 Tumor Growth In vivo Using Mechanistic Models and Simulation. *Front 1004
Pharmacol* 7, 515. 1005
Koplev, S., Lin, K., Dohلمان, A.B., Ma'ayan, A., 2018. Integration of pan-cancer transcriptomics 1006
with RPPA proteomics reveals mechanisms of epithelial-mesenchymal transition. *PLoS Com- 1007
put. Biol.* 14, e1005911. 1008
Li, H., van der Leun, A.M., Yofe, I., Lubling, Y., Gelbard-Solodkin, D., van Akkooi, A.C.J., van den 1009
Braber, M., Rozeman, E.A., Haanen, J.B.A.G., Blank, C.U., Horlings, H.M., David, E., Baran, 1010
Y., Bercovich, A., Lifshitz, A., Schumacher, T.N., Tanay, A., Amit, I., 2019. Dysfunctional CD8 1011
T Cells Form a Proliferative, Dynamically Regulated Compartment within Human Melanoma. 1012
Cell 176, 775–789. 1013
Li, P., Gong, P., Li, H., Perkins, E.J., Wang, N., Zhang, C., 2014. Gene regulatory network inference 1014
and validation using relative change ratio analysis and time-delayed dynamic Bayesian 1015
network. *EURASIP J Bioinform Syst Biol* 2014, 12. 1016
López, A.G., Seoane, J.M., Sanjuán, M.A.F., 2017. Dynamics of the cell-mediated immune re- 1017
sponse to tumour growth. *Philos Trans A Math Phys Eng Sci* 375. 1018

- 1019 Mallet, D.G., De Pillis, L.G., 2006. A cellular automata model of tumor-immune system interac- 1105
1020 tions. *J. Theor. Biol.* 239, 334–350. 1106
- 1021 Malta, T.M., Sokolov, A., Gentles, A.J., Burzykowski, T., Poisson, L., Weinstein, J.N., Kamińska, 1107
1022 B., Huelsken, J., Omberg, L., Gevaert, O., Colaprico, A., Czerwińska, P., Mazurek, S., 1108
1023 Mishra, L., Heyn, H., Krasnitz, A., Godwin, A.K., Lazar, A.J., *Cancer Genome Atlas Re-* 1109
1024 *search Network*, Stuart, J. M. Hoadley, K.A., Laird, P.W., Noushmehr, H., Wiznerowicz, M., 1110
1025 2018. Machine Learning Identifies Stemness Features Associated with Oncogenic Dediffer- 1111
1026 entiation. *Cell* 173, 338–354.
- 1027 Meeth, K., Wang, J.X., Micevic, G., Damsky, W., Bosenberg, M.W., 2016. The YUMM lines: a 1112
1028 series of congenic mouse melanoma cell lines with defined genetic alterations. *Pigment Cell* 1113
1029 *Melanoma Res* 29, 590–597.
- 1030 Milberg, O., Gong, C., Jafarnejad, M., Bartelink, I.H., Wang, B., Vicini, P., Narwal, R., Roskos, 1114
1031 L., Popel, A.S., 2019. A QSP Model for Predicting Clinical Responses to Monotherapy, Com- 1115
1032 bination and Sequential Therapy Following CTLA-4, PD-1, and PD-L1 Checkpoint Blockade. 1116
1033 *Sci Rep* 9, 11286.
- 1034 Moore, H., Allen, R., 2019. What Can Mathematics Do for Drug Development? *Bull. Math. Biol.* 1117
1035 81, 3421–3424.
- 1036 Newman, A.M., Steen, C.B., Liu, C.L., Gentles, A.J., Chaudhuri, A.A., Scherer, F., Khodadoust, 1118
1037 M.S., Esfahani, M.S., Luca, B.A., Steiner, D., Diehn, M., Alizadeh, A.A., 2019. Determining 1119
1038 cell type abundance and expression from bulk tissues with digital cytometry. *Nat. Biotechnol.* 1120
1039 37, 773–782.
- 1040 Palsson, S., Hickling, T.P., Bradshaw-Pierce, E.L., Zager, M., Jooss, K., O'Brien, P.J., Spilker, 1121
1041 M.E., Palsson, B.O., Vicini, P., 2013. The development of a fully-integrated immune response 1122
1042 model (FIRM) simulator of the immune response through integration of multiple subset mod- 1123
1043 els. *BMC Syst Biol* 7, 95.
- 1044 Papalexi, E., Satiya, R., 2018. Single-cell RNA sequencing to explore immune cell heterogeneity. 1124
1045 *Nat. Rev. Immunol.* 18, 35–45.
- 1046 Pearl, J., 2005. Direct and indirect effects, in: *Proc Am Stat Assoc Joint Stat Meetings (Minneap-* 1125
1047 *olis, MN)*, MIRA Digital Publishing, pp. 1572–1581.
- 1048 Perrin, B.E., Ralaivola, L., Mazurie, A., Bottani, S., Mallet, J., dIchBuc, F., 2003. Gene networks 1126
1049 inference using dynamic bayesian networks. *Bioinformatics* 19, ii138–ii148.
- 1050 Pharris, M.C., Patel, N.M., VanDyk, T.G., Bartol, T.M., Sejnowski, T.J., Kennedy, M.B., Stefan, 1127
1051 M.I., Kinzer-Ursem, T.L., 2019. A multi-state model of the CaMKII dodecamer suggests a role 1128
1052 for calmodulin in maintenance of autophosphorylation. *PLoS Comput. Biol.* 15, e1006941.
- 1053 Ramanujan, S., Chan, J.R., Friedrich, C.M., Thalhauser, C.J., 2019. A Flexible Approach for 1129
1054 Context-Dependent Assessment of Quantitative Systems Pharmacology Models. *CPT Phar-* 1130
1055 *macometrics Syst Pharmacol* 8, 340–343.
- 1056 Roederer, M., 2011. Interpretation of cellular proliferation data: avoid the panglossian. *Cytometry* 1131
1057 *A* 79, 95–101.
- 1058 Rohrs, J.A., Zheng, D., Graham, N.A., Wang, P., Finley, S.D., 2018. Computational Model of 1132
1059 Chimeric Antigen Receptors Explains Site-Specific Phosphorylation Kinetics. *Biophys. J.* 115, 1133
1060 1116–1129.
- 1061 Rose, S., Misharin, A., Perlman, H., 2012. A novel Ly6C/Ly6G-based strategy to analyze the 1134
1062 mouse splenic myeloid compartment. *Cytometry A* 81, 343–350.
- 1063 Sachs, K., Gifford, D., Jaakkola, T., Sorger, P., Lauffenburger, D.A., 2002. Bayesian network 1135
1064 approach to cell signaling pathway modeling. *Science Signaling* 2002, pe38.
- 1065 Sachs, K., Itani, S., Carlisle, J., Nolan, G.P., Pe'er, D., Lauffenburger, D.A., 2009. Learning 1136
1066 signaling network structures with sparsely distributed data. *J Comp Biol* 16, 201–212.
- 1067 Sachs, K., Perez, O., Pe'er, D., Lauffenburger, D.A., Nolan, G.P., 2005. Causal protein-signaling 1137
1068 networks derived from multiparameter single-cell data. *Science* 308, 523–529.
- 1069 Salazar-Cavazos, E., Nitta, C.F., Mitra, E.D., Wilson, B.S., Lidke, K.A., Hlavacek, W.S., Lidke, 1138
1070 D.S., 2020. Multisite EGFR phosphorylation is regulated by adaptor protein abundances and 1139
1071 dimer lifetimes. *Mol. Biol. Cell* 31, 695–708.
- 1072 Schelker, M., Feau, S., Du, J., Ranu, N., Klipp, E., MacBeath, G., Schoeberl, B., Raue, A., 1140
1073 2017. Estimation of immune cell content in tumour tissue using single-cell RNA-seq data. *Nat* 1141
1074 *Commun* 8, 2032.
- 1075 Scutari, M., 2010. Learning Bayesian Networks with the bnlearn R Package. *J Stat Software* 35, 1142
1076 1–22.
- 1077 Sekar, J.A., Faeder, J.R., 2012. Rule-based modeling of signal transduction: a primer. *Methods* 1143
1078 *Mol. Biol.* 880, 139–218.
- 1079 Shen-Orr, S., Tibshirani, R., Butte, A., 2012. Gene expression deconvolution in linear space. 1144
1080 *Nature Methods* 9, 9.
- 1081 Shen-Orr, S.S., Tibshirani, R., Khatri, P., Bodian, D.L., Staedtler, F., Perry, N.M., Hastie, T., Sar- 1145
1082 wal, M.M., Davis, M.M., Butte, A.J., 2010. Cell type-specific gene expression differences in 1146
1083 complex tissues. *Nat. Methods* 7, 287–289.
- 1084 Singer, M., Anderson, A.C., 2019. Revolutionizing Cancer Immunology: The Power of Next- 1147
1085 Generation Sequencing Technologies. *Cancer Immunol Res* 7, 168–173.
- 1086 Stuart, T., Satija, R., 2019. Integrative single-cell analysis. *Nat. Rev. Genet.* 20, 257–272.
- 1087 Tan, T.Z., Miow, Q.H., Miki, Y., Noda, T., Mori, S., Huang, R.Y., Thiery, J.P., 2014. Epithelial- 1148
1088 mesenchymal transition spectrum quantification and its efficacy in deciphering survival and 1149
1089 drug responses of cancer patients. *EMBO Mol Med* 6, 1279–1293.
- 1090 Thorsson, V., Gibbs, D.L., Brown, S.D., Wolf, D., Bortone, D.S., Ou Yang, T.H., Porta-Pardo, E., 1150
1091 Gao, G.F., Plaisier, C.L., Eddy, J.A., Ziv, E., Culhane, A.C., Pauli, E.O., Sivakumar, I.K.A., 1151
1092 Gentles, A.J., Malhotra, R., Farshidfar, F., Colaprico, A., Parker, J.S., Mose, L.E., Vo, N.S., 1152
1093 Liu, J., Liu, Y., Rader, J., Dhankani, V., Reynolds, S.M., Bowlby, R., Califano, A., Cherniack, 1153
1094 A.D., Anastassiou, D., Bedognetti, D., Rao, A., Chen, K., Krasnitz, A., Hu, H., Malta, T.M., 1154
1095 Noushmehr, H., Pedamallu, C.S., Bullman, S., Ojesina, A.I., Lamb, A., Zhou, W., Shen, H., 1155
1096 Choueiri, T.K., Weinstein, J.N., Guinney, J., Saltz, J., et al., 2018. The Immune Landscape of 1156
1097 Cancer. *Immunity* 48, 812–830.
- 1098 Tirosh, I., Izar, B., Prakadan, S.M., Wadsworth, M.H., Treacy, D., Trombetta, J.J., Rotem, A., 1157
1099 Rodman, C., Lian, C., Murphy, G., Fallahi-Sichani, M., Dutton-Regester, K., Lin, J.R., Co- 1158
1100 hen, O., Shah, P., Lu, D., Genshaft, A.S., Hughes, T.K., Ziegler, C.G., Kazer, S.W., Gaillard, 1159
1101 A., Kolb, K.E., Villani, A.C., Johannessen, C.M., Andreev, A.Y., Van Allen, E.M., Bertagnolli, 1160
1102 M., Sorger, P.K., Sullivan, R.J., Flaherty, K.T., Frederick, D.T., Jane-Valbuena, J., Yoon, C.H., 1161
1103 Rozenblatt-Rosen, O., Shalek, A.K., Regev, A., Garraway, L.A., 2016. Dissecting the multi- 1162
1104 cellular ecosystem of metastatic melanoma by single-cell RNA-seq. *Science* 352, 189–196.

Figure Legends

Figure 1 - A computational workflow combines digital cytometry with Bayesian network inference to estimate how a genetic driver impacts the heterocellular network within a tissue. Digital cytometry deconvolutes a bulk transcriptomic profile using gene signatures that correspond to different stromal, malignant, and immune cell types. The results estimate the prevalence of the different cell types within the tissue sample, that is digital cytometry features. By using bulk transcriptomic profiles of defined patient populations, underlying variation in the inferred cellular composition coupled with changes in expression of a putative gene driver can be used to estimate how the heterocellular network is impacted by a gene driver using Bayesian Network inference. To illustrate the approach, we focused on CCN4 as a gene driver. The resulting directed acyclic graphs represent the collective conditional independence among modeled nodes of the network.

Figure 2 - Summary of the evidence obtained from the TCGA breast cancer dataset supporting the consensus edges in the seed network. Edges ordered based on the number of algorithms that detected that an edge was enriched (bar graph - left axis) and the strength of enrichment (dotted lines - right axis). The lines associated with the strength of enrichment represent the minimum (dashed line) and maximum (dotted line) values obtained by the different algorithms. Coloring of bar graph indicates whether a clear direction was associated with an edge (green), an edge was significantly enriched but without a clear direction (yellow), or that an edge was excluded from the consensus seed network list (tan).

Figure 3 - A directed acyclic graph (DAG) representing the conditional probability distribution inferred using the digital cytometry features extracted from the breast cancer arm of the TCGA. The nodes of the graph represent features, such as CCN4 gene expression (rectangle), sample attribute (hexagon), or the prevalence of a particular cell type/state (oval). The edges represent inferred causal relationships among the nodes. The black lines with arrow heads represent a positive causal relation while red lines with horizontal bars represent a negative or inhibitory causal relation, where the extent of influence of the parental node is annotated by the number beside the edge. The number included within the node symbol represents the average normalized value of the digital cytometry feature within the dataset with values of all of the parental nodes set to zero. The width of the edge is proportional to the posterior probability of inclusion into the DAG.

Figure 4 - Conditional probability query of the BRCA DAG compared against digital cytometry estimates obtained from experimental data. Experimental samples obtained from normal mammary and tumor tissue are shown as filled versus open circles, respectively. Samples of the conditional probability model for $p(\text{Cancer} < 0.15)$ (orange) and $p(\text{Cancer} > 0.85)$ (blue) for CD8 T cells (A), CD4 T cells (B), active NK cells (C), B cells (D), Macrophages (E) and Cancer Associated Fibroblasts (F). Linear trendlines are superimposed on the conditional probability samples.

Figure 5 - Two DAGs representing the conditional probability distributions inferred using the digital cytometry features extracted from the two melanoma-related datasets. (A) Analysis of a bulk RNAseq dataset obtained from patients with common pigmented nevi and primary melanoma ($n_{\text{samples}} = 78$). (B) Analysis of primary melanoma samples extracted from the SKCM arm of the TCGA ($n_{\text{samples}} = 94$). The DAGs are summarized using similar notation as described in Figure 3. Dotted lines indicate edges that were included in the consensus seed network but, as the samples were all from patients with cancer, had no evidence in the TCGA dataset.

Figure 6 - CCN4 knock-out in two syngeneic mouse models of melanoma induces a similar shift in NK cells and T and B lymphocytes as observed in human breast cancer and melanoma. (A) The percentage of live CD45+ cells isolated from tumors generated by inoculating s.c. with wt (red) and CCN4 KO (blue) variants of B16F0 (o and x's) and YUMM1.7 (\square and +') cells, where the log-linear trends are highlighted by dotted lines. CD45+ values were obtained from three different antibody panels that quantified T cells, B/NK cells, and myeloid cells in TIL isolates from each mouse ($n = 3$ for YUMM1.7 and $n = 4$ for B16F0 variants). (B) A comparison of the ratio of NK cells (black), CD8+ T cells (red), CD4+ T cells (blue), and B cells (green) to live CD45+ TILs in s.c. tumors generated using wt B16F0 and YUMM1.7 cells. (C) Comparing the log ratio in prevalence of the different cell types when CCN4 is present (WT) versus absent (CCN4 KO) predicted by the BRCA (1st column) and SKCM (4th column) DAGs and observed experimentally using the B16F0 (2nd column) and YUMM1.7 (3rd column) mouse models. Median results for NK cells (black), CD8+ T cells (red), CD4+ T cells (blue), and B cells (green) in the different settings are connected by lines. (D) TIL comparison upon CCN4 KO in B16F0 and YUMM1.7 mouse models stratified by NK cells, CD8+ T cells, CD4+ T cells, and B cells (top to bottom). p-values calculated between wt and CCN4 KO pairs using Student's t-test.

Figure 7 - Myeloid immune cell subsets differentially infiltrate tumors derived from wt B16F0 and YUMM1.7 cells but shift in similar ways upon CCN4 knock-out. (A) A comparison of the ratio of CD11c- (black) and CD11c+ (gray) macrophages, CD11c+ Mo-MDSC (green), Mo-MDSC (blue), and PMN-MDSC (red) to live CD45+ TILs in s.c. tumors generated using wt B16F0 and YUMM1.7 cells. (B) Comparing the log ratio in prevalence of the different myeloid cell types when CCN4 is present (WT) versus absent (CCN4 KO) predicted by the BRCA (1st column) and SKCM (4th column) DAGs and observed experimentally using the B16F0 (2nd column) and YUMM1.7 (3rd column) mouse models. Macrophages are the only myeloid cell subset inferred from the BRCA and SKCM datasets and are assumed to be related to CD11c- macrophages in mouse models. Median results in the different settings are connected by lines. (C and D) A representative scatter plot of GR1 versus CD11c expression in gated live CD45+ CD11b+ TILs obtained from wt (C) and CCN4 KO (D) YUMM1.7 tumors. The right panel shows MHCII versus F4/80 expression in the $\text{GR1}^+ \text{CD11c}^-$ subset. (E) TIL comparison upon CCN4 KO in B16F0 and YUMM1.7 mouse models stratified by myeloid cell subsets (top to bottom). p-values calculated between wt and CCN4 KO pairs using Student's t-test.

1193 **Figure 8 - CCN4 has no direct effect on T cell proliferation but impairs CD8⁺ T cell function.** The distribution in cell trace staining
1194 among live CD4⁺ (A) and CD8⁺ (B) T cells stimulated with α CD3/ α CD28 (AP beads) alone or in the presence of media conditioned by
1195 wt B16F0 cells (AP beads + WT TCM), media conditioned by CCN4 KO B16F0 cells (AP beads + CCN4 KO TCM), or with 10 ng/ml of
1196 recombinant mouse CCN4 (AP beads + rCCN4). The distribution in the corresponding unstimulated cells (gray) are shown at the bottom.
1197 The colored vertical lines indicate the predicted dilution of cell trace staining in each generation based on the unstimulated controls. (C)
1198 CD8⁺ T cells isolated from the spleens of C57BL/6 mice that rejected YUMM1.7 tumors were cultured in an in vitro ELISPOT assay using
1199 variants of the YUMM1.7 cell line as targets (wt YUMM1.7 - yellow, CCN4 KO YUMM1.7 - light green, CCN4 KO YUMM1.7 with a blank
1200 inducible expression vector - dark green and blue, CCN4 KO YUMM1.7 with a CCN4 inducible expression vector - purple and red). Variants
1201 containing the inducible expression vector were also cultured in the absence (dark green and purple) or presence of doxycycline (blue and
1202 red). CD8⁺ T cells expressing IFN γ and TNF α were quantified following 24 hour co-culture (bar graph). Statistical significant between
1203 pairs was assessed using a Student's t-test, where * = p-value < 0.05 and *** = p-value < 0.001.

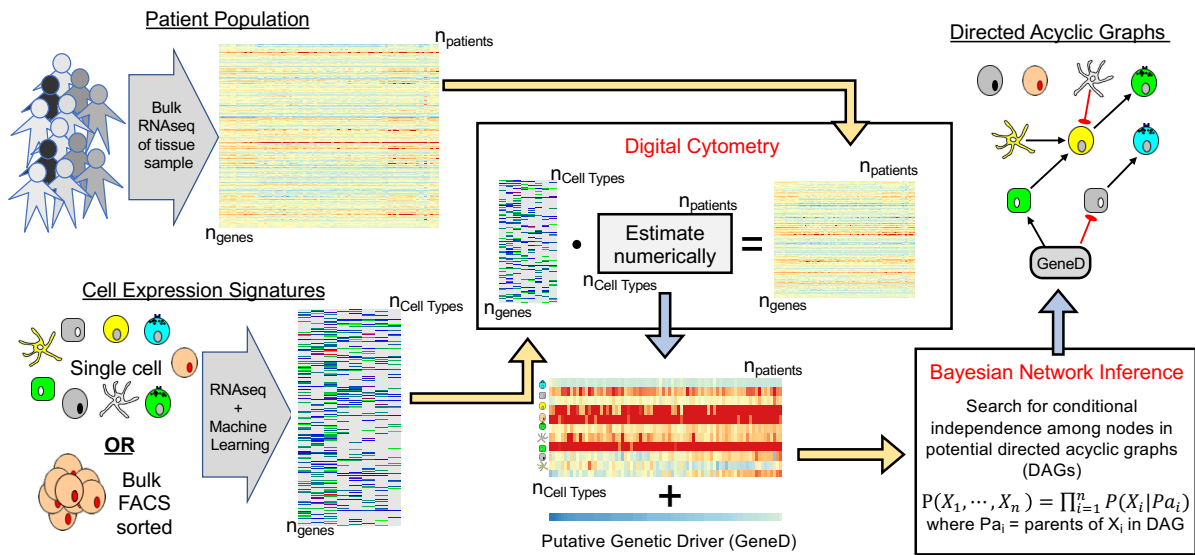


Fig. 1. A computational workflow combines digital cytometry with Bayesian network inference to estimate how a genetic driver impacts the heterocellular network within a tissue.

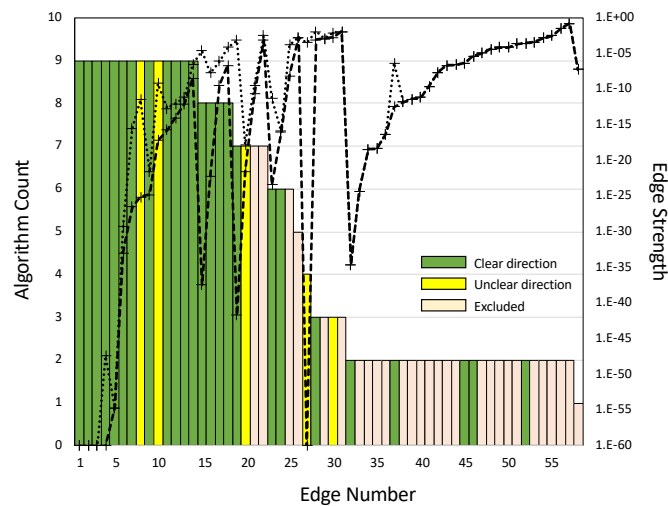


Fig. 2. Summary of the evidence obtained from the TCGA breast cancer dataset supporting the consensus edges in the seed network.

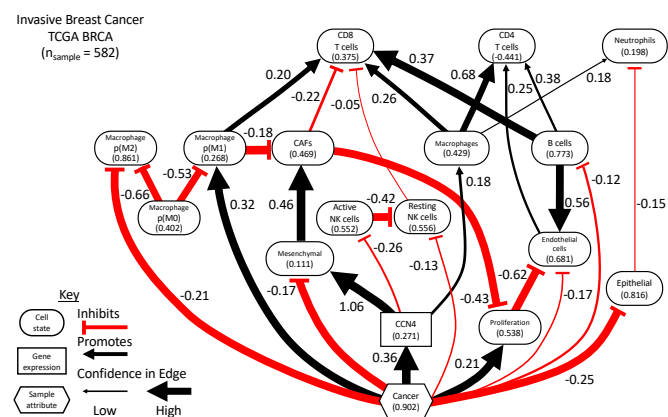


Fig. 3. A directed acyclic graph (DAG) representing the conditional probability distribution inferred using the digital cytometry features extracted from the breast cancer arm of the TCGA.

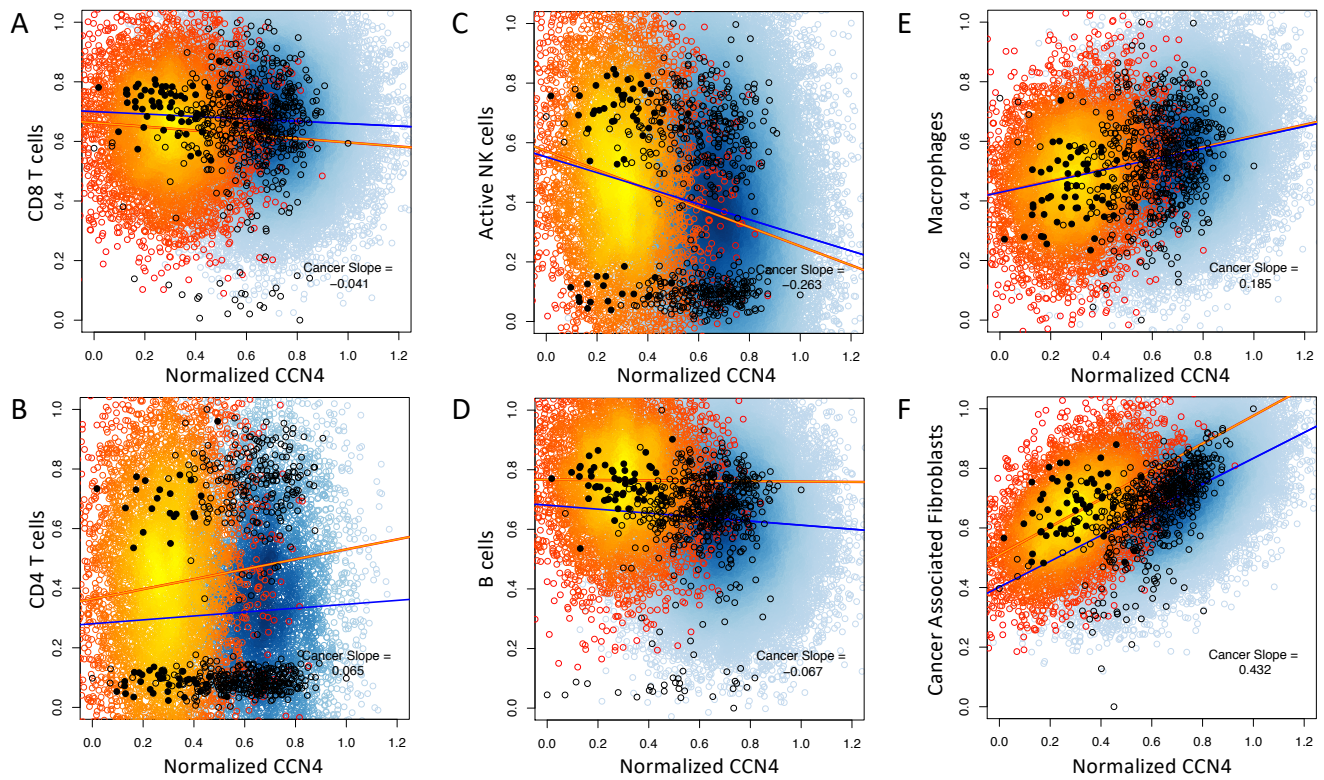


Fig. 4. Conditional probability query of the BRCA DAG compared against digital cytometry estimates obtained from experimental data.

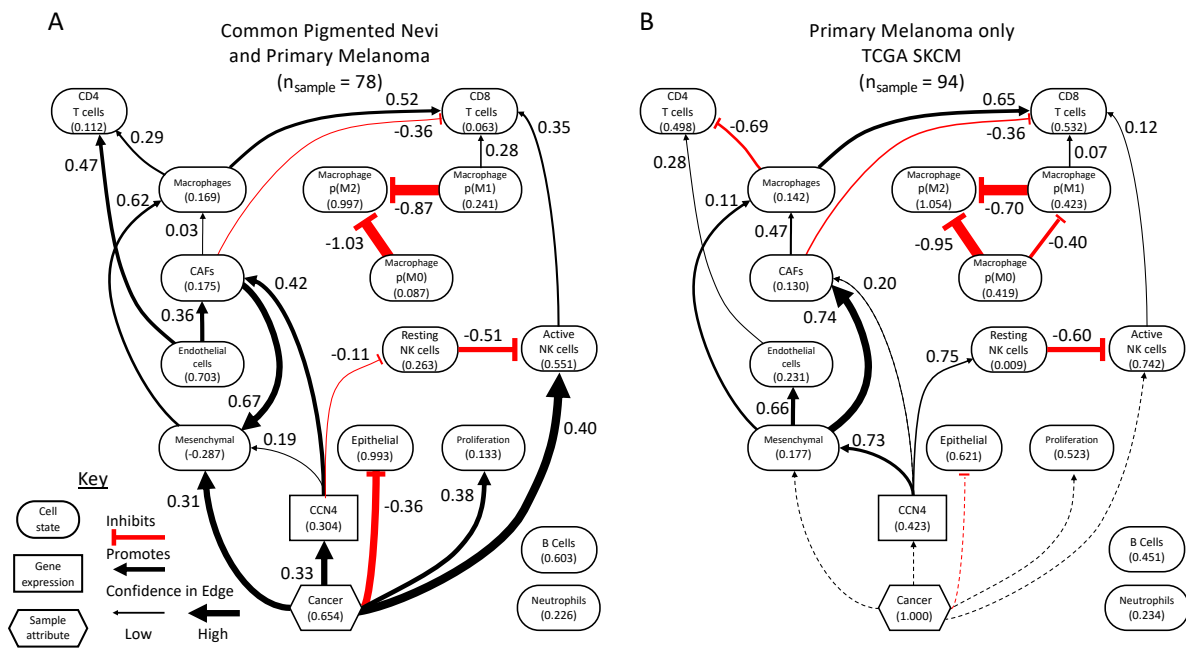


Fig. 5. A DAG representing the conditional probability distribution inferred using the digital cytometry features extracted from the two melanoma-related datasets.

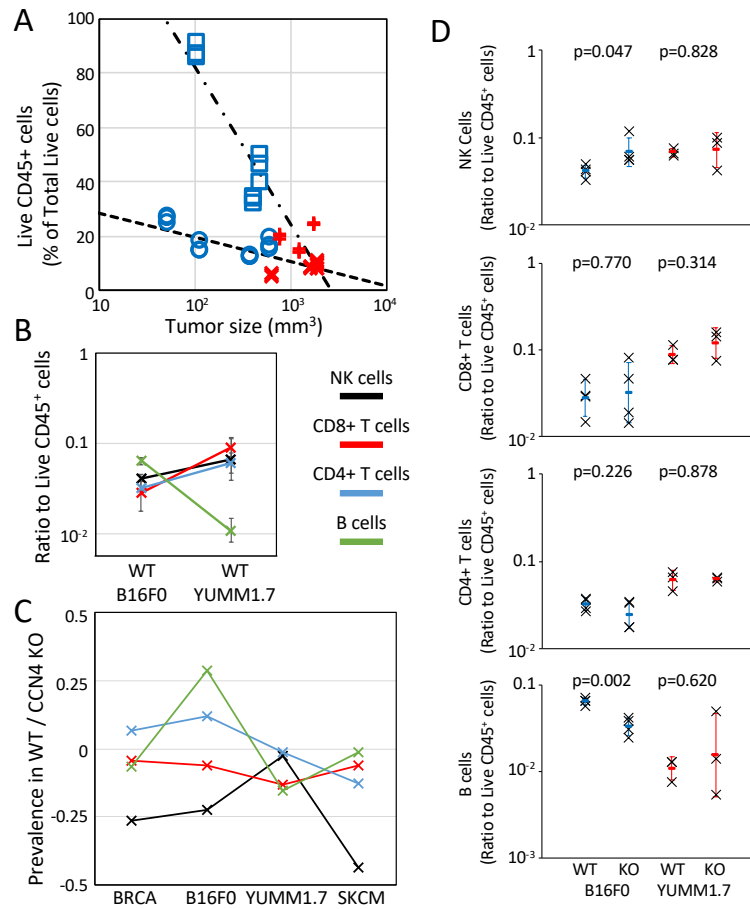


Fig. 6. CCN4 knock-out in two syngeneic mouse models of melanoma induces a similar shift in NK cells and T and B lymphocytes as observed in human breast cancer and melanoma.

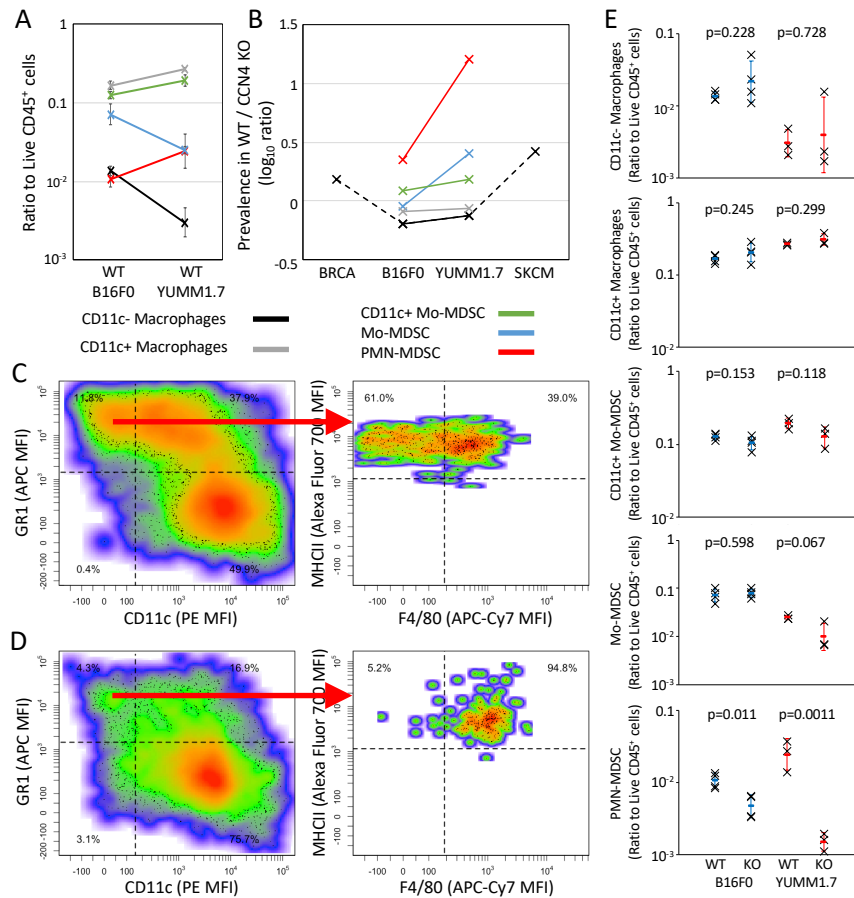


Fig. 7. Myeloid immune cell subsets differentially infiltrate tumors derived from wt B16F0 and YUMM1.7 cells but shift in similar ways upon CCN4 knock-out.

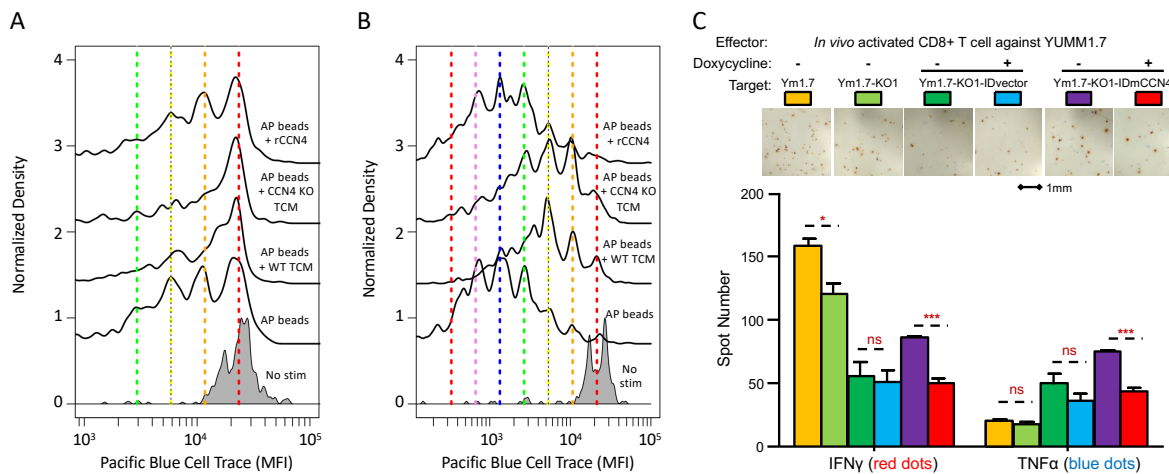


Fig. 8. CCN4 has no direct effect on T cell proliferation but impairs CD8⁺ T cell function.

Table S1. List of edges, whether an edge was predicted to promote or inhibit the target node, and the strength inferred using the different structure learning algorithms in analyzing the features present in TCGA breast cancer dataset. Rows highlighted in green were included in the consensus seed network, yellow indicate that the directionality was unclear, and red indicate edges included in the “blacklist”. The edge numbers correspond to the x-axis in Figure 2.

| Edge No | from | to | mmpc CorSign | aracn CorSign | hitan CorSign | lamb strength | lamb CorSign | lamb.fdr strength | lamb.fdr CorSign | tabu strength | tabu CorSign | mmhc strength | mmhc CorSign | hc strength | hc CorSign | pc_stable strength | pc_stable CorSign | Hit Number | Min strength | Max strength |
|---------|----------------------|----------------------|-----------------|------------------|------------------|------------------|-----------------|----------------------|---------------------|------------------|-----------------|------------------|-----------------|----------------|---------------|-----------------------|----------------------|---------------|-----------------|-----------------|
| 1 | CCN4 | Mesenchymal | + | + | + | 2.02E-138 | + | 2.02E-138 | + | 1.95E-148 | + | 1.79E-139 | + | 1.95E-148 | + | 1.79E-139 | + | 9 | 1.95E-148 | 2.02E-138 |
| 2 | Mesenchymal | CCN4 | - | - | - | | | | | 3.77E-48 | - | | | 3.77E-48 | - | | | 9 | 0.00E+00 | 3.77E-48 |
| 3 | pM0 | pM1 | - | - | - | 0.00E+00 | - | 0.00E+00 | - | | | 0.00E+00 | - | | | 0.00E+00 | - | 9 | 0.00E+00 | 0.00E+00 |
| 4 | pM0 | pM2 | - | - | - | | | | | 0.00E+00 | - | | | 0.00E+00 | - | | | 9 | 0.00E+00 | 0.00E+00 |
| 5 | pM2 | pM0 | + | + | + | 0.00E+00 | - | 0.00E+00 | - | | | 0.00E+00 | - | | | 0.00E+00 | - | 9 | 0.00E+00 | 0.00E+00 |
| 6 | CAF_lg | Mesenchymal | + | + | + | | | | | | | | | | | | | 9 | 2.94E-97 | 9.62E-73 |
| 7 | Mesenchymal | CAF_lg | + | + | + | 9.62E-73 | + | 9.62E-73 | + | 2.94E-97 | + | 2.35E-86 | + | 2.94E-97 | + | 8.08E-86 | + | 9 | 2.94E-97 | 9.62E-73 |
| 8 | Cancer | CCN4 | + | + | + | 2.06E-55 | + | 2.06E-55 | + | 2.06E-55 | + | 2.06E-55 | + | 2.06E-55 | + | 2.06E-55 | + | 9 | 2.06E-55 | 2.06E-55 |
| 9 | CCN4 | Cancer | + | + | + | | | | | | | | | | | | | 9 | | |
| 10 | NK.cells.active_lg | NK.cells.rest_lg | - | - | - | 4.80E-30 | - | 4.80E-30 | - | 1.15E-33 | - | 4.80E-30 | - | 1.15E-33 | - | 4.80E-30 | - | 9 | 1.15E-33 | 4.80E-30 |
| 11 | NK.cells.rest_lg | NK.cells.active_lg | - | - | - | | | | | | | | | | | | | 9 | | |
| 12 | B.cells.ive_lg | T.cells.CD8_lg | + | + | + | 9.25E-27 | + | 2.92E-27 | + | 3.10E-16 | + | 2.92E-27 | + | 3.10E-16 | + | 2.92E-27 | + | 9 | 2.92E-27 | 3.10E-16 |
| 13 | T.cells.CD8_lg | B.cells.ive_lg | - | - | - | | | | | | | | | | | | | 9 | | |
| 14 | Cancer | Epithelial | - | - | - | 1.66E-25 | - | 1.66E-25 | - | 1.66E-25 | - | 1.66E-25 | - | 1.66E-25 | - | 2.23E-22 | - | 9 | 1.66E-25 | 2.23E-22 |
| 15 | Epithelial | Cancer | - | - | - | | | | | | | | | | | | | 9 | | |
| 16 | CAF_lg | proliferation | - | - | - | | | | | | | 7.61E-26 | - | | | | | 9 | 7.61E-26 | 3.37E-12 |
| 17 | proliferation | CAF_lg | - | - | - | 6.37E-21 | - | 6.37E-21 | - | 3.37E-12 | - | | | 3.37E-12 | - | 1.80E-18 | - | 9 | 3.37E-12 | 1.80E-18 |
| 18 | Endothelial.cells_lg | proliferation | - | - | - | | | | | | | | | 5.75E-10 | - | | | 9 | 6.23E-18 | 5.75E-10 |
| 19 | proliferation | Endothelial.cells_lg | - | - | - | 2.88E-15 | - | 2.88E-15 | - | | | 2.88E-15 | - | | | 6.23E-18 | - | 9 | 6.23E-18 | 5.75E-10 |
| 20 | CD4Tcell_sc_lg | Macrophages_sc_lg | + | + | + | | | | | | | | | | | | | 9 | 1.91E-16 | 2.01E-13 |
| 21 | Macrophages_sc_lg | CD4Tcell_sc_lg | + | + | + | 1.91E-16 | + | 5.09E-16 | + | 3.07E-14 | + | 5.09E-16 | + | 3.07E-14 | + | 2.01E-13 | + | 9 | 1.91E-16 | 2.01E-13 |
| 22 | pM1 | T.cells.CD8_lg | + | + | + | 8.18E-13 | + | 3.53E-14 | + | 8.98E-15 | + | 3.53E-14 | + | 8.98E-15 | + | 3.53E-14 | + | 9 | 8.98E-15 | 8.18E-13 |
| 23 | T.cells.CD8_lg | pM1 | + | + | + | | | | | | | | | | | | | 9 | | |
| 24 | Macrophages_sc_lg | T.cells.CD8_lg | + | + | + | 9.15E-13 | + | 2.38E-12 | + | 6.56E-12 | + | 2.38E-12 | + | 6.56E-12 | + | 2.38E-12 | + | 9 | 9.15E-13 | 6.56E-12 |
| 25 | T.cells.CD8_lg | Macrophages_sc_lg | - | - | - | | | | | | | | | | | | | 9 | | |
| 26 | CAF_lg | T.cells.CD8_lg | - | - | - | 2.84E-07 | - | 3.06E-07 | - | 3.42E-09 | - | 3.06E-07 | - | 3.42E-09 | - | 3.06E-07 | - | 9 | 3.42E-09 | 3.06E-07 |
| 27 | T.cells.CD8_lg | CAF_lg | - | - | - | | | | | | | | | | | | | 9 | | |
| 28 | Cancer | proliferation | + | + | + | 6.68E-23 | + | 6.68E-23 | + | 4.70E-12 | + | 3.72E-10 | + | 4.70E-12 | + | 1.93E-08 | + | 8 | 6.68E-23 | 1.93E-08 |
| 29 | proliferation | Cancer | - | - | - | | | | | | | | | | | | | 8 | | |
| 30 | Cancer | Endothelial.cells_lg | - | - | - | 7.40E-09 | - | 7.40E-09 | - | 3.67E-38 | - | 7.40E-09 | - | 3.67E-38 | - | 2.10E-05 | - | 8 | 3.67E-38 | 2.10E-05 |
| 31 | Endothelial.cells_lg | Cancer | - | - | - | | | | | | | | | | | | | 8 | | |
| 32 | CD4Tcell_sc_lg | Endothelial.cells_lg | + | + | + | | | | | | | | | | | | | 8 | 3.64E-10 | 7.84E-07 |
| 33 | Endothelial.cells_lg | CD4Tcell_sc_lg | + | + | + | 5.65E-08 | + | 2.93E-07 | + | 3.64E-10 | + | 2.93E-07 | + | 3.64E-10 | + | 7.84E-07 | + | 8 | 3.64E-10 | 7.84E-07 |
| 34 | B.cells.ive_lg | CD4Tcell_sc_lg | + | + | + | 2.95E-06 | + | 1.95E-06 | + | 2.17E-07 | + | 1.95E-06 | + | 2.17E-07 | + | 7.31E-05 | + | 8 | 2.17E-07 | 7.31E-05 |
| 35 | CD4Tcell_sc_lg | B.cells.ive_lg | - | - | - | | | | | | | | | | | | | 8 | | |
| 36 | Cancer | pM2 | - | - | - | | | | | 7.00E-04 | - | 1.91E-42 | - | 7.00E-04 | - | 1.91E-42 | - | 7 | 1.91E-42 | 7.00E-04 |
| 37 | pM2 | Cancer | - | - | - | | | | | | | | | | | | | 7 | | |
| 38 | B.cells.ive_lg | Endothelial.cells_lg | + | + | + | | | | | | | | | | | 4.01E-20 | + | 7 | 2.71E-22 | 1.52E-18 |
| 39 | Endothelial.cells_lg | B.cells.ive_lg | + | + | + | 2.71E-22 | + | 2.71E-22 | + | 1.02E-10 | + | 1.52E-18 | + | 1.02E-10 | + | 3.30E-10 | + | 7 | 1.02E-10 | 3.30E-10 |
| 40 | pM2 | proliferation | - | - | - | | | | | 1.02E-10 | - | 2.09E-11 | - | 1.02E-10 | - | 3.30E-10 | - | 7 | 2.09E-11 | 3.30E-10 |
| 41 | proliferation | pM2 | - | - | - | | | | | | | | | | | | | 7 | | |
| 42 | Epithelial | Neutrophils_lg | - | - | - | 2.82E-03 | - | | | 1.62E-03 | - | 6.79E-04 | - | 1.62E-03 | - | 6.79E-04 | - | 7 | 6.79E-04 | 2.82E-03 |
| 43 | Neutrophils_lg | Epithelial | - | - | - | | | | | | | | | | | | | 7 | | |
| 44 | CAF_lg | pM1 | - | - | - | | | | | | | | | | | | | 6 | 3.74E-24 | 4.37E-12 |
| 45 | pM1 | CAF_lg | - | - | - | | | | | 4.37E-12 | - | 3.74E-24 | - | 4.37E-12 | - | 1.06E-21 | - | 6 | 3.74E-12 | 4.37E-12 |
| 46 | Cancer | Mesenchymal | + | + | + | | | | | 8.89E-17 | + | 1.16E-16 | + | 8.89E-17 | + | 1.16E-16 | + | 6 | 8.89E-17 | 1.16E-16 |
| 47 | Mesenchymal | Cancer | + | + | + | | | | | | | | | | | | | 6 | | |
| 48 | Neutrophils_lg | pM2 | + | + | + | | | | | | | | | | | | | 6 | 7.51E-09 | 1.57E-04 |
| 49 | pM2 | Neutrophils_lg | + | + | + | | | | | 7.51E-09 | + | 1.57E-04 | + | 7.51E-09 | + | 1.57E-04 | + | 6 | 7.51E-09 | 1.57E-04 |
| 50 | Macrophages_sc_lg | Neutrophils_lg | + | + | + | 1.59E-03 | + | | | | | 1.86E-03 | + | | | 1.86E-03 | + | 5 | 1.59E-03 | 1.86E-03 |
| 51 | Neutrophils_lg | Macrophages_sc_lg | - | - | - | | | | | | | | | | | | | 5 | | |
| 52 | pM1 | pM2 | | | | | | 0.00E+00 | - | 0.00E+00 | - | 0.00E+00 | - | 0.00E+00 | - | 0.00E+00 | - | 4 | 0.00E+00 | 3.43E-04 |
| 53 | pM2 | pM1 | | | | 3.43E-04 | - | 3.43E-04 | - | | | | | | | | | 4 | 3.43E-04 | 3.43E-04 |
| 54 | NK.cells.rest_lg | T.cells.CD8_lg | | | | 1.24E-02 | - | | | 7.88E-04 | - | | | 7.88E-04 | - | | | 3 | 7.88E-04 | 1.24E-02 |
| 55 | T.cells.CD8_lg | NK.cells.rest_lg | | | | | | | | | | | | | | | | 3 | | |
| 56 | NK.cells.active_lg | CD4Tcell_sc_lg | | | | 1.26E-03 | - | | | 1.08E-03 | - | | | 1.08E-03 | - | | | 3 | 1.08E-03 | 1.26E-03 |
| 57 | CD4Tcell_sc_lg | NK.cells.active_lg | | | | | | | | | | | | | | | | 3 | | |
| 58 | B.cells.ive_lg | Epithelial | + | + | + | | | | | | | | | | | 1.73E-03 | + | 3 | 1.73E-03 | 8.19E-03 |
| 59 | Epithelial | B.cells.ive_lg | + | + | + | | | | | | | | | | | | | 3 | | |
| 60 | CD4Tcell_sc_lg | pM1 | + | + | + | | | | | 8.19E-03 | + | | | | | | | 3 | 8.19E-03 | 8.19E-03 |
| 61 | pM1 | CD4Tcell_sc_lg | + | + | + | | | | | | | | | | | | | 3 | | |
| 62 | Cancer | pM1 | | | | | | 2.35E-35 | + | | | | | 2.35E-35 | + | | | 2 | 2.35E-35 | 2.35E-35 |
| 63 | pM1 | Cancer | | | | | | | | | | | | | | | | 2 | | |
| 64 | Cancer | pM0 | | | | | | 5.03E-25 | + | | | | | 5.03E-25 | + | | | 2 | 5.03E-25 | 5.03E-25 |
| 65 | pM0 | Cancer | | | | | | | | | | | | | | | | 2 | | |
| 66 | Mesenchymal | Endothelial.cells_lg | | | | | | 4.02E-19 | + | | | | | 4.02E-19 | + | | | 2 | 4.02E-19 | 4.02E-19 |
| 67 | Endothelial.cells_lg | Mesenchymal | | | | | | | | 4.02E-19 | + | | | | | | | 2 | | |
| 68 | B.cells.ive_lg | pM1 | | | | | | 4.18E-19 | + | | | | | 4.18E-19 | + | | | 2 | 4.18E-19 | 4.18E-19 |
| 69 | pM1 | B.cells.ive_lg | | | | | | | | | | | | | | | | 2 | | |
| 70 | Macrophages_sc_lg | CAF_lg | | | | | | 5.33E-17 | - | | | | | 5.33E-17 | - | | | 2 | 5.33E-17 | 5.33E-17 |
| 71 | CAF_lg | Macrophages_sc_lg | | | | | | | | | | | | | | | | 2 | | |
| 72 | Cancer | B.cells.ive_lg | | | | | | 3.36E-13 | - | | | | | | | | | | | |

Table S2. List of edges, whether an edge was predicted to promote or inhibit the target node, and the strength inferred using the different structure learning algorithms in analyzing the features present in dataset comprised of common melanocytic nevi and primary melanoma tissue samples (GEO). Rows highlighted in green were included in the consensus seed network, yellow indicate that the directionality was unclear, and red indicate edges included in the “blacklist”. The edge numbers correspond to the x-axis in Figure 4A.

| Edge No | from | to | mmhc CorSign | aracne CorSign | hiton CorSign | iamb strength | iamb CorSign | iamb.fdr strength | iamb.fdr CorSign | tabu strength | tabu CorSign | mmhc strength | mmhc CorSign | hc strength | hc CorSign | pc_stable strength | pc_stable CorSign | Hit Number | Min strength | Max strength |
|---------|----------------------|----------------------|-----------------|-------------------|------------------|------------------|-----------------|----------------------|---------------------|------------------|-----------------|------------------|-----------------|----------------|---------------|-----------------------|----------------------|---------------|-----------------|-----------------|
| 1 | pM1 | pM2 | - | - | - | 2.40E-41 | - | 2.40E-41 | - | 2.40E-41 | - | 2.40E-41 | - | 2.40E-41 | - | 2.40E-41 | - | 9 | 2.40E-41 | 2.40E-41 |
| 1 | pM2 | pM1 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 9 | - | - |
| 2 | pM0 | pM2 | - | - | - | 3.31E-38 | - | 3.31E-38 | - | 3.31E-38 | - | 3.31E-38 | - | 3.31E-38 | - | 3.31E-38 | - | 9 | 3.31E-38 | 3.31E-38 |
| 2 | pM2 | pM0 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 9 | - | - |
| 3 | Cancer | Mesenchymal | + | + | + | 6.29E-09 | + | 2.09E-18 | + | 8.02E-13 | + | 6.29E-09 | + | 8.02E-13 | + | 2.46E-12 | + | 9 | 2.09E-18 | 6.29E-09 |
| 3 | Mesenchymal | Cancer | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 9 | - | - |
| 4 | Cancer | Epithelial | - | - | - | 4.24E-15 | - | 4.24E-15 | - | 4.24E-15 | - | 4.24E-15 | - | 2.79E-16 | - | 4.24E-15 | - | 9 | 2.79E-16 | 4.24E-15 |
| 4 | Epithelial | Cancer | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 9 | - | - |
| 5 | CAF_lg | Mesenchymal | + | + | + | - | - | 6.70E-15 | + | - | - | - | - | - | - | 2.20E-12 | + | 9 | 6.70E-15 | 5.98E-05 |
| 5 | Mesenchymal | CAF_lg | + | + | + | 2.75E-14 | + | - | - | 7.46E-12 | + | 2.75E-14 | + | 5.98E-05 | + | - | - | 9 | - | - |
| 6 | Macrophages_sc_lg | T.cells.CD8_lg | + | + | + | 9.32E-06 | + | 1.82E-11 | + | 7.68E-06 | + | 1.79E-04 | + | 7.68E-06 | + | 1.79E-04 | + | 9 | 1.82E-11 | 1.79E-04 |
| 6 | T.cells.CD8_lg | Macrophages_sc_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 9 | - | - |
| 7 | NK.cells.active_lg | NK.cells.rest_lg | - | - | - | - | - | - | - | - | - | 1.02E-06 | - | - | - | - | - | 9 | 1.01E-09 | 1.68E-05 |
| 7 | NK.cells.rest_lg | NK.cells.active_lg | - | - | - | 1.01E-09 | - | 1.68E-05 | - | 1.01E-09 | - | - | - | 1.01E-09 | - | 1.68E-05 | - | 9 | - | - |
| 8 | CD4Tcell_sc_lg | Endothelial.cells_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 9 | 8.60E-08 | 4.15E-07 |
| 8 | Endothelial.cells_lg | CD4Tcell_sc_lg | + | + | + | 4.15E-07 | + | 8.60E-08 | + | 4.15E-07 | + | 4.15E-07 | + | 4.15E-07 | + | 4.15E-07 | + | 9 | - | - |
| 9 | CCN4 | Mesenchymal | + | + | + | 6.48E-05 | + | - | - | 8.38E-07 | + | 6.48E-05 | + | 8.38E-07 | + | 2.29E-02 | + | 8 | 8.38E-07 | 2.29E-02 |
| 9 | Mesenchymal | CCN4 | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 8 | - | - |
| 10 | NK.cells.active_lg | T.cells.CD8_lg | + | + | + | 1.05E-04 | + | - | - | 1.19E-03 | + | 3.93E-03 | + | 1.19E-03 | + | 3.93E-03 | + | 8 | 1.05E-04 | 3.93E-03 |
| 10 | T.cells.CD8_lg | NK.cells.active_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 8 | - | - |
| 11 | CD4Tcell_sc_lg | Macrophages_sc_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 8 | 4.58E-04 | 4.58E-04 |
| 11 | Macrophages_sc_lg | CD4Tcell_sc_lg | + | + | + | 4.58E-04 | + | - | - | 4.58E-04 | + | 4.58E-04 | + | 4.58E-04 | + | 4.58E-04 | + | 8 | - | - |
| 12 | NK.cells.rest_lg | pM0 | + | + | + | - | - | - | - | 2.22E-04 | + | - | - | 2.22E-04 | + | 1.17E-03 | + | 7 | 6.30E-05 | 1.17E-03 |
| 12 | pM0 | NK.cells.rest_lg | + | + | + | - | - | - | - | - | - | 6.30E-05 | + | - | - | - | - | 7 | - | - |
| 13 | pM1 | T.cells.CD8_lg | + | + | + | - | - | - | - | 5.96E-03 | + | 3.70E-03 | + | 5.96E-03 | + | 3.70E-03 | + | 7 | 3.70E-03 | 5.96E-03 |
| 13 | T.cells.CD8_lg | pM1 | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 7 | - | - |
| 14 | Cancer | NK.cells.active_lg | + | + | + | 8.85E-16 | + | - | - | 8.85E-16 | + | - | - | 8.85E-16 | + | - | - | 4 | 8.85E-16 | 8.85E-16 |
| 14 | NK.cells.active_lg | Cancer | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 4 | - | - |
| 15 | CAF_lg | Endothelial.cells_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | 3.11E-06 | + | 4 | 3.11E-06 | 8.04E-04 |
| 15 | Endothelial.cells_lg | CAF_lg | + | + | + | - | - | - | - | 8.04E-04 | + | - | - | 4.19E-04 | + | - | - | 4 | - | - |
| 16 | Cancer | proliferation | - | - | - | 1.47E-09 | + | - | - | 6.39E-11 | + | - | - | 6.39E-11 | + | - | - | 3 | 6.39E-11 | 1.47E-09 |
| 16 | proliferation | Cancer | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 3 | - | - |
| 17 | Macrophages_sc_lg | Mesenchymal | - | - | + | - | - | - | - | - | - | - | - | - | - | - | - | 3 | 7.24E-09 | 7.24E-09 |
| 17 | Mesenchymal | Macrophages_sc_lg | - | - | + | - | - | - | - | 7.24E-09 | + | - | - | 7.24E-09 | + | - | - | 3 | - | - |
| 18 | Endothelial.cells_lg | pM0 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 3 | 1.27E-04 | 1.27E-04 |
| 18 | pM0 | Endothelial.cells_lg | - | - | - | - | - | - | - | 1.27E-04 | - | - | - | - | - | - | - | 3 | - | - |
| 19 | B.cells.naive_lg | Endothelial.cells_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 3 | 3.41E-03 | 3.41E-03 |
| 19 | Endothelial.cells_lg | B.cells.naive_lg | + | + | + | - | - | - | - | 3.41E-03 | + | - | - | 3.41E-03 | + | - | - | 3 | - | - |
| 20 | Cancer | CCN4 | - | - | - | - | - | - | - | 5.06E-11 | + | - | - | 5.06E-11 | + | - | - | 2 | 5.06E-11 | 5.06E-11 |
| 20 | CCN4 | Cancer | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 21 | Endothelial.cells_lg | Mesenchymal | - | - | - | - | - | - | - | 2.75E-10 | + | - | - | 2.75E-10 | + | - | - | 2 | 2.75E-10 | 2.75E-10 |
| 21 | Mesenchymal | Endothelial.cells_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 22 | Macrophages_sc_lg | pM1 | - | - | - | - | - | - | - | 5.29E-07 | + | - | - | 5.29E-07 | + | - | - | 2 | 5.29E-07 | 5.29E-07 |
| 22 | pM1 | Macrophages_sc_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 23 | Epithelial | pM0 | - | - | - | - | - | - | - | 3.92E-05 | - | - | - | 3.92E-05 | - | - | - | 2 | 3.92E-05 | 3.92E-05 |
| 23 | pM0 | Epithelial | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 24 | Endothelial.cells_lg | proliferation | - | - | - | - | - | - | - | 5.19E-05 | - | - | - | 5.19E-05 | - | - | - | 2 | 5.19E-05 | 5.19E-05 |
| 24 | proliferation | Endothelial.cells_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 25 | CCN4 | Neutrophils_lg | - | - | - | - | - | - | - | 7.22E-04 | + | - | - | 7.22E-04 | + | - | - | 2 | 7.22E-04 | 7.22E-04 |
| 25 | Neutrophils_lg | CCN4 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 26 | CAF_lg | T.cells.CD8_lg | - | - | - | - | - | - | - | 8.87E-03 | + | - | - | 8.87E-03 | + | - | - | 2 | 8.87E-03 | 8.87E-03 |
| 26 | T.cells.CD8_lg | CAF_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 27 | Macrophages_sc_lg | NK.cells.rest_lg | - | - | - | - | - | - | - | 2.08E-02 | - | - | - | 2.08E-02 | - | - | - | 2 | 2.08E-02 | 2.08E-02 |
| 27 | NK.cells.rest_lg | Macrophages_sc_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 28 | pM0 | pM1 | - | - | - | - | - | - | - | 2.28E-02 | - | - | - | 2.28E-02 | - | - | - | 2 | 2.28E-02 | 2.28E-02 |
| 28 | pM1 | pM0 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 29 | Endothelial.cells_lg | Epithelial | - | - | - | - | - | - | - | - | - | - | - | 9.69E-04 | + | - | - | 1 | 9.69E-04 | 9.69E-04 |
| 29 | Epithelial | Endothelial.cells_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | - | - |
| 30 | CAF_lg | CCN4 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | 2.35E-01 | 2.35E-01 |
| 30 | CCN4 | CAF_lg | - | - | - | - | - | - | - | - | - | - | - | 2.35E-01 | + | - | - | 1 | - | - |
| 31 | Cancer | pM2 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | 1.00E+00 | 1.00E+00 |
| 31 | pM2 | Cancer | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | - | - |

Table S3. List of edges, whether an edge was predicted to promote or inhibit the target node, and the strength inferred using the different structure learning algorithms in analyzing the features present in primary melanoma tissue samples in the TCGA SKCM dataset. Rows highlighted in green were included in the consensus seed network, yellow indicate that the directionality was unclear, and red indicate edges included in the “blacklist”. The edge numbers correspond to the x-axis in Figure 4B.

| Edge No | from | to | mmpc CorSign | aracne CorSign | hiton CorSign | iamb strength | iamb CorSign | iamb.fdr strength | iamb.fdr CorSign | tabu strength | tabu CorSign | mmhc strength | mmhc CorSign | hc strength | hc CorSign | pc_stable strength | pc_stable CorSign | Hit Number | Min strength | Max strength |
|---------|----------------------|----------------------|--------------|----------------|---------------|---------------|--------------|-------------------|------------------|---------------|--------------|---------------|--------------|-------------|------------|--------------------|-------------------|------------|--------------|--------------|
| 1 | pM0 | pM2 | - | - | - | - | - | - | - | 6.36E-46 | - | 2.04E-18 | - | 6.36E-46 | - | 6.36E-46 | - | 9 | 6.36E-46 | 2.04E-18 |
| 1 | pM2 | pM0 | - | - | - | 6.36E-46 | - | 6.36E-46 | - | - | - | - | - | - | - | - | - | 9 | - | - |
| 2 | pM0 | pM1 | - | - | - | - | - | - | - | 9.96E-07 | - | 9.96E-07 | - | 9.96E-07 | - | - | - | 9 | 1.59E-34 | 9.96E-07 |
| 2 | pM1 | pM0 | - | - | - | 1.59E-34 | - | 1.59E-34 | - | - | - | - | - | - | - | 1.59E-34 | - | 9 | - | - |
| 3 | CAF_lg | Mesenchymal | + | + | + | - | - | - | - | 5.38E-14 | + | - | - | 3.26E-18 | + | - | - | 9 | 3.26E-18 | 5.38E-14 |
| 3 | Mesenchymal | CAF_lg | + | + | + | 3.26E-18 | + | 3.26E-18 | + | - | - | 3.26E-18 | + | - | - | 3.26E-18 | + | 9 | - | - |
| 4 | CAF_lg | Macrophages_sc_lg | + | + | + | 1.45E-08 | + | 1.45E-08 | + | 8.38E-11 | + | 1.45E-08 | + | 1.02E-11 | + | 1.45E-08 | + | 9 | 1.02E-11 | 1.45E-08 |
| 4 | Macrophages_sc_lg | CAF_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 9 | - | - |
| 5 | Macrophages_sc_lg | T.cells.CD8_lg | + | + | + | 1.43E-07 | + | 1.43E-07 | + | 1.23E-11 | + | 1.43E-07 | + | 1.23E-11 | + | 1.43E-07 | + | 9 | 1.23E-11 | 1.43E-07 |
| 5 | T.cells.CD8_lg | Macrophages_sc_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 9 | - | - |
| 6 | NK.cells.active_lg | NK.cells.rest_lg | - | - | - | - | - | - | - | 2.37E-09 | - | - | - | 2.37E-09 | - | 2.37E-09 | - | 9 | 2.01E-10 | 2.37E-09 |
| 6 | NK.cells.rest_lg | NK.cells.active_lg | - | - | - | 2.01E-10 | - | 2.01E-10 | - | - | - | 2.01E-10 | - | - | - | - | - | 9 | - | - |
| 7 | Endothelial.cells_lg | Mesenchymal | + | + | + | - | - | - | - | - | - | - | - | - | - | 1.28E-07 | + | 8 | 3.73E-08 | 1.28E-07 |
| 7 | Mesenchymal | Endothelial.cells_lg | + | + | + | 3.73E-08 | + | - | - | 3.73E-08 | + | 3.73E-08 | + | 3.73E-08 | + | - | - | 8 | - | - |
| 8 | CD4Tcell_sc_lg | Macrophages_sc_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 8 | 1.96E-06 | 2.61E-04 |
| 8 | Macrophages_sc_lg | CD4Tcell_sc_lg | - | - | - | 2.61E-04 | - | - | - | 1.96E-06 | - | 2.61E-04 | - | 1.96E-06 | - | 2.61E-04 | - | 8 | - | - |
| 9 | CCN4 | NK.cells.rest_lg | + | + | + | 1.32E-03 | + | - | - | 1.57E-02 | + | 1.32E-03 | + | 1.57E-02 | + | 1.57E-02 | + | 8 | 1.32E-03 | 1.57E-02 |
| 9 | NK.cells.rest_lg | CCN4 | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 8 | - | - |
| 10 | CCN4 | Mesenchymal | + | + | + | 1.14E-06 | + | - | - | 2.38E-02 | + | - | - | - | - | 3.83E-06 | + | 6 | 1.14E-06 | 2.38E-02 |
| 10 | Mesenchymal | CCN4 | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 6 | - | - |
| 11 | NK.cells.active_lg | pM0 | - | - | - | - | - | - | - | 3.16E-05 | - | - | - | 3.16E-05 | - | - | - | 3 | 3.16E-05 | 3.16E-05 |
| 11 | pM0 | NK.cells.active_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 3 | - | - |
| 12 | Macrophages_sc_lg | proliferation | - | - | - | - | - | - | - | 1.72E-04 | - | - | - | 1.72E-04 | - | - | - | 3 | 1.72E-04 | 1.72E-04 |
| 12 | proliferation | Macrophages_sc_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 3 | - | - |
| 13 | Endothelial.cells_lg | Epithelial | + | + | + | - | - | - | - | 1.01E-02 | + | - | - | 1.01E-02 | + | - | - | 3 | 1.01E-02 | 1.01E-02 |
| 13 | Epithelial | Endothelial.cells_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 3 | - | - |
| 14 | CD4Tcell_sc_lg | Epithelial | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 3 | 1.36E-02 | 1.36E-02 |
| 14 | Epithelial | CD4Tcell_sc_lg | + | + | + | - | - | - | - | 1.36E-02 | + | - | - | 1.36E-02 | + | - | - | 3 | - | - |
| 15 | pM1 | pM2 | - | - | - | - | - | - | - | 9.70E-30 | - | - | - | 9.70E-30 | - | - | - | 2 | 9.70E-30 | 9.70E-30 |
| 15 | pM2 | pM1 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 16 | Macrophages_sc_lg | NK.cells.active_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | 2.51E-06 | 1.29E-04 |
| 16 | NK.cells.active_lg | Macrophages_sc_lg | - | - | - | - | - | - | - | 2.51E-06 | + | - | - | 1.29E-04 | + | - | - | 2 | - | - |
| 17 | CAF_lg | CCN4 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | 4.75E-06 | 4.75E-06 |
| 17 | CCN4 | CAF_lg | - | - | - | - | - | - | - | 4.75E-06 | + | - | - | 4.75E-06 | + | - | - | 2 | - | - |
| 18 | CAF_lg | T.cells.CD8_lg | - | - | - | - | - | - | - | 1.58E-05 | - | - | - | 1.58E-05 | - | - | - | 2 | 1.58E-05 | 1.58E-05 |
| 18 | T.cells.CD8_lg | CAF_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 19 | CAF_lg | CD4Tcell_sc_lg | - | - | - | - | - | - | - | 5.54E-03 | + | - | - | 5.54E-03 | + | - | - | 2 | 5.54E-03 | 5.54E-03 |
| 19 | CD4Tcell_sc_lg | CAF_lg | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 2 | - | - |
| 20 | Macrophages_sc_lg | pM1 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 1 | 1.64E-02 | 1.64E-02 |
| 20 | pM1 | Macrophages_sc_lg | - | - | - | - | - | - | - | - | - | - | - | 1.64E-02 | + | - | - | 1 | - | - |
| 21 | B.cells.naive_lg | T.cells.CD8_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 1 | 1.00E+00 | 1.00E+00 |
| 21 | T.cells.CD8_lg | B.cells.naive_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 1 | - | - |
| 22 | NK.cells.active_lg | T.cells.CD8_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 1 | 1.00E+00 | 1.00E+00 |
| 22 | T.cells.CD8_lg | NK.cells.active_lg | + | + | + | - | - | - | - | - | - | - | - | - | - | - | - | 1 | - | - |

Table S4. Proliferation metrics associated CD4⁺ and CD8⁺ T cells stimulated in vitro in different conditions. Dil: fraction diluted; PF: Precursor frequency, %dividing cells; PI: Proliferation index; and SD^D: proliferation variance. Summary statistics were calculated from three biological replicates and represented as mean (standard deviation). Statistical significance was assessed using type III repeated measures ANOVA, where * indicates a p-value < 0.05.

| Experimental Conditions | Live CD4+ T cells | | | | Live CD8+ T cells | | | |
|-------------------------|-------------------|-------------------|------------------|-----------------|-------------------|-------------------|-------------------|-----------------|
| | Dil | PF | PI | SD ^D | Dil | PF | PI | SD ^D |
| AP beads + rCCN4 | 0.670 (0.012) | 0.392 (0.014) | 1.407 (0.033) | 0.274 | 0.983 (0.003) | 0.851 (0.014) | 2.655 (0.045) | 0.103 |
| AP beads + CCN4 KO TCM | 0.472* (0.008) | 0.221* (0.003) | 1.404 (0.023) | 0.274 | 0.914* (0.015) | 0.715* (0.032) | 1.729* (0.044) | 0.205 |
| AP beads + WT TCM | 0.552* (0.047) | 0.282* (0.038) | 1.403 (0.031) | 0.272 | 0.920* (0.020) | 0.704* (0.044) | 1.923* (0.052) | 0.189 |
| AP beads | 0.655 (0.043) | 0.366 (0.035) | 1.473 (0.060) | 0.255 | 0.982 (0.002) | 0.841 (0.026) | 2.756 (0.187) | 0.106 |
| No stimulation | 0.046 (0.025) | 0.016 (0.013) | 1.763 (1.056) | 0.371 | 0.062 (0.018) | 0.008 (0.004) | 2.520 (0.441) | 0.229 |

Table S5. List of fluorophore-conjugated antibodies using to quantify cell subsets by flow cytometry.

| Marker | Clone | Fluorophore | Manufacturer |
|--------------------|-------------|---------------------|-------------------------|
| LIVE/DEAD Fix | -- | Violet/Pacific Blue | Invitrogen |
| CD45 | 30-F11 | BB515 | BD Biosciences #564590 |
| CD3e | 500A2 | Alexa Fluor 700 | BioLegend #152316 |
| CD4 | GK1.5 | APC-Cy7 | BD Biosciences #552051 |
| CD8a | REA601 | APC | Miltenyi 130-109-248 |
| CD161 (NK-1.1) | PK136 | APC-Cy7 | BioLegend #108723 |
| CD45R/B220 | RA3-6B2 | APC | BioLegend #103212 |
| CD49b | DX5 | PerCP/Cy5.5 | BioLegend #108915 |
| CD11b | M1/70 | PerCP/Cy5.5 | eBioscience #45-0112-80 |
| CD11c | N418 | PE | eBioscience #12-0114-81 |
| F4/80 | BM8 | APC-Cy7 | BioLegend #123117 |
| Ly-6G/Ly-6C (Gr-1) | RB6-8C5 | APC | BioLegend #108412 |
| CD279 (PD-1) | REA802 | PE | BioLegend #135205 |
| I-A/I-E (MHC-II) | M5/114.15.2 | Alexa Fluor 700 | BioLegend #107622 |

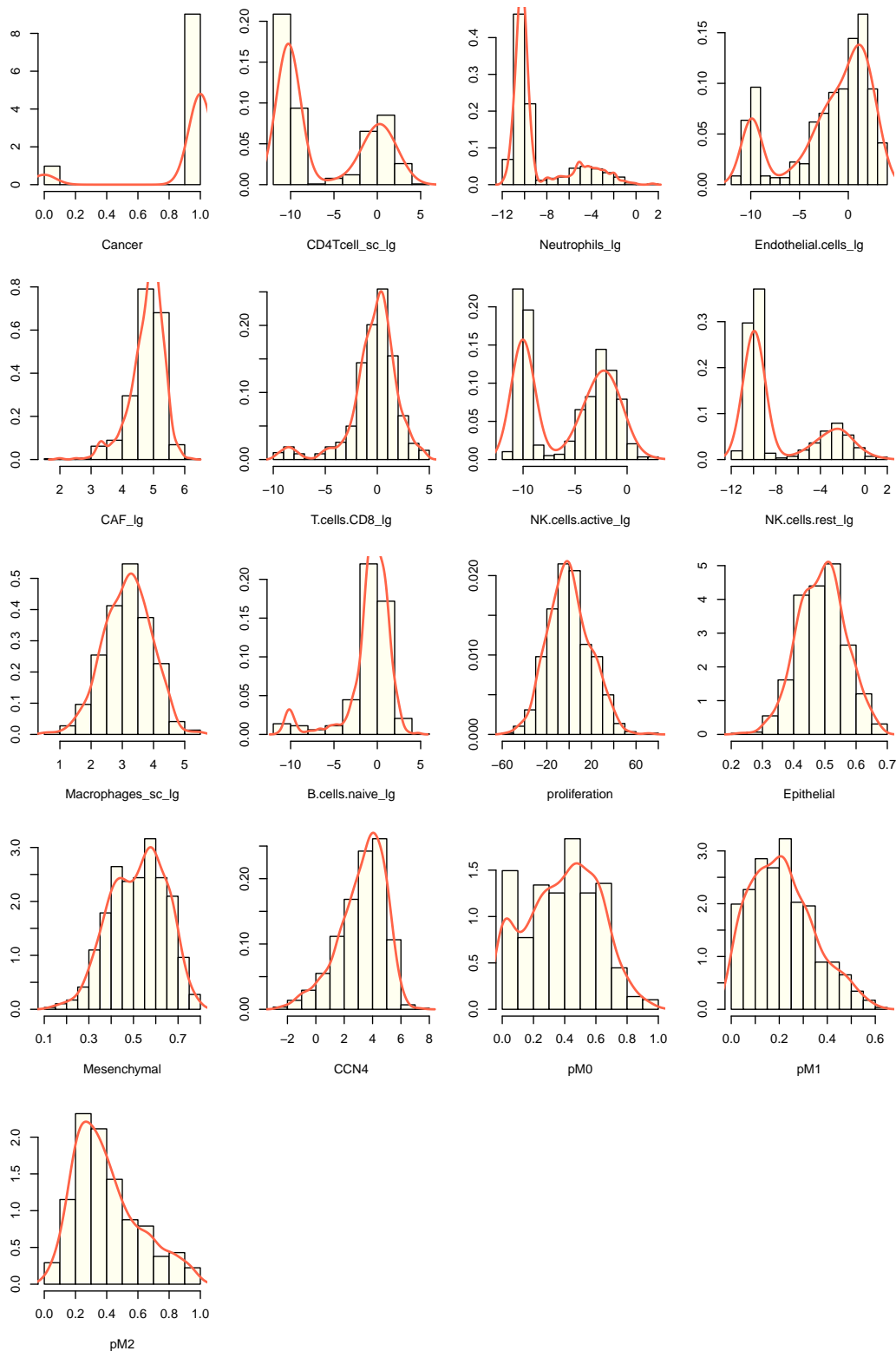


Fig. S1. Distribution of extracted features associated with the BRCA TCGA dataset. Figure represents a normalized histogram (bar graph) and distribution (red line) in log-transformed feature values. The panels from left to right, top to bottom are Cancer attribute, CD4 T cells, Neutrophils, Endothelial cells, Cancer associated fibroblasts (CAFs), CD8 T cells, active NK cells, resting NK cells, Macrophages, naïve B cells, proliferation, epithelial cell state, mesenchymal cell state, CCN4 gene expression, $p(M\Phi0)$, $p(M\Phi1)$, and $p(M\Phi2)$.

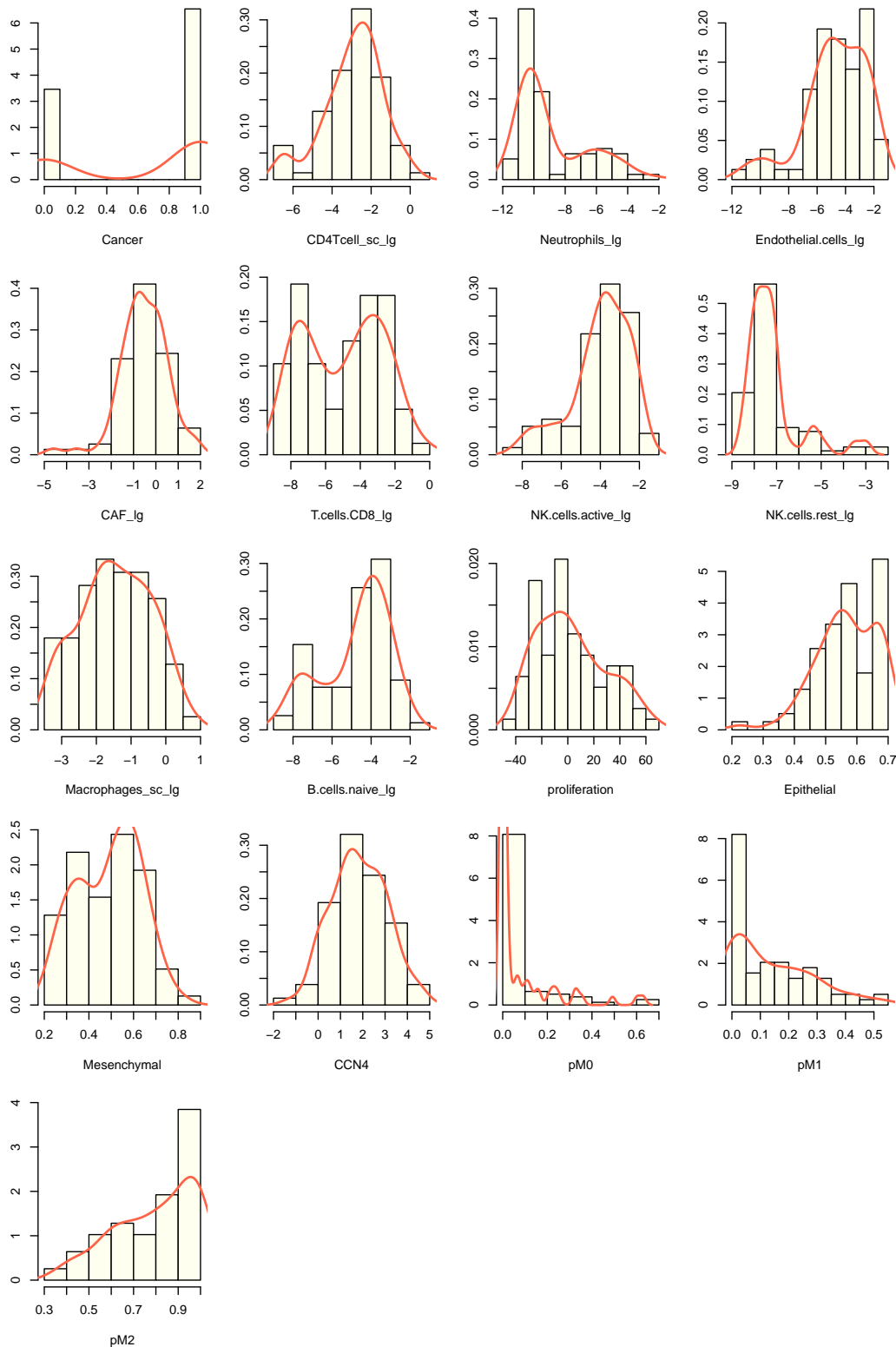


Fig. S2. Distribution of extracted features associated with the dataset containing common melanocytic nevi and primary melanoma tissue samples (GEO). Figure represents a normalized histogram (bar graph) and distribution (red line) in log-transformed feature values. The panels from left to right, top to bottom are Cancer attribute, CD4 T cells, Neutrophils, Endothelial cells, Cancer associated fibroblasts, CD8 T cells, active NK cells, resting NK cells, Macrophages, naïve B cells, proliferation, epithelial cell state, mesenchymal cell state, CCN4 gene expression, $p(M\Phi 0)$, $p(M\Phi 1)$, and $p(M\Phi 2)$.

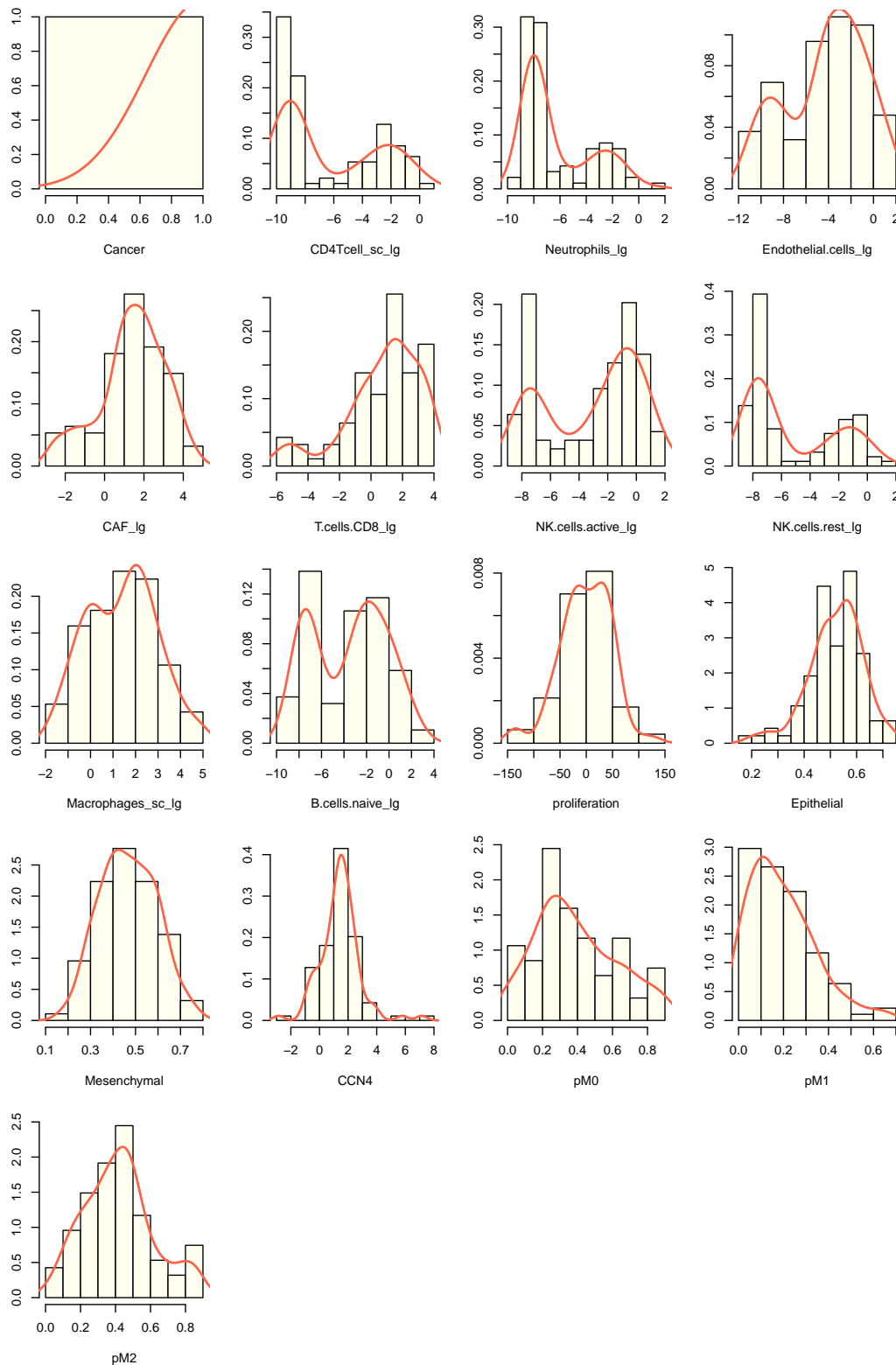


Fig. S3. Distribution of extracted features associated with primary melanoma samples in the TCGA SKCM dataset. Figure represents a normalized histogram (bar graph) and distribution (red line) in log-transformed feature values. The panels from left to right, top to bottom are Cancer attribute, CD4 T cells, Neutrophils, Endothelial cells, Cancer associated fibroblasts, CD8 T cells, active NK cells, resting NK cells, Macrophages, naïve B cells, proliferation, epithelial cell state, mesenchymal cell state, CCN4 gene expression, $p(M\Phi 0)$, $p(M\Phi 1)$, and $p(M\Phi 2)$.

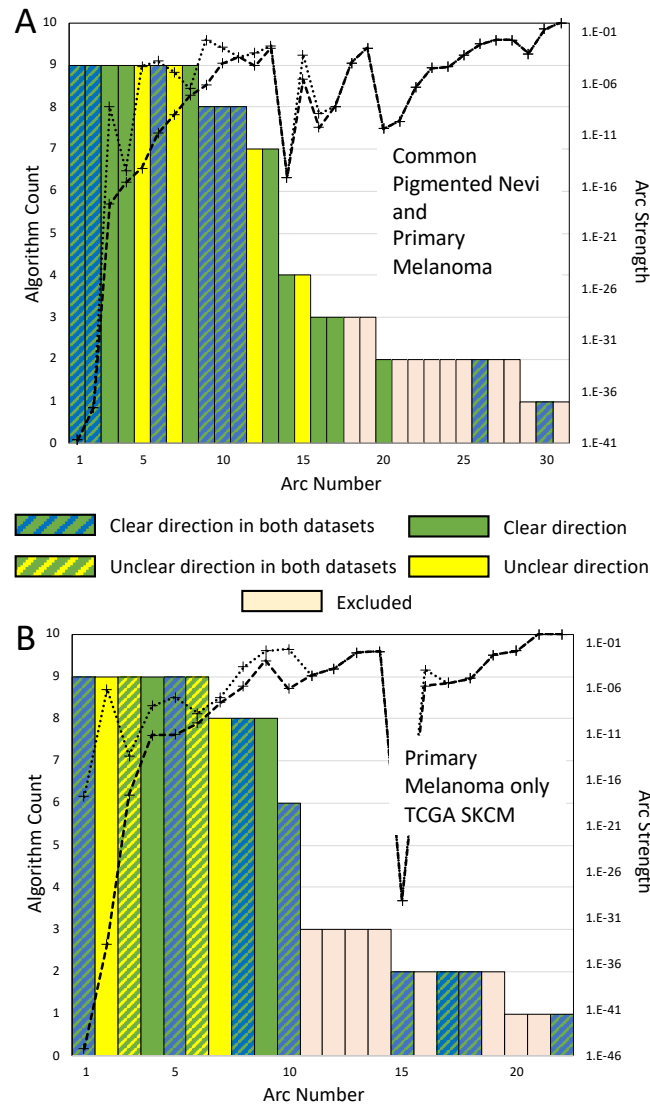


Fig. S4. Summary of the evidence obtained from two melanoma datasets supporting the consensus edges in the seed network. Analysis of datasets containing samples from both common pigmented nevi and primary melanoma (A) and from only primary melanoma (B). Edges ordered based on the number of algorithms that detected that an edge was enriched (bar graph - left axis) and the strength of enrichment (dotted lines - right axis). The lines associated with the strength of enrichment represent the minimum (dashed line) and maximum (dotted line) values obtained by the different algorithms. Coloring of bar graph indicates whether a clear direction was associated with an edge in one dataset (green) and in both datasets (green/blue), an edge was significantly enriched but without a clear direction in one dataset (yellow) and in both datasets (green/yellow), or that an edge was excluded from the consensus seed network list (tan).

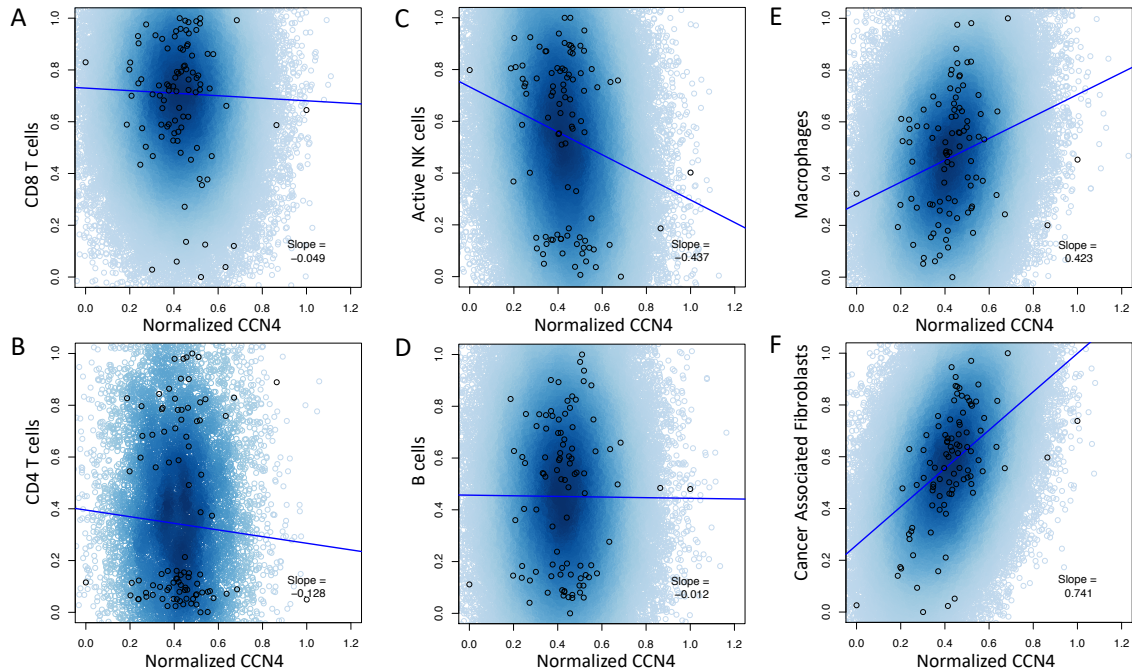


Figure S2B. Conditional probability query of the SKCM DAG compared against digital cytometry estimates obtained from experimental data. Experimental samples obtained from primary melanoma tissue are shown as open circles. Samples of the conditional probability model for $p(\text{Cancer} > 0.85)$ (blue) for CD8 T cells (A), CD4 T cells (B), Active NK cells (C), B cells (D), Macrophages (E) and Cancer Associated Fibroblasts (F). Linear trendlines are superimposed on the conditional probability samples.

Fig. S5. Conditional probability query of the SKCM DAG compared against digital cytometry estimates obtained from experimental data. Experimental samples obtained from primary melanoma tissue are shown as open circles. Samples of the conditional probability model for $p(\text{Cancer} > 0.85)$ (blue) for CD8 T cells (A), CD4 T cells (B), active NK cells (C), B cells (D), Macrophages (E) and Cancer Associated Fibroblasts (F). Linear trendlines are superimposed on the conditional probability samples.

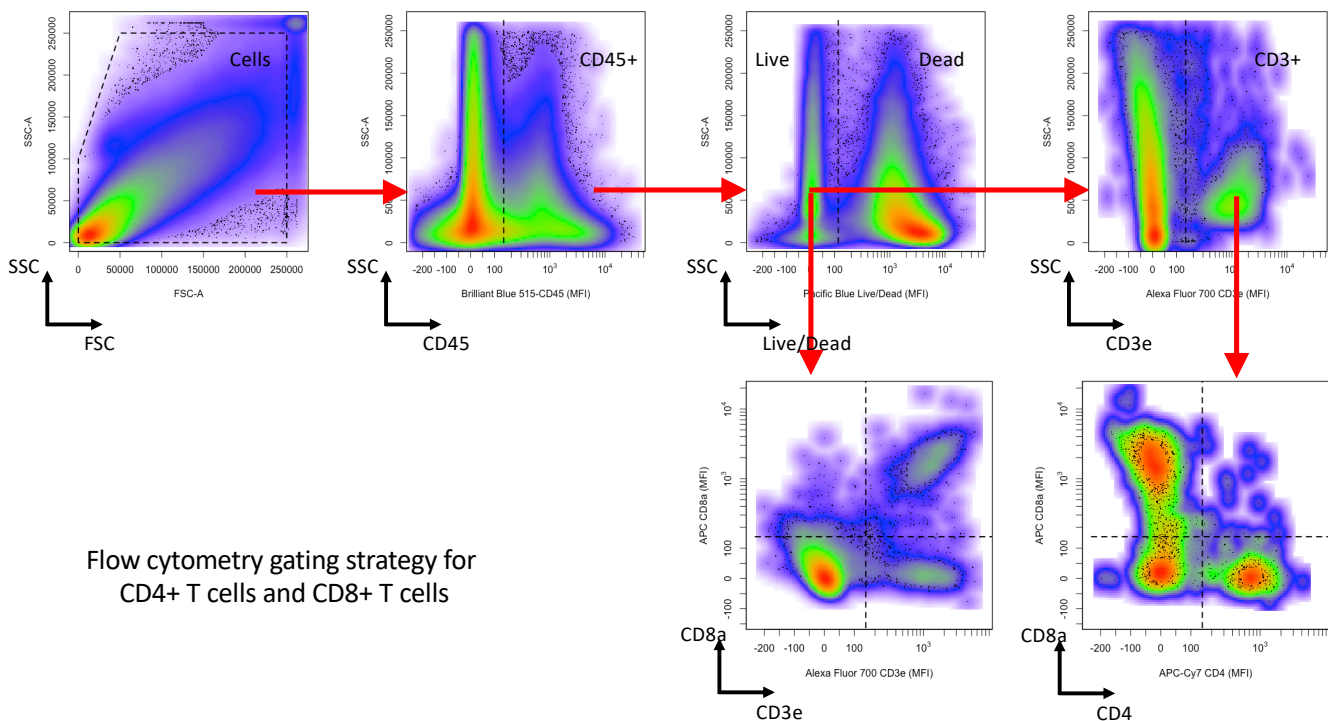


Fig. S6. Flow cytometry gating strategy for T cells. CD45 staining versus side scatter area was used to gate for CD45+ cells. Live Dead Pacific Blue staining versus side scatter area was used to then gate for Live CD45+ cells, which were then gated based on CD3e+ expression. Live CD45+ CD3e+ cells were further subdivided into CD8+ T cells (live CD8+ CD3e+ CD45+ cells), CD4 T cells (live CD4+ CD3e+ CD45+ cells), and double negative T cells (live CD8- CD4- CD3e+ CD45+ cells).

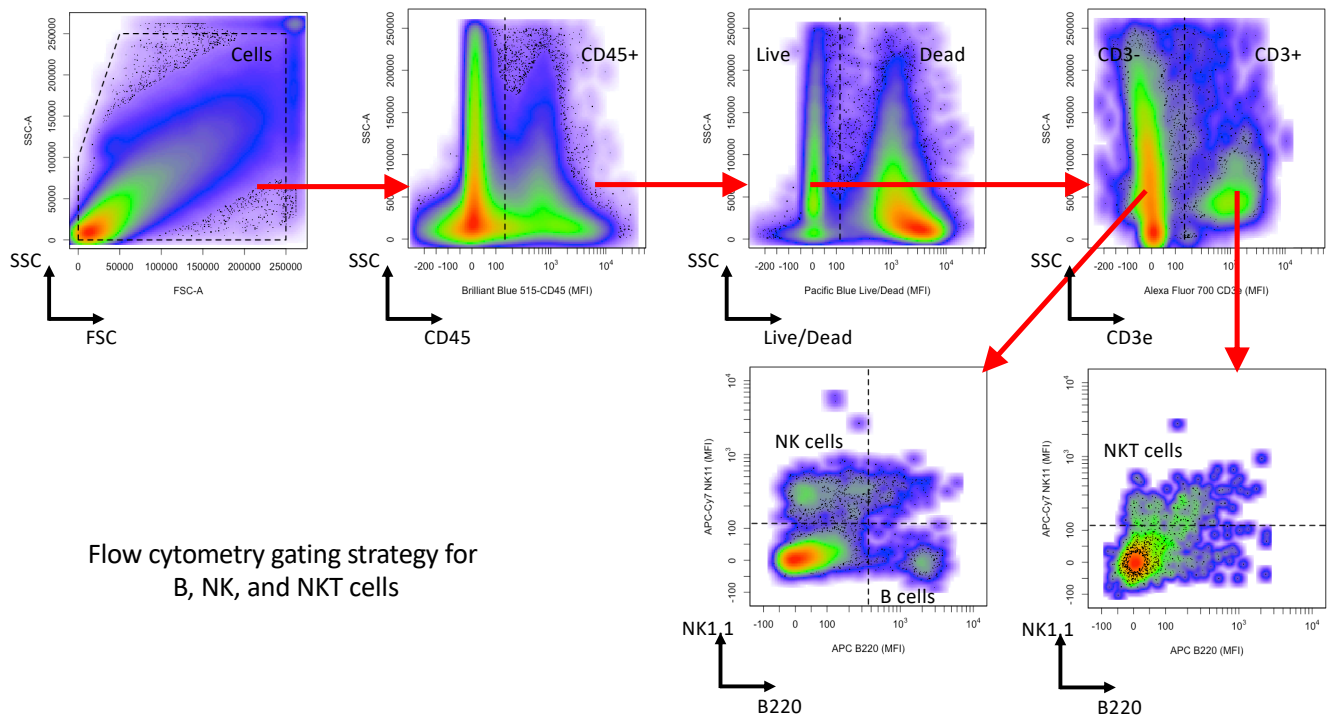


Fig. S7. Flow cytometry gating strategy for B, NK, and NKT cells. CD45 staining versus side scatter area was used to gate for CD45⁺ cells. Live Dead Pacific Blue staining versus side scatter area was used to gate for Live CD45⁺ cells, which were then subdivided into B cells (live NK1.1⁻ B220⁺ CD3⁻ CD45⁺ cells), NK cells (live NK1.1⁺ B220⁻ CD3⁻ CD45⁺ cells), and NKT cells (live NK1.1⁺ CD3e⁺ CD45⁺ cells).

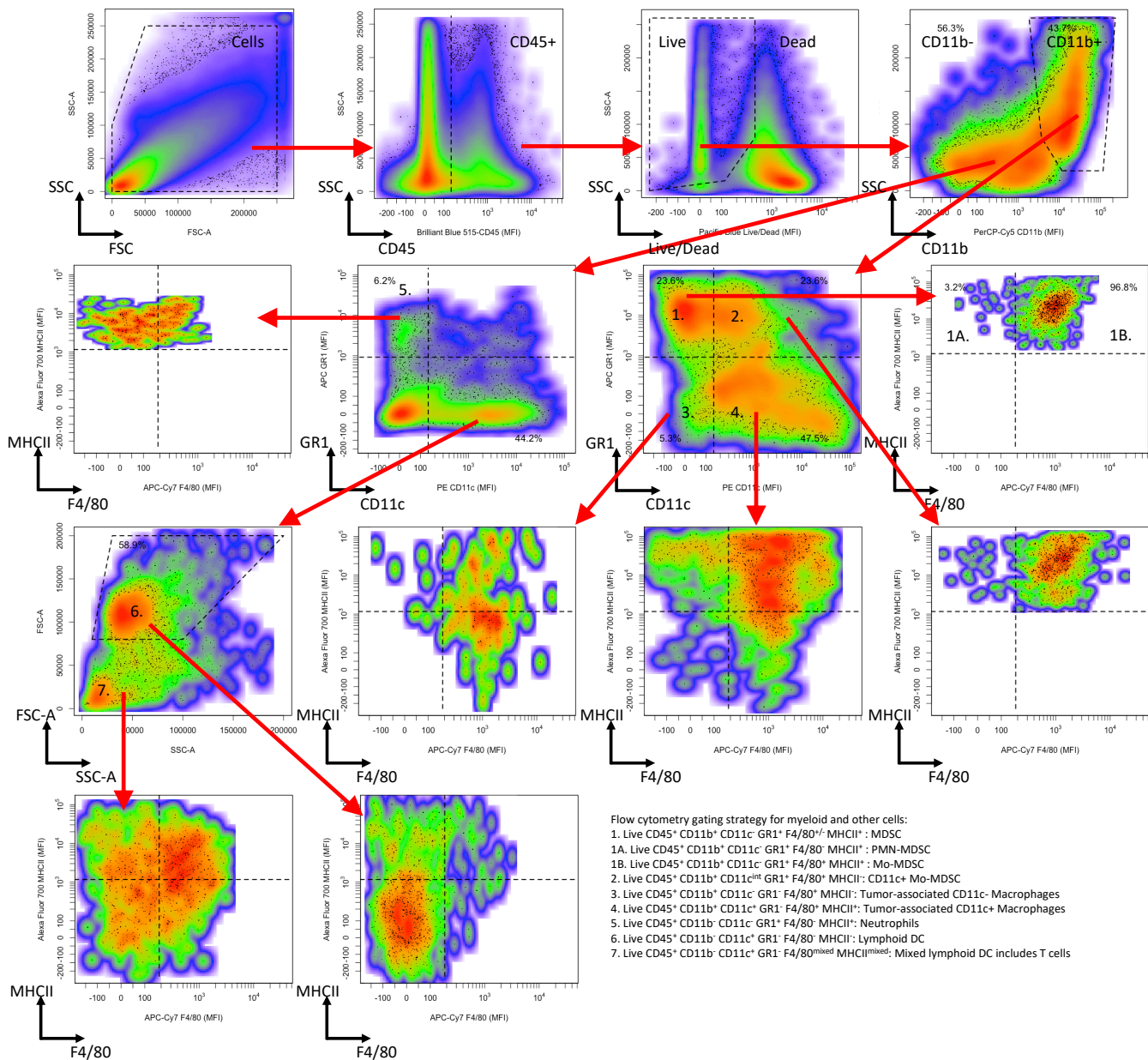


Fig. S8. Flow cytometry gating strategy for Tumor associated neutrophils and myeloid cell subsets. CD45 staining versus side scatter area was used to gate for CD45⁺ cells. Live Dead Pacific Blue staining versus side scatter area was used to gate for Live CD45⁺ cells, which were then subdivided into subsets based on CD11b staining followed by Gr1 versus CD11c staining. From the CD11b⁺ gate, myeloid-derived suppressor cells (MDSC) (live Gr1⁺ CD11c⁻ CD11b⁺ CD45⁺ cells) were subdivided into PMN-MDSC (F4/80⁻ MHCII⁺) and Mo-MDSC (F4/80⁺ MHCII⁺). CD11c⁺ Mo-MDSC were also quantified as (live F4/80⁺ MHCII⁺ Gr1⁺ CD11c^{int} CD11b⁺ CD45⁺ cells). Also from the CD11b⁺ gate, macrophages (live Gr1⁻ F4/80⁺ CD11b⁺ CD45⁺ cells) were subdivided into tumor-associated CD11c⁺ (CD11c^{int}/⁺ MHCII^{hi}) and CD11c⁻ (CD11c⁻ MHCII^{lo}) subsets. The CD11b⁻ subset included tumor-associated neutrophils (TAN) (Gr1⁺ CD11c⁻ MHCII^{hi} F4/80⁻) and lymphoid dendritic cells (Gr1⁻ CD11c⁺ FSC-A^{hi} MHCII^{lo} F4/80⁻).

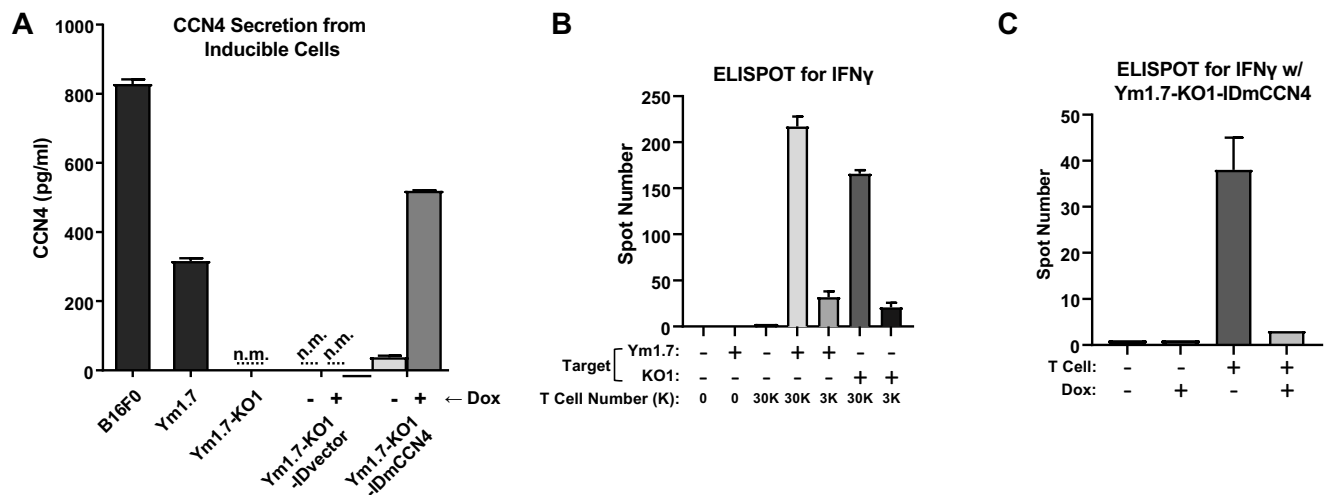


Fig. S9. Control experiments related to ELISPOT assay using an inducible CCN4 YUMM1.7 cell line. (A) CCN4 secretion, measured with ELISA, from CCN4-inducible cells in conditioned media in the presence of absence of doxycycline. (B) ELISPOT for IFN γ release with different target cells and different amount of effector CD8⁺ T cells (In vivo activated CD8⁺ T cells against YUMM1.7 (Ym1.7)). (C) ELISPOT for IFN γ with CCN4-inducible cells as targets using in vivo activated CD8⁺ T cell against YUMM1.7. Results shown as mean \pm S.D. for three biological replicates.