# Single cell RNA-sequencing reveals a dynamic stromal niche that supports tumour growth

Sarah Davidson\*<sup>2</sup>, Mirjana Efremova\*<sup>1</sup>, Angela Riedel<sup>2</sup>, Bidesh Mahata<sup>1,6</sup>, Jhuma Pramanik<sup>1</sup>, Jani Huuhtanen<sup>3</sup>, Gozde Kar<sup>1</sup>, Roser Vento-Tormo<sup>1</sup>, Tzachi Hagai<sup>4</sup>, Xi Chen<sup>1</sup>, Muzlifah A. Haniffa<sup>5</sup>, Jacqueline D. Shields\*<sup>2</sup>, Sarah A. Teichmann\*<sup>1</sup>

<sup>1</sup> Wellcome Sanger Institute, Wellcome Genome Campus, Hinxton, Cambridge CB10 1SA, UK. <sup>2</sup> Medical Research Council Cancer Cell Unit, Hutchison/Medical Research Council Research Centre, Cambridge, UK. <sup>3</sup> Hematology Research Unit Helsinki, University of Helsinki, Finland. <sup>4</sup> School of Molecular Cell Biology and Biotechnology, George S Wise Faculty of Life Sciences, Tel Aviv University, Tel Aviv 69978, Israel. <sup>5</sup> Institute of Cellular Medicine, Newcastle University, Newcastle upon Tyne, NE2 4HH, UK. <sup>6</sup> Department of Pathology, University of Cambridge, Cambridge, UK,

\*# These authors contributed equally to this work
# Corresponding authors: js970@mrc-cu.cam.ac.uk and st9@sanger.ac.uk
Lead contact: js970@mrc-cu.cam.ac.uk

#### **Summary**

Here, using single-cell RNA sequencing we examine the stromal compartment in murine melanoma and draining lymph nodes (LN) at points across tumour development, providing data at data.teichlab.org. Naive lymphocytes from LN undergo activation and clonal expansion within the tumour, prior to PD1 and Lag3 expression, while tumour-associated myeloid cells promote formation of a suppressive niche. We identify three temporally distinct stromal populations displaying unique functional signatures, conserved across mouse and human tumours. Whereas 'immune' stromal cells are observed in early tumours, 'contractile' cells become more prevalent at later time-points. Complement component C3 is specifically expressed in the 'immune' population. Its cleavage product C3a supports recruitment of C3aR<sup>+</sup> macrophages and perturbation of C3a/C3aR disrupts immune infiltration slowing tumour growth. Our results highlight the power of scRNAseq to identify complex interplays and increasing stromal diversity as tumours develops, revealing that stromal cells acquire the capacity to modulate immune landscapes from early disease.

## Introduction

To aid their growth and development, malignant cells cultivate a supporting niche of 'normal' cells, known as the tumour microenvironment. This niche comprises non-immune cells such as fibroblasts, blood and lymphatic endothelial cells, and numerous immune populations

(Turley et al., 2015). The balance of anti- vs. pro-tumour leukocytes can dictate tumour fate (Galon et al., 2006; Sato et al., 2005) and suppressive populations can persist to support immune escape and prevent tumour clearance. While immunotherapies such as anti-CTLA4, anti-PD1 and anti-PD-L1 show efficacy in a large number of melanoma patients, a significant proportion do not respond to this treatment (Brahmer et al., 2012; Hamid et al., 2013; Hodi et al., 2010; Topalian et al., 2012). Thus, there remains an unmet need to uncover therapeutic targets. The numerous mechanisms through which stromal fibroblasts and immune cells promote tumour growth represent a wealth of opportunities for therapeutic intervention. However, the evolving tumour microenvironment (TME) is extremely dynamic, continually adapting to both soluble and mechanical cues, inducing significant heterogeneity within the stromal compartment (Junttila and de Sauvage, 2013).

Cancer associated fibroblasts (CAFs) are the most abundant stromal component, secreting growth factors, promoting angiogenesis, facilitating metastasis and regulating immune infiltration (Calon et al., 2012; Dumont et al., 2013; Gaggioli et al., 2007; Guo et al., 2008; Harper and Sainson, 2014; Jia et al., 2013; Orimo et al., 2005). Although they express typical fibroblast markers, such as fibroblast activation protein (FAP), platelet derived growth factor receptors α (PDGFRα) and β (PDGFRβ), podoplanin (PDPN), Thy-1 and α-smooth muscle actin (αSMA), no single marker universally identifies all CAFs within the tumour stroma (Augsten, 2014; Cortez et al., 2014; Roswall and Pietras, 2012). Such barriers to the identification of CAFs in the TME may underpin conflicting evidence for both pro- and antitumour activities which may reflect the existence of sub-populations of cells possessing different functional properties (Feig et al., 2013; Özdemir et al., 2015)). Recently, single cell technologies have yielded insights into the diversity of the tumour microenvironment, and are beginning to reveal the extent of heterogeneity within the stromal compartment (Bartoschek et al., 2018; Costa et al., 2018; Elyada et al., 2019; Lambrechts et al., 2018; Öhlund et al., 2017; Puram et al., 2017). While commonalities between stromal populations were identified across cancer types examined, differences in functional signatures and marker profiles were observed between tumour types and anatomical location indicating the existence of sitespecific programmes. Whether similarly diverse stromal subsets are present within melanoma, and how the composition and functions adapt as a tumour develops remain to be explored. Therefore, we employed scRNA sequencing to interrogate the developing TME in real time, revealing previously unrecognized traits and an increasing heterogeneity.

Here, we identified the presence of a diverse immune landscape, in which, effector T cells displayed signs of dysfunction predominantly in late stages, while myeloid cells concomitantly increased expression of suppressive molecules. This work also highlighted significant

heterogeneity within the stromal compartment of the primary tumour. Three distinct mesenchymal populations were identified; immune, desmoplastic and contractile, each displaying unique functional and temporal characteristics key to the tumour. At early time points, the 'immune' and 'desmoplastic' populations dominated, yet at later stages, the third 'contractile' subset became more prevalent. Using a unique database of known ligand-receptor interactions, we investigated communication between different stromal and immune populations to reveal complex interplay between the 'immune' stromal subset, macrophages and T-cells, which ultimately contributed to T-cell dysfunction.

## **Results**

# Identification of immune and stromal populations within the developing tumour microenvironment

To reconstruct the immune composition of a developing tumour microenvironment, we injected B16-F10 melanoma cells into mice. At different time points (day 5, 8 and 11) during tumour development, specific immune populations were enriched for based on surface marker expression, and index sorted from both tumours and LNs. In this model, early day 5 tumours presented as barely palpable masses compared with late tumours at day 11 (Figure S1A). To avoid the biases associated with isolation of stromal cells, we also injected B16-F10 melanoma cells into CAG-EGFP mice, which exhibit widespread eGFP expression. This enabled a negative selection approach which did not rely upon expression of surface markers. Tumour and immune cells were removed by selecting GFP+ CD45- cells only, with the remaining stromal cells separated into CD31+ blood and lymphatic endothelial cells and CD31- stromal populations. Single cells were isolated from two animals per time point and profiled using Smart-seq2 (Figure 1A and Figure S1B).

After quality control (see Methods and Figure S1C), more than 4600 cells were sequenced. Using graph-based clustering (Satija et al., 2015) and known marker expression, numerous immune and stromal populations were identified (Figure 1B, C and Figure S1D). Interestingly, clusters denoting T cells, dendritic cells and endothelial cells, separated according to their location in either the tumour or lymph node, while other cell types clustered together irrespective of their site of origin. This indicates that particular populations possess site specific transcriptional programs (Figure 1B). Furthermore, sampling multiple time points across each site enabled us to investigate temporal adaptations within each population (Figure 1B).

We provide this data in a browsable format online at data.teichlab.org.

#### Dynamics of immune cells

The innate immune system has the ability to detect malignant cells and coordinate an antitumour response. Thus, we first sought to investigate relationships within these populations in both the primary tumour and draining lymph node. Clusters corresponding to natural killer cells (NK), plasmacytoid DCs (pDC) and conventional DCs (cDCs) as well as a mixture of macrophages, monocytes and neutrophils, were identified based on known markers. These included: Macrophages/Monocytes/Neutrophils, *Itgam* (Cd11b); *Adgre1*(F4/80); *Fcgr1*; *Ly6c*; *Ly6g*, NK *Ncr1*; pDCs, *Bst2*, *Siglech*; cDCs, *Itgax* (*Cd11c*) (Figures 2A, B, C and Supplementary Table 1). Moreover, multiple DC populations were observed that reflect classical DC (cDC) subsets, cDC1 and cDC2. cDC1 and cDC2 titles were assigned based on expression of known markers including *Cd11c*, *Clec9a*, *Baft3* (cDC1), *Cd11b*, *Fcgr1* and *Sirpa* (cDC2) (Figures 2B, C). Two further clusters were identified that lacked lineage markers for adaptive immune cells, as well as the classical DC integrins Cd11b and Cd11c, yet expressed DC transcription factors *Zbtb46*, *Baft3*, *Flt3*, *and Id2*. These populations were termed migratory DCs (migDC) owing to high levels of *Ccr7*, however, they may represent DC precursors that later develop expression of *Cd11c* (Figure S2A).

Strikingly, each DC population further separated according to their location in either the tumour or draining lymph node (Figure 2A). cDC1 cells in the tumour expressed the dermal marker Cd103 (Itgae), whereas their lymph node counterparts expressed Cd8a, a marker of lymph node resident populations, indicating these cells did not migrate from the tumour. Cd11b+ Mononuclear Phagocytes (MPs) in the LN consisted of Adgre1+ (F4/80) macrophages and Ccr2+ monocytes, as well as a resident Cd11c+ cDC2 population (Figure 2B). A comparison of equivalent tumour and lymph node clusters revealed that myeloid cells located in the tumour displayed a more activated phenotype. Tumour resident cells showed increased expression of costimulatory molecules Alcam, Pvr, Tnfsf9 (4-1BBL) and Tnfsf4 (OX-40L), as well as inflammatory cytokines  $III\beta$  and Tnf. However, tumour macrophages, cDC1 cells and migDCs were also more immunosuppressive, displaying higher levels of Arg1 (Arginase-1), Lgals9 (Galectin-9), Cd247 (Pdl1) and Pdcd1lg2 (Pdl2) respectively (Figure 2D). Although tumour macrophages expressed suppressive markers, no clear delineation between an M1 or the protumour M2 phenotype was observed (Figure S2B). Within the tumour, expression of immunosuppressive molecules, including Cd274 (PDL1) and Arg1 increased at later time points. This temporal change in expression was further confirmed at the protein level, within tumour Cd11b+ cells (Figures 2E and 2F). This indicates that tumour resident myeloid populations are present and activated at early stages of tumour growth, yet become more suppressive as the tumour progresses (Figure 2G). However, this phenomenon does not extend to the draining lymph node, suggesting a subdued inflammatory response at this site. This is particularly relevant in regard to cDC1 cells, which can cross-present tumour antigen to cytotoxic T lymphocytes.

T cell populations from tumours and draining lymph nodes were also transcriptionally distinct, clustering based upon their subtype and location (Figure 3A). At the lymph node, T cells exhibited a more naive phenotype compared to those present at the tumour (Figure 3B). While tumour resident CD4+ T cells were more activated, a significant proportion highly expressed Treg-associated genes at the tumour (Figure 3B). Similarly, within the CD8+ T cell compartment, those at the tumour were also more activated, expressing high levels of Ifng (IFNy), Prf1 (Perforin) and Gzmb (Granzyme B). However, these cells were also less functional, as evident by expression of *Pdcd1* (pd1), *Lag3* and *Tim3* (Figure 3B). To identify transcriptional adaptations in CD8+ T cells at the different stages of tumour development, we performed pseudotime analysis that revealed a trajectory of gene expression associated with functional changes in these cells. This confirmed that the majority of T cells within the lymph node were naive, displaying high expression of Sell and Tcf7 (Figures 3C and 3D and Supplementary Table 2). Arrival at the tumour corresponded with acquisition of activation signatures, including upregulation of Ifng (IFNy) and Gzmb (Granzyme B). Furthermore, T cell receptor sequencing analysis identified clonal expansion (Figures 3C), specifically within tumours at later time points. This was accompanied by expression of the proliferation marker Mki67 and exhaustion markers Pdcd1, Lag3 and Tim3 at the RNA level (Figures 3C and 3D), consistent with reports of cell differentiation from naive, through a transitional state, towards dysfunction in human melanoma (Li et al., 2019). Furthermore, a highly proliferative, early dysfunctional population, consistent with our proliferative exhausted population, was also observed in the same study (Li et al., 2019). Flow cytometry analysis confirmed enhanced tumour infiltrating CD8+ T cells with concurrent tumour-specific proliferation and increasing PD1 expression, at later time points (Figures 3E). A tumour-specific increase in Lag3 expression compared to lymph nodes was also detected at the protein level (Figure S2C). Interestingly, a subset of the potentially exhausted CD8<sup>+</sup>T cells also showed expression of Entpd1 (CD39), which was recently identified as a marker to distinguish tumour-specific and bystander CD8<sup>+</sup> T cells (Simoni et al., 2018). Together, these results indicate that T cell recruitment from the LN is followed by activation and subsequent functional defects in situ. These functional defects correspond with the gain of immunosuppressive properties in myeloid populations at later time points, indicating that the immune stroma transitions from immunogenic to suppressive phenotypes.

#### Tumour stroma comprise three distinct functional populations

As the stroma is emerging as a potent immune modulator, we also examined this compartment during tumour progression. We identified three distinct CD31- stromal populations, referred to as Stromal 1, 2 and 3 (Figure 4A and Supplementary Table 3). Expression of commonly used mesenchymal markers confirmed this identity, but as expected individual markers were extremely variable from cell to cell and across clusters (Figures 4B and S3A). However, marker combinations could be associated with particular clusters. Stromal 1(S1) was distinguished from Stromal 3 (S3) by high levels of *Pdpn*, *Pdgfra* and *Cd34*, while *Acta2* ( $\alpha$ SMA) was strongly expressed by the latter. Interestingly, Stromal 2 (S2) represented an intermediate population which expressed *Pdpn* and *Pdgfra*, yet displayed low expression of *Acta2* and *Cd34* (Figure 4B).

Each cluster displayed distinct functional signatures (Figures 4C, S3B), indicating the existence of specific roles within the tumour microenvironment. S1 (Pdpnhigh Pdgfrahigh Cd34<sup>high</sup>) likely engages in immune cross-talk; upregulating genes involved recruitment and regulation of immune cells. These included cytokines Cxcl12, Csf1 and Ccl8, cytokine receptors Il6ra and Il6st, as well as components of the complement cascade C3, C2 and C4b. In contrast, S2 (Pdpn<sup>high</sup> Pdgfra<sup>high</sup> Cd34<sup>low</sup>) upregulated genes encoding extracellular matrix (ECM) components, including numerous collagen family members, Postn and Tnc. These ECM components are strongly associated with a fibrotic matrix, a feature common to developed tumours (Bonnans et al., 2014) and implicated in immune exclusion. Thus, this population may drive the desmoplastic reaction. S3 (Acta2high) likely represents a more contractile stromal subset, expressing genes involved in regulation and rearrangement of the actin cytoskeleton. In particular, this cluster upregulated Rock1, Mlc2 and Mlck, which are responsible for the contraction of actin stress fibres. While all three stromal populations expressed fibroblast markers, indicating they represent melanoma CAFs, S3 also expressed some pericyte-associated markers such as Cspg4 (Ng2), Mcam and Rgs5 (Figure S3C). Many of the same markers were detected in lymph node Pdpn+ fibroblasts (FRCs) (Figure S3D), indicating promiscuous expression that is not limited to pericytes. Thus, to clarify whether S3 represents a pericyte or fibroblast population in murine melanoma, we examined the expression of αSMA and NG2 in relation to the endothelial marker CD31. While NG2+ and αSMA+ cells were observed surrounding vessels in adjacent skin, they were less frequently associated with intratumoural vessels. Furthermore, both markers could be detected in peritumoural spindle-shaped cells distinct from the vasculature (Figure S4A and B). Thus, the precise cellular identity of S3 remains elusive and may represent both pericytes associated with the vasculature and more 'fibroblast-like' cells that are dissociated from vessels.

Collection of samples at different time points across tumour growth enabled us to examine the dynamics of the stromal compartment as a tumour develops. Each population was detected throughout the time course, however, clusters dominated at different points. The stromal compartment from early day 5 tumours was primarily comprised of S1 and 2, whereas the S3 population was largely restricted to later stages, implying a selective enrichment in established tumours (Figure 4D-E). While cells within S1 resembled tissue resident fibroblasts of both mouse and human skin (Figure 4G), *Mki67* was observed specifically in S2 and 3, supporting the concept of proliferative enrichment at later time points (Figure 4F). Increasing proliferation in S3 was confirmed by incorporation of the thymidine analogue EdU (Figure S4C). Recruitment of bone marrow derived mesenchymal cells to the TME has also been reported (Direkze et al., 2004; Quante et al., 2011; Raz et al., 2018). To investigate if this alternate source contributes to expansion of S3, bone marrow chimeric mice were generated (Figure S4D). In our hands, few bone marrow-derived stromal cells (GFP+) were detected, suggesting a negligible influence on the tumour stromal niche in this model.

We next used the marker repertoires identified to validate these different populations in the tumour microenvironment. Consistent with our sequencing data, confocal imaging revealed that S1/2 markers PDPN and PDGFRα largely colocalised, while expression of αSMA was more distinct (Figure 5A). The 'immune' S1 marker CD34, colocalized with both PDPN and PDGFR $\alpha$ , indicating the presence of a CD34  $^{high}\alpha$ SMA  $^{low}$  stromal subset (Figure 5A). However, some colocalization between αSMA and PDGFRα, PDPN, as well as CD34 was observed. This may represent the intermediate PDPN<sup>high</sup> PDGFRα<sup>high</sup> S2 population, which also expressed low levels of CD34 and aSMA. Flow cytometry further confirmed the presence of CD34<sup>high</sup> αSMA<sup>low</sup> (S1), CD34<sup>low</sup> αSMA<sup>low</sup> (S2) in normal skin, and within tumours (Figure 5B and Figure S4E, F). In contrast, CD34low αSMAhigh (S3) were rare in normal skin, becoming most prevalent at later time points (Figure 5B and Figure S4E, F), in line with kinetics described in sequencing data. To explore the inflammatory phenotype associated with S1 in more detail, we focused on immune modulatory factors, CXCL12, CSF1 and complement component C3. At the protein level, intracellular CXCL12 expression was higher in S1 and S2 than S3 (Figure 5C). While S1 produced CXCL12, high levels were also detected on S2. However, the majority of this was surface-associated, indicative of extracellular binding specifically to this population (Figure S5A). In contrast, complement component C3 was consistently and predominantly detected in S1 cells across all time points examined (Figures 5C, S5B and C). Confocal imaging also showed CD34high CAFs to be a source of CSF1 in the tumour stroma (Figure 5D), but this was less specific at the protein level with staining detected in other stromal populations. Together, these data illustrate that the stromal compartment acquires the capacity to influence the tumour immune landscape from early stages of development and are dynamic, adapting to the changing requirements of a rapidly growing and evolving tumour (Figure 5E).

To determine if the identified populations are present in other tumour types, we examined models of murine breast and pancreatic cancer. In orthotopically implanted E0771 breast tumours, the stromal markers distinguishing S1, and 2 from S3 were largely conserved however, subtle differences in their distribution were detected. While PDPN and PDGFRa colocalised, we also observed some distinction between these markers, as well as a subset of CD34 single positive cells. However, aSMA expression remained more discrete (Figure 5F). In breast tumours, C3 expression was specific to CD34<sup>high</sup> αSMA<sup>low</sup> stromal cells at both early and late time points consistent with the melanoma model (Figure 5G and S5D and F, tumour volumes S5E). Reflecting the temporal dynamics seen in melanoma, αSMA<sup>high</sup> stromal populations dominated in advanced KPC pancreatic tumours, yet were absent in the normal pancreas. Conversely, pancreatic stellate cells were predominantly CD34<sup>high</sup> (Figure S5G-J). Publicly available RNA-seq data of KPC-derived CD34 positive and negative stromal populations further showed transcriptional signatures similar to S1 and S2/S3 populations respectively, as well as CD34<sup>+</sup>-specific C3 expression (Figures S5K and L). Taken together, these data indicate that major stromal subsets and associated products are preserved across tumour types, albeit with subtle tissue-derived differences.

#### Cross-talk between the 'immune' S1 population and infiltrating myeloid cells

Next, we sought to elucidate potential functional consequences of specific stromal populations to the ensuing immune response. Focussing on the early S1 "immune" subset, we examined cross-talk with responsive immune populations recruited to the tumour. To systematically study interactions within the tumour microenvironment, we predicted cell-cell communication networks based on CellPhoneDB, a manually curated repository of ligands, receptors and their interactions integrated with a statistical framework to infer enriched interactions from single-cell transcriptomic data (Vento-Tormo et al., 2018). This approach highlighted likely interactions involved in angiogenesis, immune cell recruitment and immune modulation between stromal populations in the tumour (Figure 6A, Supplementary Table 4).

Building on the observations of stromal-derived immunomodulatory factors CSF1, CXCL12 and C3, amongst others (Figure 5C, D), CellPhoneDB identified stromal-immune interactions

between C3/CXCL12/CSF1-expressing stromal cells and macrophages positive for C3AR1, CXCR4, and CSFR1 respectively (Figure 6A, B). Confocal imaging verified predicted interactions in the tumour stroma, illustrating CSFR1+, CXCR4+ and C3aR+ myeloid cells in close contact with CD34<sup>high</sup> fibroblasts (Figure 6C). The combination of transcriptome profiling and cell-cell communication pipeline enabled us to assign these immune interactions specifically to the S1/2 subpopulations. Further statistically significant chemokine-receptor interactions occured between the immune S1 subpopulation, myeloid, Treg and CD8<sup>+</sup> T cells (Figure 6A). Intratumoural myeloid populations exhibited the capacity to both attract T cells, via specific cytokine-receptor signals such as CXCL10, CCL22 and CCL5, and suppress their function through the PDL1-PD1 axis (Figure 6A). Our pipeline also predicted interactions between tumour infiltrating immune populations, including recruitment of NK cells through cDC1-cell derived chemokines receptors XCR1 (Böttcher et al., 2018). Moreover, we found that Tregs express high levels of Nt5e (CD73) and Entpd1 (CD39, Figure 6A and Figure 3B), which act together to convert ATP to adenosine, release of which has been shown to dampen the immune system (Vijayan et al., 2017). Their receptors Adora2a and Adora2b were found upregulated on migratory DCs and macrophages respectively.

Next, we exploited the resource created by our single cell data and interactions database to explore the functional role of the identified S1-produced candidates. While CXCL12 was expressed by stromal cells, it was also detected within other compartments, including tumour and endothelial cells (Figure 6D, S5A). In contrast, expression of C3, at the RNA and protein level, was specific to the S1 population even in the wider tumour context, and in multiple tumour types (Figures 6D and S5A, S5F). C3 is cleaved to form the anaphylatoxin C3a, which is known to regulate immune populations. Thus, we focused on the consequences of perturbing this C3a-C3aR S1-myeloid interaction within the developing tumour. Neutralization of C3a in established tumours significantly slowed growth compared with IgG controls (Figure 6E). Furthermore, anti-C3a-treated tumours contained fewer macrophages and more Ly6C<sup>+</sup> monocytes, specifically at day 6 - the point at which C3a-C3aR interactions were predicted to be key mediators of myeloid cell recruitment (Figure 6E). Although expression of the suppressive molecule PDL1 was not affected by anti-C3a treatment, the density of CD8<sup>+</sup> T cells (per mm<sup>3</sup>) increased at later time points of treated tumours. Similarly, antagonism of the C3a receptor with SB290157 also reduced macrophage infiltration while increasing the number of Ly6C<sup>+</sup> cells (Figure S6A-B). The inversion of F4/80+ macrophage and Ly6C+ monocyte numbers suggests that differentiation of infiltrating monocytes to macrophages may be inhibited upon neutralization of C3a. To corroborate that C3a disruption did not directly impact CD8 T cells, we confirmed expression of C3aR on both macrophages and Ly6C+ myeloid cells, but not T cells at the RNA and protein level (Figures 6B and S6D). This supports our sequencing data, indicating that recruitment of suppressive myeloid cells contributes towards CD8 T cell suppression. However, other T cell populations were unaffected by C3a neutralisation in the TME (Figure S6C). Thus, disrupting signalling between stromal cells and infiltrating myeloid populations has the potential to impact subsequent interactions between the innate and adaptive compartments and promote a better anti-tumour immune response.

Having identified stromal interactions conserved between murine tumours, we next examined human tumours for the same candidates. We subclustered the stromal compartment of a human melanoma dataset (Tirosh et al., 2016) and identified distinct populations with similar markers as our S1, 2 and 3 populations (Figures 7A, B). Significantly, amongst the potential immune-stromal interactions identified (Figure 7C), the specific C3a/C3aR interaction between S1 cells and macrophages was retained in human melanoma (Figure 7C and D). This interaction was further verified in human head and neck cancer in which the three stromal clusters were also present (Figure 7E-H). Together, these data indicate a more widespread conservation of CAF-macrophage cross-talk through the C3a/C3aR axis, that translates to multiple tumours and species. Finally, using different TCGA datasets we also demonstrated that in some cancer types, high C3 expression is associated with shorter progression-free survival (Figure S7).

Collectively, these findings provide fundamental insights into the complex interplay among cells within the evolving tumour microenvironment where multiple immunosuppressive mechanisms coexist (Figure 6F) and highlights the potential of comprehensive datasets to exploit and manipulate CAF-derived immune-modulatory factors found within an increasingly heterogeneous stromal compartment.

## **Discussion**

It is becoming increasingly evident that non-malignant stromal cells provide significant and varied supporting roles as tumours progress. The heterogeneity and dynamic nature of the tumour microenvironment can make identification of the roles of the different immune and stromal components challenging. The emergence of scRNA-seq has enabled deeper insights into tumour biology, revealing the true degree of intratumoural heterogeneity, not detectable by previous methods (Costa et al., 2018; Elyada et al., 2019; Puram et al., 2017; Tirosh et al., 2016). In this study, we used a single-cell transcriptomic approach to characterise the tumour landscape within the changing tumour microenvironment and associated lymph nodes. We identified the gradual development of a suppressive immune microenvironment, specifically in the tumour, as well as discrete stromal subsets with distinct functional signatures. Examination

of immune-stromal interactions using the CellPhoneDB database of receptor-ligand interactions (Vento-Tormo et al., 2018) highlighted the complexity of cross-talk between different components of the microenvironment. Importantly, these interactions were conserved in human tumour tissue.

The immune system, particularly T cells and macrophages, play key roles in deciding tumour fate and response to therapy (Angell et al., 2020; Galon and Bruni, 2020; Galon et al., 2006; Sato et al., 2005). Here we showed site-specific behaviour in tumour-associated tissues, identifying distinct gene signatures between populations of the tumour and draining lymph nodes. Pseudotime analysis illustrated that while lymph nodes act as a source of naive T cells, once at the tumour, T cells rapidly transitioned from the naive state, through clonal expansion and activation phases (enriched granzyme and IFN expression). As expected, in late stages of tumour growth, T cells upregulated exhaustion markers in late tumours (PD1 and Lag3). The presence of both proliferative and non-cycling exhausted populations indicates an intermediate dysfunctional state, whose exhaustion programs can be potentially reversed before differentiation to a terminally exhausted state (Blank et al., 2019). Similar to T cells, tumour myeloid populations were more activated than their lymph node counterparts. Coincident with the emergence of T cell dysfunction markers, myeloid cells increased expression of suppressive factors such as PDL1 and Arg1. Together, this indicates that, while lymph nodes acts as a T cell reservoir, activation occurs within the tumour itself, followed by onset of dysfunction markers and myeloid-driven exhaustion in late disease.

While infiltrating immune populations have a profound effect on tumour fate, stromal cells also play a key supporting role in the tumour microenvironment (Kalluri, 2016). However, the development of increasingly diverse populations may underpin conflicting reports regarding anti- vs. pro-tumour functions (Feig et al., 2013; Özdemir et al., 2015) making the identification, functional characterisation and tissue specific features underlying stromal divergence within tumours a priority. Our analysis revealed the existence of three stromal subsets; "immune", "desmoplastic" and "contractile", each possessing unique characteristics indicative of distinct and specialized roles during tumour development. These subsets fall in line with recent studies examining the ecosystem of human solid tumours (Bartoschek et al., 2018; Costa et al., 2018; Elyada et al., 2019; Lakins et al., 2018; Lambrechts et al., 2018; Li et al., 2017; Öhlund et al., 2017; Puram et al., 2017). While subtle tissue-specific differences in S1-associated cytokines and chemokines were seen across cancer types, our data showed C3 is specifically and consistently upregulated by CD34<sup>high</sup> populations in multiple mouse models and human datasets. Interestingly, and consistent with other studies, both S3 and lymph node FRCs shared some typical pericyte markers, such as Rgs5 (Costa et al., 2018; Cremasco et al.,

2018; Lambrechts et al., 2018). While this could imply pericyte contamination, S3 also produced significant amounts of matrix components such as *Col1a1*, *Col1a2* (*collagen1*) *Fn1* (*fibronectin1*) and *Sparc* which are strongly indicative of a fibroblast phenotype. Hence, S3 may embody a mixed population of mesenchymal cells that share similar surface marker expression and functional properties. Alternatively, fibroblasts within S3 may be derived from pericyte populations as has been observed during fibrosis and tumour development where, pericytes dissociate from vessels and adopt a myofibroblast phenotype (Chen et al., 2011; Hosaka et al., 2016; Lin et al., 2008; Mederacke et al., 2013),

Our data extends beyond classification of stromal subsets, providing insight into the kinetics of increasing functional divergence and heterogeneity as the tumour develops. The dominance of S1 and S2 at early time points, versus expansion of S3 at later stages are likely a result of events within the adjacent transforming environment, which alter the phenotype, secretory profiles of surrounding cells and tissue mechanics. Biophysical cues such as matrix rigidity are critical for the maintenance of CAF phenotypes and induction of αSMA expression(Calvo et al., 2013); (Arora et al., 1999; Li et al., 2007). Thus, consistent with inferences from our work and others, the combination of a remodelled and stiffened matrix by desmoplastic S2 fibroblasts and cytokine exposure may induce the expansion of 'contractile' S3 cells in developed tumours (Feig et al., 2013; Raz et al., 2018). For example, in late stage breast cancer, expansion of S3-like cells was accompanied by a decrease in matrix producing fibroblasts (Bartoschek et al., 2018). Such temporal changes may also be supported by recruitment of mesenchymal cells from the bone marrow (Raz et al., 2018), although this was not the case in B16. Overall, subtle differences in marker expression, functional properties and temporal dynamics of fibroblast populations likely reflects the local milieu of soluble factors, mechanical cues and environmental pressures unique to the tumour type and surrounding tissue at each stage of development.

Sequencing of matched immune and stromal populations enabled us to investigate signalling between different compartments in the tumour microenvironment and highlighted the C3a-C3ar1 axis in S1-myeloid cross-talk. C3 was produced most specifically by CD34<sup>high</sup> S1 cells, and relevant to the clinic, CD34<sup>high</sup> CAFs also represented the primary source of C3 in human melanoma and head and neck cancer (Puram et al., 2017; Tirosh et al., 2016). Elevated C3 and C3a have been detected at the primary tumour and in the serum of several solid cancers and are associated with poor prognosis in ovarian cancer (Canales et al., 2014; Chen et al., 2013; Cho et al., 2014; Gast et al., 2009; Habermann et al., 2006). Such results have led to a growing interest in the role of complement activation in cancer, yet, little investigation into the source of complement components has been performed. The specific production of C3 by

CD34<sup>high</sup> CAFs indicates that this fibroblast subset may offer a therapeutic target or biomarker application in multiple cancer types. Indeed, disruption of C3a-C3aR in tumour-bearing mice slowed tumour growth and reduced infiltrating F4/80+ macrophages, consistent with studies inhibiting tissue regeneration (Nabizadeh et al., 2016; Zhang et al., 2017). Concurrently, we observed an increase of Ly6C<sup>+</sup> monocytes, indicating that macrophages are derived from recruited monocytes and supports a critical role for C3a in monocyte differentiation. The effects observed coincided with increased CD8 T cell numbers per mm<sup>3</sup> at later time points. While inhibition of C3a signalling has been reported to affect T cell phenotypes, we did not detect C3aR on their surface (Kwan et al., 2013; Martin et al., 1997; Quell et al., 2017; Strainic et al., 2013; van der Touw et al., 2013). Thus, alterations in the T cell composition upon C3a neutralisation are potentially induced by changes in myeloid populations, implying that recruitment of macrophages and their products can influence T cell infiltration and behaviour. Current trials are investigating the efficacy of (human-specific) small molecule inhibitor Compstatin and its derivatives (AMY-101 and APL2) which prevents C3 cleavage (Harris, 2018) may be of interest for tumour therapy in the context of CD34<sup>high</sup> CAFs. Furthermore, owing to their role in immune regulation, complement therapies have been combined with checkpoint inhibitors (Ajona et al., 2017; Corrales et al., 2012; Markiewski et al., 2008). Thus, it is possible that the stromal driven inhibitory effects we observed upon neutralization of C3a may be enhanced if given in combination with immunotherapies.

In summary, we have demonstrated the power of scRNAseq to define the landscape of the tumour microenvironment, and serve as a resource for identifying candidates with therapeutic potential. We identified three stromal clusters with distinct functional and temporal features, highlighting the dynamic and adaptive nature of both immune and stromal populations to reveal potential cross-talk between these two compartments. By supporting recruitment and induction of an immunosuppressive macrophage phenotype, the "immune" stromal subset may provide an alternative, indirect mechanism to dampen T cell mediated anti-tumour immunity.

#### **Acknowledgments**

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#### **Author contributions**

S.A.T, J.D.S and B.M conceived the study. S.D, A.R, B.M, J.D.S and J.P performed the mouse experiments, sample/library preparation and histology staining. M.E and S.D analysed the

data and interpreted the results with contributions from J.H, G.K, S.A.T, J.D.S, and R.V.T.. T.H and X.C performed the sample/library preparation for the healthy mouse skin samples. S.D, M.E, J.D.S and S.A.T wrote the manuscript. S.A.T and J.D.S co-directed the study. All authors read and accepted the manuscript.

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**Declarations of Interest:** The authors declare no competing Interests

# **Figure Legends**

Figure 1. Distinction of melanoma stromal populations with single-cell RNA-seq. (A) Overview of experimental and sequencing workflow. (B) tSNE visualisation of all cells sequenced with each cell colour coded for; cell type (left), site of origin (middle), time (right). (C) Expression of marker genes for each cell type. n = 32 mice. NK, natural killer; migDC, migratory DC; DC LN, lymph node dendritic cell, cDC1/2, conventional dendritic cell; pDC, plasmacytoid DC; MAIT, Mucosal-associated invariant T cell; Endo lymph, lymphatic endothelial cell; Endo tumour, tumour endothelial cells; endo LN, lymph node endothelium; fibroblast LN, lymph node fibroblast.

Figure 2. Myeloid cell clusters in the tumour exhibit suppressive characteristics. (A) tSNE plot of individual myeloid cells colored by site (tumour, dark grey; lymph node, light grey) and clusters marked by coloured lines. (B) tSNE plots showing expression of selected marker genes for macrophages and inflammatory and resident monocytes. (C) Violin plots showing expression of selected surface marker genes within each cell cluster displayed as Log (TPM+1). (D) Heatmap showing mean expression (Log(TPM+1)) of co-stimulatory and suppressive genes for the identified cell clusters. (E) Heatmap showing relative expression (z-score) of co-stimulatory and suppressive genes in all innate immune cells over time. (F) Flow cytometric analysis of tumour infiltrating CD11b+ cells for expression of suppressive markers PDL1 and Arg 1 at days 6 and 11. Data presented as mean ± SEM, day 6 n = 12 independent mice and day 11 = 11 independent mice. \*\*\*\*P<0.0001 (T test). (G) Schematic diagram of the costimulatory and inhibitory receptors/ligands expressed on distinct myeloid subpopulations.

For A, B, C, D, E, G, n = 17 mice. migDC, migratory DC; DC LN, lymph node dendritic cell, cDC1/2, conventional dendritic cell; pDC, plasmacytoid DC; MP, mononuclear phagocyte.

**Figure 3. T cells recruited from lymph nodes are activated** *in situ.* **(A)** tSNE plot of individual T cells colored by site (tumour, dark grey; lymph node, light grey) and annotated subpopulations marked by coloured lines. **(B)** Heatmap showing relative expression (z-score) of functional gene groups for cell clusters. **(C)** Pseudotime analysis of CD8+ T cell gene trajectories coloured by site (left), clonal expansion (middle) and tumour stage (days, right), arrow indicates time direction. **(D)** Expression of activation-associated genes along the inferred pseudotime coloured by site; lymph node (green), Tumour (blue). For A, B, C, D n = 10 mice. **(E)** Flow cytometric analysis of T cells isolated from skin and day 5 and 11 tumours, as well as their draining lymph nodes. The number of CD8+ cells was quantified, as well as proliferation (Ki67) and PD1 expression. Data presented as mean ± SEM, n=4 independent mice for each condition. \* P<0.05, \*\*\* P<0.001, \*\*\*\*P<0.0001 (Two way anova with a Sidak post-hoc test).

Figure 4. Distinct fibroblast clusters identified in melanoma tumours. (A) tSNE plot of sequenced CD31- stromal cells from tumours coloured by their associated cluster. (B) Heatmap showing average expression (Log(TPM+1)) of typical mesenchymal markers. (C) Heatmap of GO pathways for differentially expressed genes in each cluster; including cytokine-chemokine receptor interactions, complement cascade, Extracellular matrix interactions and actin cytoskeleton. Columns represent individual cells, rows display z scores. (D) Sequencing data represented as a bar plot, depicting the ratio of stromal populations at each time point examined. The size of each coloured bar is proportional to the percentage of total stromal cells each population represents. Data presented as mean ± SEM, n=7 mice. \* P<0.05 (Two way anova with Tukey post-hoc test). (E) tSNE plot of sequenced fibroblasts from tumours by tumour time point (right). (F) tSNE visualisation of the proliferation marker Mki67 in the CAFs. (G) Heatmap depicting logistic regression analysis of normal mouse skin, indicating which of the 3 stromal clusters these cells are most similar. scRNA-seq of melanoma samples, n = 7 mice. scRNA-seq of healthy murine skin samples, n = 2 mice. scRNA-seq of healthy human skin, n = 1 sample.

Figure 5. Conservation of fibroblast subpopulations between murine tumour types. (A) Representative confocal images of PDPN, PDGFR $\alpha$  and  $\alpha$ SMA in combination, or CD34 in combination with either PDPN PDGFR $\alpha$  or  $\alpha$ SMA (right panel) in day 5 and day 11 tumours. Dashed line indicates the tumour border. Scale bars 100um and images represent at least n=3 independent mice. (B) Flow cytometry quantification of the proportion of each stromal

population at day 5 and day 11 tumours, displayed as a percentage of the total stromal population. (C) Flow cytometric quantification of intracellular CXCL12 and C3 expression in each population presented as fold change in mean fluorescence at day 11, normalised to the CD34<sup>high</sup> αSMA<sup>low</sup>population. **(D)** Representative confocal images of CSF1 expression in CD34+ stromal populations in day 5 and day 11 tumours. Scale bars 50um and images represent at least n=2 independent mice. (E) Schematic diagram of the three stromal subpopulations. (F) Representative confocal images of stromal population markers in orthotopic E0771 breast tumours. 16. Representative confocal images of PDPN, PDGFRα and αSMA in combination (top panel) or CD34 in combination with either PDPN PDGFRα or αSMA (bottom panel). Dashed line indicates the tumour border. \* indicates colocalization between CD34 and PDPN or PDGFRa, arrowhead indicates CD34 expression that is distinct from PDPN or PDGFRα. Scale bars 100μm and images represent at least n=3 independent mice. (G) Flow cytometric quantification of intracellular C3 expression in each E0771 breast stromal population presented as fold change in mean fluorescence of at day 16 normalised to the CD34<sup>high</sup> αSMA<sup>low</sup>. Each point represents a tumour. Data presented as mean ± SEM. \* P<0.05, \*\* P<0.01, \*\*\* P<0.001, \*\*\*\* P<0.0001, One way anova with a Tukey post-hoc test,(C) Skin n = 8 mice, day 5 n = 25 mice, day 11 n = 30 mice. (C) CXCL12 n = 42 tumours, C3 n = 12 tumours. (G) n = 8 independent mice.

Figure 6. Stromal-immune crosstalk supports the development of an immune suppressive niche. (A) Overview of selected statistically significant interactions between stromal subsets and other cell types using a cell-cell communication pipeline based on CellPhoneDB. Size indicates p-values (permutation test, see STAR Methods) and colour indicates the means of the receptor/ligand pairs between two clusters. (B) Violin plots displaying expression log(TPM+1) of ligands Cxcl12, Csf1, C3 and cognate receptors Cxcr4, Csf1r, C3ar1on respective stromal populations. n = 26 mice. (C) Confocal images of representative tumour-tissue borders. CXCR4, CSFR1 or C3aR expressing macrophages located proximally to CD34+ CAFs (green, F4/80; red, CXCR4,CSF1R or C3aR; white, PDPN; blue CD34. Scale bars, 50um. (D) Flow cytometric quantification of CXCL12 and C3 expression across compartments of the tumour microenvironment. Each point represents a tumour. (E) In vivo blockade of C3a in established tumours. Top left: Experimental design and treatment reguim; top right: Tumour volume (mm<sup>3</sup>) of mice treated with IgG control (blue) or anti-C3a (red); bottom left: myeloid infiltration in day 6 tumours, after 24hs of treatment with IgG or anti-C3a. The number of F4/80 and Ly6C+ Ly6G- cells are shown as a % of Cd11b and CD45 cells respectively; bottom right: The number of tumour infiltrating CD8+ T-cells at day 11, displayed as raw counts normalised to tumour volume (mm<sup>3</sup>). Data presented as mean ± SEM, (D) CXCL12 n = 42 tumours, C3 n = 12 tumours. (E) n = minimum 13 mice. \*\* P<0.01, \*\*\* P<0.001, \*\*\*\* P<0.0001 ((D) One way anova with Tukey post-hoc test, (E) T-test. **(F)** Schematic diagram of the dynamic cross-talk identified within the tumour microenvironment.

Figure 7. Similar stromal populations and C3/C3aR interactions are conserved in human melanoma and head and neck cancer. Publically available single cell sequencing data from human melanoma and head and neck cancer was downloaded and analysed. (A) tSNE plots of sequenced populations for melanoma. (B) Heatmap depicting stromal subsets 1-3 defined by similar markers and functional features to murine melanoma dataset. Heatmap displays expression (z scores, blue to red) of key markers and cytokines across stormal clusters identified in human melanoma. (C) Overview of statistically significant interactions between stromal subsets and other cell types using the CellPhoneDB pipeline. Size indicates p-values and colour indicates the means of the receptor/ligand pairs between two clusters. (D) Violin plots displaying conserved expression log(TPM+1) of C3 and cognate receptor C3ar1 on respective stromal populations in human melanoma. n = 19 patient samples. (E) tSNE plots of sequenced populations for human head and neck cancer. (F) Heatmap depicting stromal subsets 1-3 defined by similar markers and functional features to murine melanoma dataset. Heatmap displays expression (z scores, blue to red) of key markers and cytokines across stromal clusters identified in human head and neck cancer. (G) Statistically significant interactions between stromal subsets and other cell types using the CellPhoneDB pipeline. Size indicates p-values and colour indicates the means of the receptor/ligand pairs between two clusters. (H) Violin plots displaying conserved expression log(TPM+1) of C3 and cognate receptor C3ar1 on stromal populations in human head and neck cancer. n = 18 patients samples.

## **STAR Methods**

#### **Key Resources Table**

REAGENT or RESOURCE	SOURCE	IDENTIFIER		
Chemicals, Peptides, and Recombinant Proteins				
Anti C3a	Hycult Biotech	cat# HM1072-100UG		
SB 290157	Sigma	cat# 559410		
Antibodies				
Rat CD45 APC-Cy7	Biolegend	Cat# 103116,		
		RRID:AB_312981		
Rat CD45 FITC	Biolegend	Cat# 103108,		
		RRID:AB_312973		

Rat CD45 BV785	Biolegend	Cat# 103149,
		RRID:AB_2564590
Rat CD31 PE-Cy7	eBioscience	Cat# 102417,
		RRID:AB_830756
Rat CD31 biotin	eBioscience	Cat# 102503,
		RRID:AB_312910
Syrian Hamster PDPN	Biolegend	Cat# 127410,
APC		RRID:AB_10613649
Armenian Hamster CD3e	Biolegend	Cat# 100321,
488		RRID:AB_389300
Armenian Hamster CD3e	Biolegend	Cat# 100308,
PE		RRID:AB_312673
Mouse NK1.1 PE	Biolegend	Cat# 108707,
		RRID:AB_313394
Rat CD4 PE-Cy7	Biolegend	Cat# 100422,
		RRID:AB_312707
Rat CD8a 780	Biolegend	Cat# 100714,
		RRID:AB_312753
Rat CD8a BV-785	Biolegend	Cat# 100749,
		RRID:AB_11218801
Rat CD8a PE	Biolegend	Cat# 100708,
		RRID:AB_312747
Rat FOXP3 PerCp Cy5.5	eBioscience	Cat# 45-5773-82,
		RRID:AB_914351
Rat Lag3 Biotin	Biolegend	Cat# 125205,
		RRID:AB_961177
Rat PDL1 PE-Cy7	Biolegend	Cat# 124314,
		RRID:AB_10643573
Rat PDL1 APC	Biolegend	Cat# 124312,
		RRID:AB_10612741
Rat Arginase 1 APC	eBioscience	Cat# 17-3697-82,
		RRID:AB_2734835
Rat PD1 APC	Biolegend	Cat# 109112,
		RRID:AB_10612938
Rat Ki67	Biolegend	Cat# 652418,
		RRID:AB_2564269

Rat IL-7Ra APC	Biolegend	Cat# 135011,
		RRID:AB_1937217
Rat B220 488	Biolegend	Cat# 103228,
		RRID:AB_492874
Rat CD11b APC-Cy7	Biolegend	Cat# 101226,
		RRID:AB_830642)
Rat CD11b 647	Biolegend	Cat# 101218,
		RRID:AB_389327
Armenian Hamster	Biolegend	Cat# 117318,
CD11c PE-Cy7		RRID:AB_493568
Rat Ly6C FITC	BD Pharmingen	Cat# 561085,
		RRID:AB_10584332
Rat Ly6G PE-Cy7	Biolegend	Cat# 127617,
		RRID:AB_1877262
Rat F4/80 FITC	eBioscience	Cat# 11-4801-82,
		RRID:AB_2637191
Rat F4/80 APC-	eBioscience	Cat# 47-4801-82,
eFluor780		RRID:AB_2735036
Mouse aSMA 488	Thermo Fisher	Cat# 53-9760-82,
		RRID:AB_2574461
Mouse aSMA eFluor570	Thermo Fisher	Cat# 41-9760-82,
		RRID:AB_2573631)
Rat PDGFRa Biotin	Biolegend	Cat# 135910,
		RRID:AB_2043974
Rat PDGFRb Biotin	Biolegend	Cat# 136010,
		RRID:AB_2236916
Rat Thy1 APC-Cy7	Biolegend	Cat# 105328,
		RRID:AB_10613293
Armenian Hamster CD34	Biolegend	Cat# 119310,
APC		RRID:AB_1236469
Rat CD34 660	eBioscience	Cat# 50-0341-82,
		RRID:AB_10596826
Mouse CXCL12 PE	R&D Systems	Cat# IC350C,
		RRID:AB_1964552
Rat C3 PE	Novus	NB200-540PE

Syrian Hamster PDPN	Biolegend	Cat# 127402,		
		RRID:AB_1089187		
Rabbit αSMA	abcam	Cat# ab5694,		
		RRID:AB_2223021		
Goat PDGFRα	R&D Systems	Cat# AF1062,		
		RRID:AB_2236897		
Rat CD34	eBioscience	Cat# 14-0341-82,		
		RRID:AB_467210		
Rat CD34 488	eBioscience	Cat# 11-0341-82,		
		RRID:AB_465021		
Rat F4/80	AbDserotech	Cat# MCA497,		
		RRID:AB_2098196		
Rat F4/80 488	AbDserotech	Cat# MCA497A488T,		
		RRID:AB_1102554		
Rat CXCR4	R & D Systems	Cat# MAB21651,		
		RRID:AB_2261636		
Sheep CSFR1	R & D Systems	Cat# AF3818,		
		RRID:AB_884158		
Rabbit CSF1	ABGENT	ABO12249		
Rabbit NG2	abcam	Cat# ab83178,		
		RRID:AB_10672215		
Rat CD31	Biolegend	Cat# 102502,		
		RRID:AB_312909		
Rabbit C3aR	Invitrogen	Cat# PA5-29979,		
		RRID:AB_2547453		
Rat Ly6C APC	BD Pharmingen	Cat# 560595,		
		RRID:AB_1727554		
Rat Cd11b biotin	Biolegend	Cat# 101204,		
		RRID:AB_312787		
Experimental Models: Cell Li	ines			
B16.F10 melanoma cell line	American Type Culture	ATCC Cat# CRL-6475,		
	Collection (ATCC)	RRID:CVCL_0159		
E0771 breast cancer cell	CH3 BioSystems	Cat# 94A001		
line		RRID:CVCL_GR23		
Experimental Models: Organisms/Strains				
Mouse C57BL/6	Harlan	Reference# 057		

Mouse C57BL/6-Tg(CAG-	Jackson Laboratory	Stock# 003291
EGFP)131Osb/LeySopJ		
Deposited Data		
scRNA-seq	This paper	ArrayExpress (E-MTAB- 7427)
scRNA-seq	This paper	ArrayExpress (E-MTAB-
		7417)
Software and Algorithms		
Salmon (version 0.8.2)	(Patro et al., 2017)	https://combine- lab.github.io/salmon/
R version	R Foundation	https://www.r-project.org
Seurat (version 2.3.4)	(Satija et al., 2015)	https://satijalab.org/seurat/
Monocle (version 2.8.0)	(Qiu et al., 2017)	http://cole-trapnell- lab.github.io/monocle- release/
TraCeR	(Stubbington et al., 2016)	https://github.com/teichlab/tr acer
gprofiler	(Raudvere et al., 2019)	https://biit.cs.ut.ee/gprofiler/ gost
scran	(Scialdone et al., 2015)	https://bioconductor.org/pac kages/release/bioc/html/scr an.html
CellPhoneDB	(Vento-Tormo et al., 2018)	https://www.cellphonedb.org
CellRanger (version 2.2.0)	10x Genomics	http://www.10xgenomics.com
Python	Python Software Foundation	https://www.python.org/
DESeq2	(Love et al., 2014)	https://bioconductor.org/pac kages/release/bioc/html/DE Seq2.html
Other Datasets		
scRNA-seq	(Hagai et al., 2018)	ArrayExpress (E-MTAB-
		6831)
Bulk RNA-seq	(Feig et al., 2013; Özdemir	GEO (GSE42605)
	et al., 2015)	
scRNA-seq	(Tirosh et al., 2016)	GEO (GSE72056)
scRNA-seq	(Puram et al., 2017)	GEO (GSE103322)
TCGA normalised	TCGA	R package TCGAbiolinks
expression data	(Colaprico et al., 2016)	released under GPLv3 License
		http://bioconductor.org/pack ages/TCGAbiolinks/
Survival data	TCGA, ICGC	cBio Cancer Genomics
	(Cerami et al., 2012; Gao J).	Open Portal <a href="http://cbioportal.org">http://cbioportal.org</a>

#### LEAD CONTACT AND MATERIALS AVAILABILITY

Further information and requests for resources and reagents should be directed to and will be fulfilled by the Lead Contact, Jacqueline D Shields (js970@mrc-cu.cam.ac.uk)

#### **EXPERIMENTAL MODEL AND SUBJECT DETAILS**

#### **Cell lines**

All cell lines were cultured according to protocols provided by the suppliers. The C57BL/6 derived B16.F10 melanoma cell line was purchased from American Type Culture Collection (ATCC) and cultured in Dulbecco's Modified Eagle medium (DMEM, Life Technologies), supplemented with 1% Penstrep and 10% FBS. 2.5 x10<sup>5</sup>. The E0771 breast cancer cell line was purchased from CH3 BioSystems and cultured in RPMI (Sigma) supplemented with 10% FBS, 1% PS and 10mM HEPES. Cells were maintained at 37°C in 5% CO2 in a humidified incubator and passaged every 3 days.

#### Mice

Animals were housed in accordance with UK regulations and experiments were performed under project licences PPL 80/2574 or PPL P8837835. Wild type (WT) C57BL/6 mice, or C57BL/6-Tg(CAG-EGFP)131Osb/LeySopJ mice (Stock number 003291, Jackson Laboratory) were socially housed in individually ventilated cages with cage enrichment. Routine husbandry and care was performed by ARES facility staff in line with institutional guidelines. To generate chimeric mice, bone marrow was extracted from the femurs and tibias of CAG-EGFP mice. 20x10<sup>5</sup> bone marrow cells were injected intravenous (IV) into WT C57BL/6 irradiated mice (irradiated with 2x 5 Gray doses). Blood from chimeric mice was tested for bone marrow reconstitution before establishment of B16.F10 tumours. Sample sizes were calculated based on previous experience and a priori power analysis (G\* Power). Animals recruited to studies remained socially housed in individually ventilated cages with cage enrichment and were not involved in prior regulated procedures. Animals were randomly assigned to experimental groups, and where possible, technicians performing the experiment were blinded to experimental groups and treatments.

#### Orthotopic syngeneic tumour models

B16 cells were subcutaneously injected into the shoulders of either 8 week old female immune competent wild type (WT) C57BL/6 mice, or C57BL/6-Tg(CAG-EGFP)131Osb/LeySopJ mice (Jackson Laboratory). Animals were sacrificed and tissues collected for analysis at various time points. For breast tumours, 2.5 x10<sup>5</sup> E0771 cells were injected into the 4th inguinal

mammary fat pad of 8 week old female C57BL/6 mice. Tumours were collected after 8 and 16 days of tumour development, whereas the fat pad itself was collected from non-tumour bearing mice.

#### **Neutralising C3a/C3aR in vivo**

B16.F10 shoulder allografts were allowed to develop for 5 days before treatment. Mice received 3 intraperitoneal (IP) injections of  $10\mu g/ml$  anti-C3a (HyCult Biotech, clone: 3/11) or IgG2a control (BioXCell, clone 2A3) 5, 7 and 9 days after tumour induction. Animals were randomised and technicians undertaking procedures were blinded to treatment groups. Animals were sacrificed 6 days (24hs after the first treatment) and 11 days post tumour induction and tumours isolated. Blood was collected by cardiac puncture and kept in capped EDTA tubes at RT before processing. Non-invasive tumour measurements were recorded daily and volumes calculated using the following formula ( $\pi/6$ )(shortest length\*longest length)<sup>2</sup>. Data points from all animals were included unless tumours failed to form following technical issues with injection of cells. For C3aR antagonism,  $100\mu g$  (5% DMSO in PBS) of the small molecule SB290157 (Sigma) or vehicle control, was injected IP at either day 4 and 6 or day 8 and 10 into B16-F10 tumour bearing mice. Blood and tumour samples were collected 11 days post induction, as previously described.

#### **EdU Incorporation**

Tumour and non tumour bearing mice were injected IP with 200µl pf 500µg/ml 5-ethynyl-2'-deoxyuridine (EdU), at 48 and 24hs prior to culling. Skin form wt mice, as well as day 5 and day 11 tumours were collected for flow cytometry. Samples were processed and surface markers stained as previously described. Cells were fixed in 4% PFA (15mins) and permeabilised with saponin buffer (15mins). The Click-iT reaction was performed according to manufacturer's instructions, using the EdU Click-it Alexa Fluor 488 imaging kit (Invitrogen), before staining for intracellular targets was performed.

#### DATA AND SOFTWARE AVAILABILITY

The raw sequencing data for the melanoma model has been deposited in ArrayExpress (E-MTAB-7427) and the count table can be downloaded from https://www.ebi.ac.uk/gxa/sc/experiments/E-EHCA-2/Results. We have also made this data available for online browsing with a user-friendly interface at data.teichlab.org. The mouse skin data from healthy mice was deposited in ArrayExpress (E-MTAB-7417). Other data is available from the corresponding author on reasonable request. The human skin fibroblast data was downloaded from ArrayExpress (E-MTAB-6831)(Hagai

et al., 2018). Bulk RNA seq data of sorted fibroblasts from KPC tumours and normal pancreas was downloaded from GEO (GSE42605). The processed human melanoma dataset (Tirosh et al., 2016) and human head and neck cancer dataset (Puram et al., 2017) were downloaded from GEO (GSE72056, and GSE103322). The TCGA normalised expression data was downloaded using the R package TCGAbiolinks (Colaprico et al., 2016). The clinical data was downloaded from the cBioPortal (Cerami et al., 2012; Gao J).

#### **METHODS DETAILS**

#### **Tissue Processing**

Tumours were mechanically dissociated and digested in 1mg/ml collagenase D (Roche), 1mg/ml collagenase A (Roche) and 0.4mg/ml DNase (Roche) in PBS, at 37°C for 2hs. Lymph nodes were mechanically dissociated and digested with 1mg/ml collagenase A (Roche) and 0.4mg/ml DNase (Roche) in PBS, at 37°C. After 30 mins, Collagenase D (Roche) was added (final concentration of 1mg/ml) to lymph node samples and digestion was continued for a further 30 mins. EDTA was added to all samples to neutralise collagenase activity (final concentration (5mM) and digested tissues were passed through 70µm filters (Flacon) ready for staining. 5ml of Red Blood Cell Lysis (RBC) lysis buffer (150mM NH<sub>4</sub>Cl, 1mM KHCO<sub>3</sub>, 0.1mM EDTA) was added to blood samples for 5 mins and neutralized with 45ml of PBS.

#### **Isolation of Single Cells**

Single cells were isolated from processed tissues using fluorescence-activated cell sorting (FACS). Once processed, samples were incubated with a fixable fluorescent viability stain (Life Technologies) for 20mins (diluted 1:1000 in PBS) prior to incubation with conjugated primary antibodies for 30 mins at 4°C. Antibodies were diluted 1:300 in PBS 0.5% BSA. Stained samples were index sorted, using the BD influx flow cytometer system, Single-cells were sorted in 2µl of Lysis Buffer (1:20 solution of RNase Inhibitor (Clontech, cat. no. 2313A) in 0.2% v/v Triton X-100 (Sigma-Aldrich, cat. no. T9284)) in 96 well plates, spun down and immediately frozen at -80 degrees.

#### Preparation of cDNA and sequencing

Reverse transcription and cDNA pre-amplification were performed according to the SmartSeq2 protocol (Picelli et al., 2014) to obtain mRNA libraries from single-cells. Oligo-dT primer, dNTPs (ThermoFisher, cat. no. 10319879) and an ERCC RNA Spike-In Mix (1:50,000,000 final dilution, Ambion, cat. no. 4456740) were then added. Reverse Transcription and PCR were performed as previously published (Picelli et al., 2014), using 50U of SMARTScribe™ Reverse Transcriptase (Clontech, cat. no. 639538). cDNA libraries

were prepared using the Nextera XT DNA Sample Preparation Kit (Illumina, cat. no. FC-131-1096), according to the protocol supplied by Fluidigm (PN 100-5950 B1). Single cell libraries were pooled, purified using AMPure XP beads (Beckman Coulter) and sequenced on an Illumina HiSeq 2500 aiming for an average depth of 1 Million reads/cell (paired-end 100-bp reads).

#### Flow Cytometry

Following a 20min incubation with a fixable fluorescent viability stain (see isolation of single cells), cells were incubated with primary antibodies, against cell surface markers, for 30mins at 4°C. Primary antibodies were diluted 1:300 in PBS 0.5% BSA according to STAR Methods. When analysing immune cells, surface antibodies were diluted in a 50/50 mix of PBS 0.5% BSA and 2.4G2 FC Blocker (hybridoma supernatant generated in-house). If required, fluorescently labelled streptavidin, diluted 1:300 in PBS 0.5%BSA, was added for a further 30mins. To stain for intracellular targets samples were fixed and permeabilized using the FOXP3 permeabilisation and fixation kit (eBioscence), for 1h at RT. Fixation and permeabilization was only performed once staining for surface markers was completed. Once samples were fixed, antibodies were diluted in a perm buffer from the FOXP3 permeabilisation and fixation kit, prepared according to manufacturer's instructions. Brefeldin-A (BFA, Biolegend) was used to investigate intracellular cytokine expression. BFA was added to the tissue digestion mix (1:1000) and samples were digested for 1h 30mins. After processing to a single cell suspension, samples were further incubated with BFA in media (1:1000 in DMEM 10% FBS) at 37°C for 2hs 30mins. Once staining was completed, samples were analysed using the BD LSR-Fortessa system.

#### **Immunofluorescence**

Collected tissues were embedded in OCT medium (VWR) and snap frozen on dry ice. Frozen tissues were sectioned into 10 $\mu$ m slices and stored at -80°C. Sections were air dried and fixed in 50:50 acetone (Fluka): methanol (Fisher), at -20°C for 2mins or 4% paraformaldehyde (PFA) for 10 minutes at RT. If fixed with PFA, samples were permeabilized with 0.1 % Triton for a further 10 minutes. After blocking for 1h at room temperature (RT) with blocking buffer (10% chicken serum and 2% Bovine Serum Albumin) in PBS, primary antibodies were applied overnight at 4°C or RT for 3hs. To visualise samples, secondary antibodies (Life Technologies), conjugated to either Alexa Fluor 488, 594 or 647, or fluorescently labelled streptavidin, were added for 2hs at RT. Samples were incubated with the nuclear stain 4',6-diamidino-2-phenylindole (DAPI) for 10 mins at 1 $\mu$ g/ml, before mounting with ProLong Gold (ThermoFisher) liquid mountant. Streptavidin and secondary antibodies were diluted 1:300 in blocking buffer and primary antibodies (STAR Methods) were diluted in blocking buffer (for

PDPN, CD31, CD11b biotin and F4/80, 1:100; for CD34 488, C3aR, F4/80 488 and Ly6C APC 1:20; for all other antibodies 1:50). Confocal imaging was performed using the Zeiss LSM 880 microscope and processed using the Zeiss Blue software. ROIs from 63x tile scans were included to show the presence of stromal components in sufficient detail.

#### **QUANTIFICATION AND STATISTICAL ANALYSIS**

Parameters such as sample size, measures of center, dispersion and precision (mean + SD or SEM) and statistical significance are reported in text, Figures and Figure Legends. Results were considered statistically significant when p < 0.05, by the appropriate test, as indicated in the text and Figure Legends.

#### Single-cell RNA sequencing analysis

The SmartSeq2 data was quantified with Salmon(Patro et al., 2017) (version 0.8.2), using the GENCODE mouse protein-coding transcript sequences. Transcript Per Million (TPM) values reported by Salmon were used for the quality control of the samples. In order to get the endogenous TPM values, we removed the ERCC's from the expression table and scaled the TPM's so that they sum to a million. Cells with less than 1500 detected genes and for which the total mitochondrial expression exceeded 20% were excluded from further analysis. Genes that were expressed in less than 3 cells were also removed.

Downstream analysis, such as SNN graph-based clustering, differential expression analysis and visualisation were performed using the Seurat package(Satija et al., 2015) (version 2.3.4) implemented in R. Clusters were identified using the community identification algorithm as implemented in the Seurat "FindClusters" function. The shared nearest neighbour graph was constructed using between 10 and 30 principal components as determined by the dataset variability; the resolution parameter to find the resulting number of clusters was tuned so that it produced a number of clusters large enough to capture most of the biological variability. Differential expression analysis was performed based on the Wilcoxon rank sum test. Clusters were annotated using canonical cell type markers. Two clusters of dDC2 in the tumour represented the same cell type and were therefore merged.

Trajectory modelling and pseudotemporal ordering of cells was performed with the Monocle 2 R-package (Qiu et al., 2017) (version 2.8.0). Briefly, the algorithm learns the sequence of expression changes each cell goes through as a part of a dynamics process and places each cell at its appropriate position in the trajectory. The most highly variable genes were used for ordering the cells. Potential doublets and contaminating melanocytes and keratinocytes were excluded. We also removed a cluster for which the top markers were genes associated with

dissociation-induced effects. Genes which changed along the identified trajectory were identified by performing a likelihood ratio test using the function differentialGeneTest in the monocle 2 package.

To further identify subpopulations, we reanalysed the T cells, innate immune cells (myeloid and NK) and the CD31- stromal cells separately, using the same workflow as described above. To account for the cell cycle heterogeneity in the T cell subsets a cell cycle score was calculated for each cell and this score was then regressed out. We used the function "AddModuleScore" from Seurat and the list of G2M associated genes from Scialdone et al. to calculate a cell cycle score for each cell.

The gprofiler R package (Raudvere et al., 2019) was used to find enriched GO terms in KEGG Pathways. All significantly upregulated genes (gSCS adjusted p-value < 0.05) for populations were tested, using moderate hierarchical filtering.

#### T-cell receptor (TCR) analysis

The TCR sequences for each single T cell were assembled using TraCeR (Stubbington et al., 2016) which allowed the reconstruction of the TCRs from scRNA-seq data and their expression abundance (transcripts per million, TPM), as well as identification of the size, diversity and lineage relation of clonal subpopulations. In total, we detected 77 TCR sequences with at least one paired productive  $\alpha\beta$  or gamma-delta chain. Cells for which more than two recombinants were identified were excluded from further analysis.

#### Cell cycle analysis

The pair-based prediction method described by Scialdone *et al.* (Scialdone et al., 2015). and implemented in the R package scran was used to assign each cell a cell cycle stage. Briefly, using training data, pairs of marker genes are identified such that the expression of the first gene in the training data is greater than the second in a certain cell cycle stage but less than the second in all other stages. For each cell then, the method calculates the proportion of all marker pairs where the expression of the first gene is greater than the second in the test data.

#### Putative interactions between cell types

To enable a systematic analysis of cell-cell communication, we used CellPhoneDB (Vento-Tormo et al., 2018). CellPhoneDB is a manual curated repository of ligands, receptors and their interactions, integrated with a statistical framework for inferring cell-cell communication networks from single cell transcriptome data. For the mouse dataset, we used the ortholog genes.

Briefly, in order to identify the most relevant interactions between cell types, we looked for the cell-type specific interactions between ligands and receptors. Only receptors and ligands expressed in more than 10% of the cells in the specific cluster were considered. We performed pairwise comparisons between all cell types. First, we randomly permuted the cluster labels of all cells 1000 times and determined the mean of the average receptor expression level of a cluster and the average ligand expression level of the interacting cluster. For each receptor-ligand pair in each pairwise comparison between two cell types, this generated a null distribution. By calculating the proportion of the means which are as or higher than the actual mean, we obtained a *p*-value for the likelihood of cell type-specificity of a given receptor-ligand complex. We then prioritized interactions that are highly enriched between cell types based on the number of significant pairs and manually selected biologically relevant ones. For the multi-subunit heteromeric complexes, we required that all subunits of the complex are expressed (using a threshold of 10%), and therefore we used the member of the complex with the minimum average expression to perform the random shuffling.

#### Mouse skin fibroblasts from healthy mice

Skin samples from two 8-week old female C57BL/6 mice were processed, first by mechanical processing, followed by a 2h incubation with 0.5% collagenase B (Roche; 11088815001). Cells were then counted and loaded on the 10x Chromium machine. Libraries were prepared following the Chromium Single Cell 3' v2 Reagent Kit Manual(Zheng et al., 2017). Libraries were sequenced on an Illumina HiSeq 4000 instrument with 26 bp for read 1 and 98 bp for read 2. Droplet-based sequencing data was aligned, filtered and quantified using the Cell Ranger Single-Cell Software Suite (version 2.2.0), against the mouse reference genome provided by Cell Ranger. The data was analysed using the pipeline described above. Only the clusters identified as fibroblasts (based on expression of Col1a1, Col1a2) were considered for comparison with the stromal clusters.

#### **Human skin fibroblasts**

scRNA-seq data was downloaded from ArrayExpress (E-MTAB-6831) (Hagai et al., 2018). CD45-negative cells from a digested skin sample were taken from a human female and processed in a 10X Chromium machine (10X Genomics). Droplet-based sequencing data was aligned, filtered and quantified using the Cell Ranger Single-Cell Software Suite (version 1.2.0), against the GRCh38 human reference genome provided by Cell Ranger. The data was analysed using the pipeline described above. Only the clusters identified as fibroblasts (based on expression of COL1A1, COL1A2) were considered for comparison with the stromal clusters.

#### Comparison of human and mouse skin fibroblasts with stromal clusters

To compare the mouse and human skin fibroblasts with the tumour stromal populations, a logistic regression with L2-norm regularization and a multinomial learning approach as described in (La Manno et al., 2016) (implemented by the scikit-learn function LogisticRegression) was trained on the stromal clusters, using the log-transformed normalized data. The model was used to predict the probabilities of each mouse and human skin cell belonging to each one of the stromal clusters (implemented by the predict\_proba function).

#### Public data analysis

Genes that were differentially expressed between populations in the bulk RNA seq data of sorted fibroblasts from KPC tumours and normal pancreas were found using R package DESeq2 (Love et al., 2014). The processed human melanoma dataset (Tirosh et al., 2016) and human head and neck cancer dataset (Puram et al., 2017) was analysed using the pipeline described above. Clusters were annotated using canonical cell type markers. Progression free survival analysis on the TCGA data was performed using the survival R package (Therneau and Grambsch, 2000) and the patients were dichtomised based on the median expression value of C3. Kaplan-Meier estimator of survival was used to construct the survival curves. Log rank tests were used to compare progression free survival between patients in different groups.

# **Supplementary Table Legends**

Supplementary table 1. Differentially expressed genes amongst the innate immune system clusters, Related to Figure 2. This table provides the differentially expressed genes between the innate immune subpopulations (q-value<0.1).

Supplementary table 2. Pseudotime analysis of the CD8 T cells, Related to Figure 3. Genes identified as varying significantly along the CD8 T cells trajectory (*q*-value<0.1).

Supplementary table 3. Differentially expressed genes amongst the three stromal clusters, Related to Figure 4. This table provides the differentially expressed genes between the three stromal subpopulations (q-value<0.1).

Supplementary table 4. List of interactions in the tumour infiltrating cells, Related to Figure 6. This table provides the list of interaction pairs between clusters in Fig. 1B resulting from our cell-cell communication pipeline. Sheet 1 - p-values; Sheet 2 - mean expression of the average receptor expression level of a cluster and the average ligand expression level of the interacting cluster; Sheet 3 - mean expression of the significant interactions ranked by specificity (p-value < 0.05).

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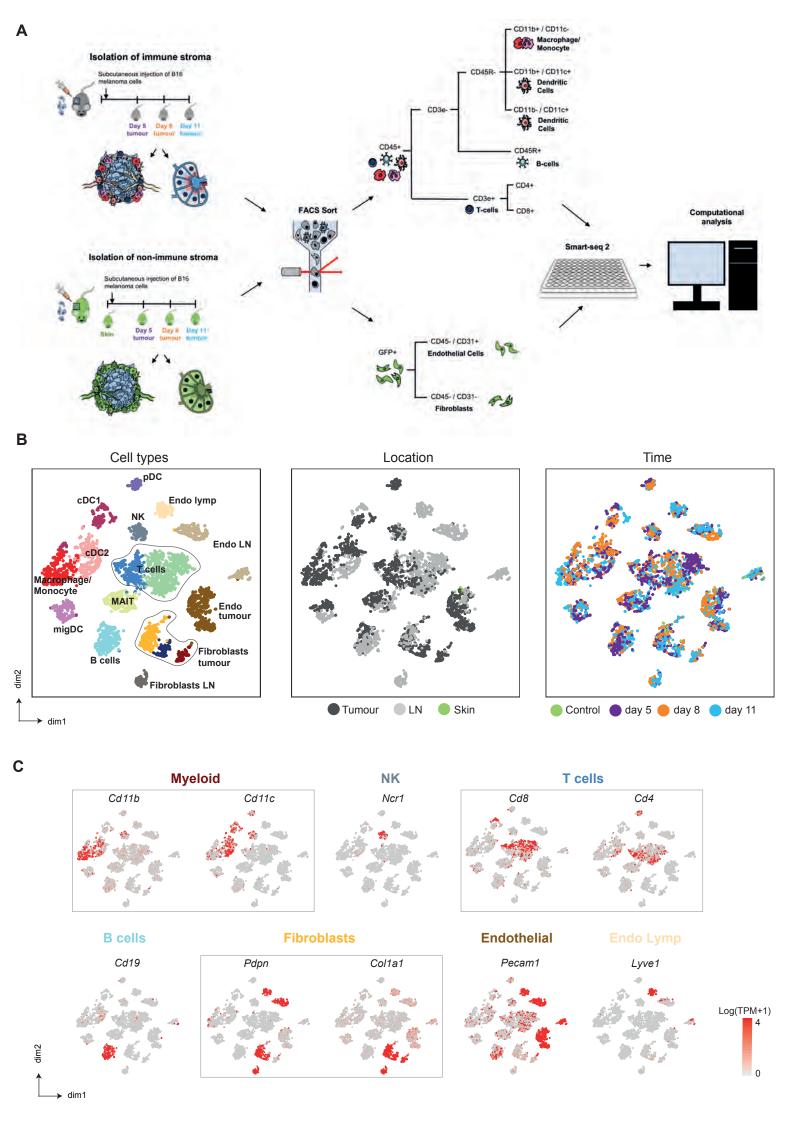
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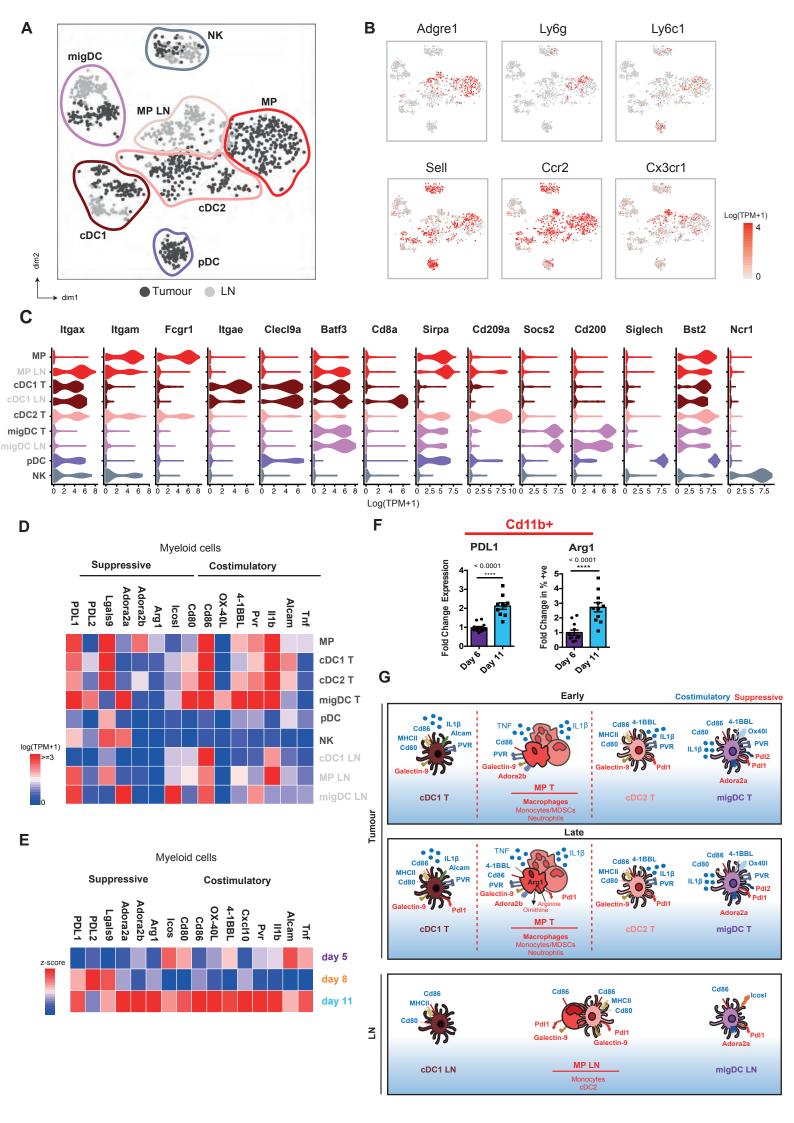
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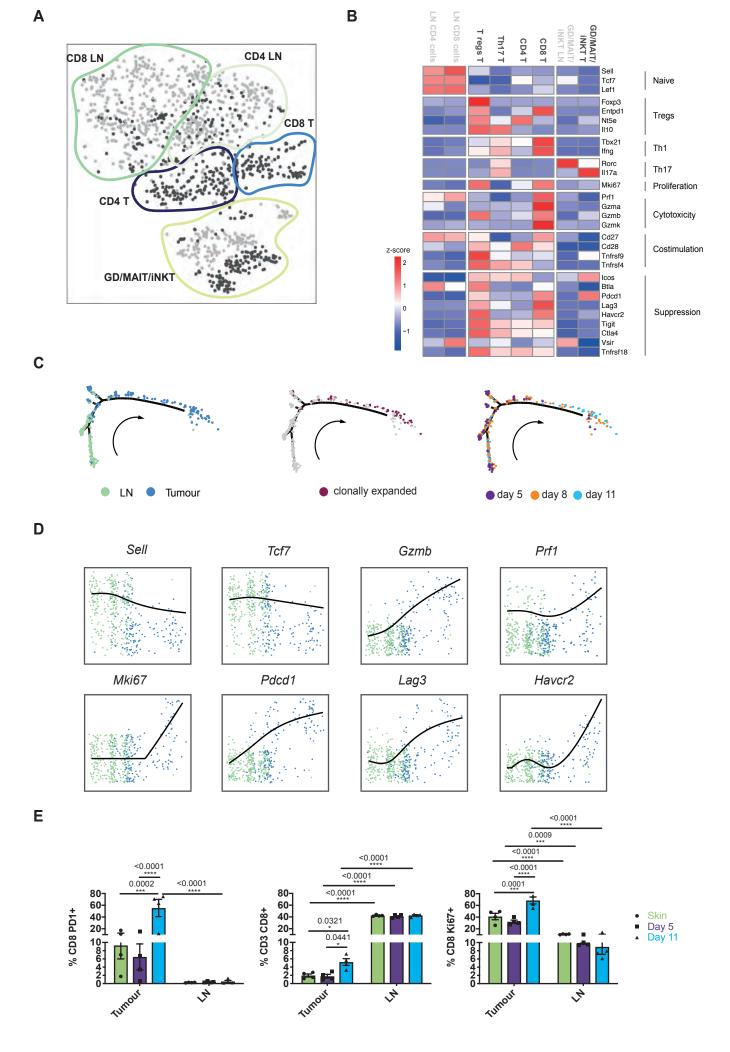
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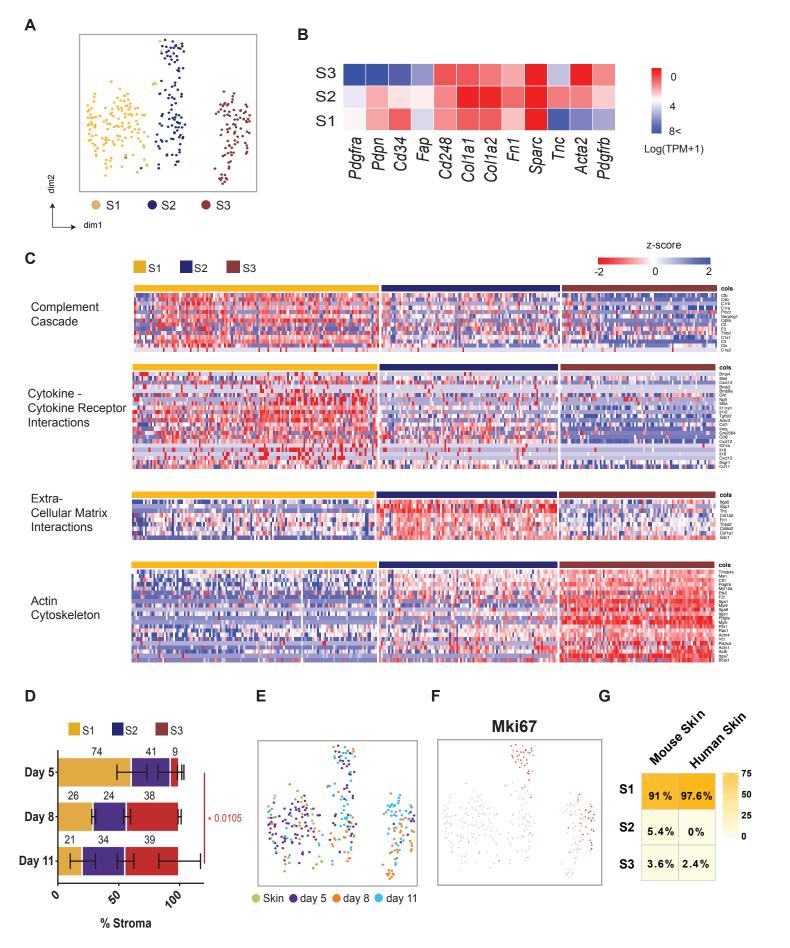
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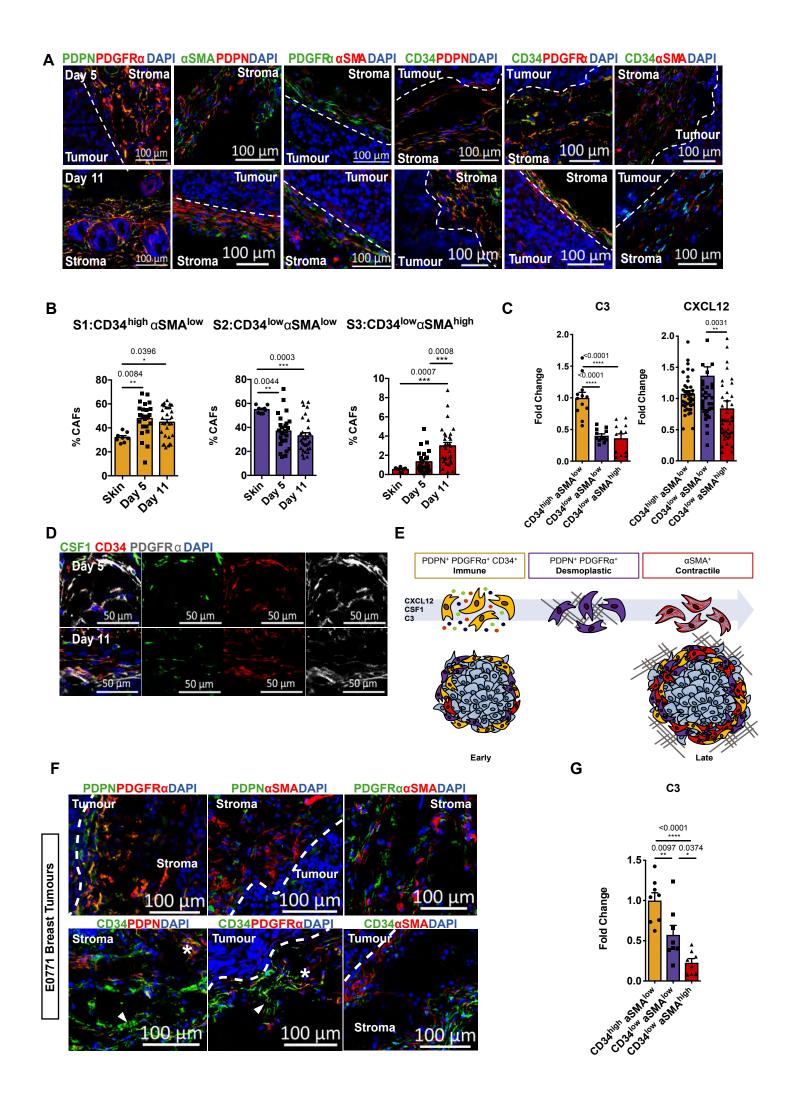
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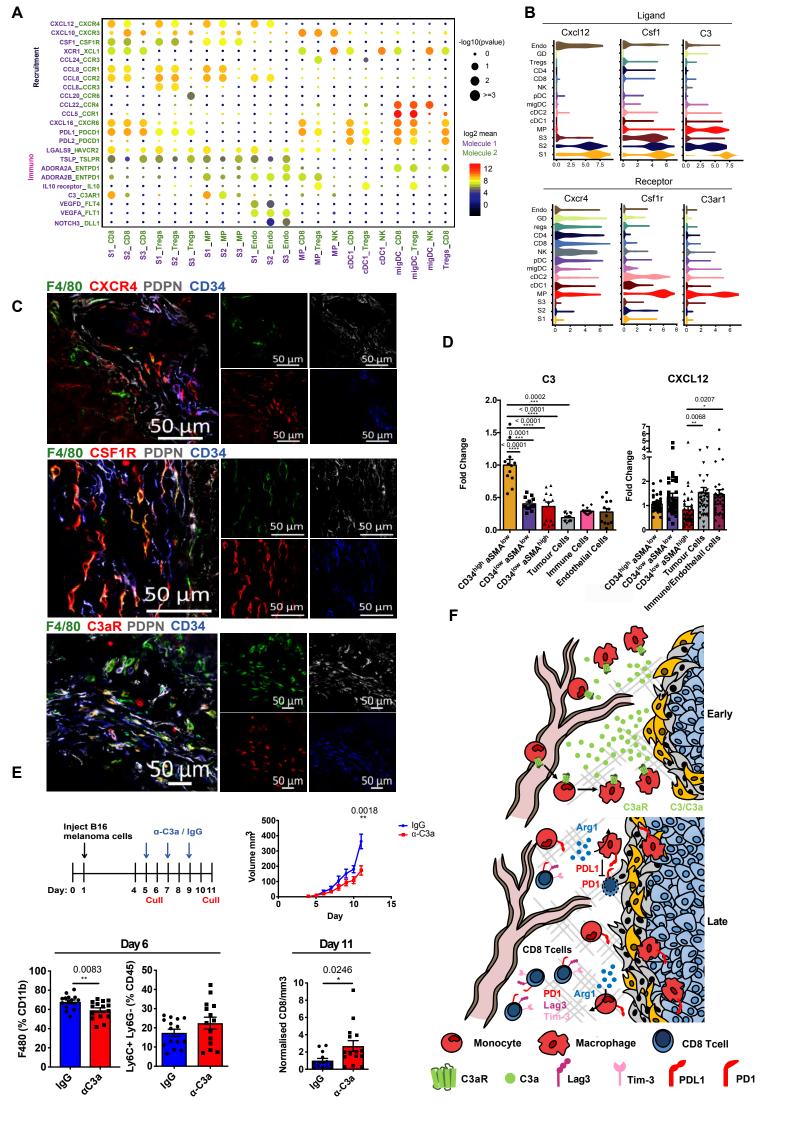


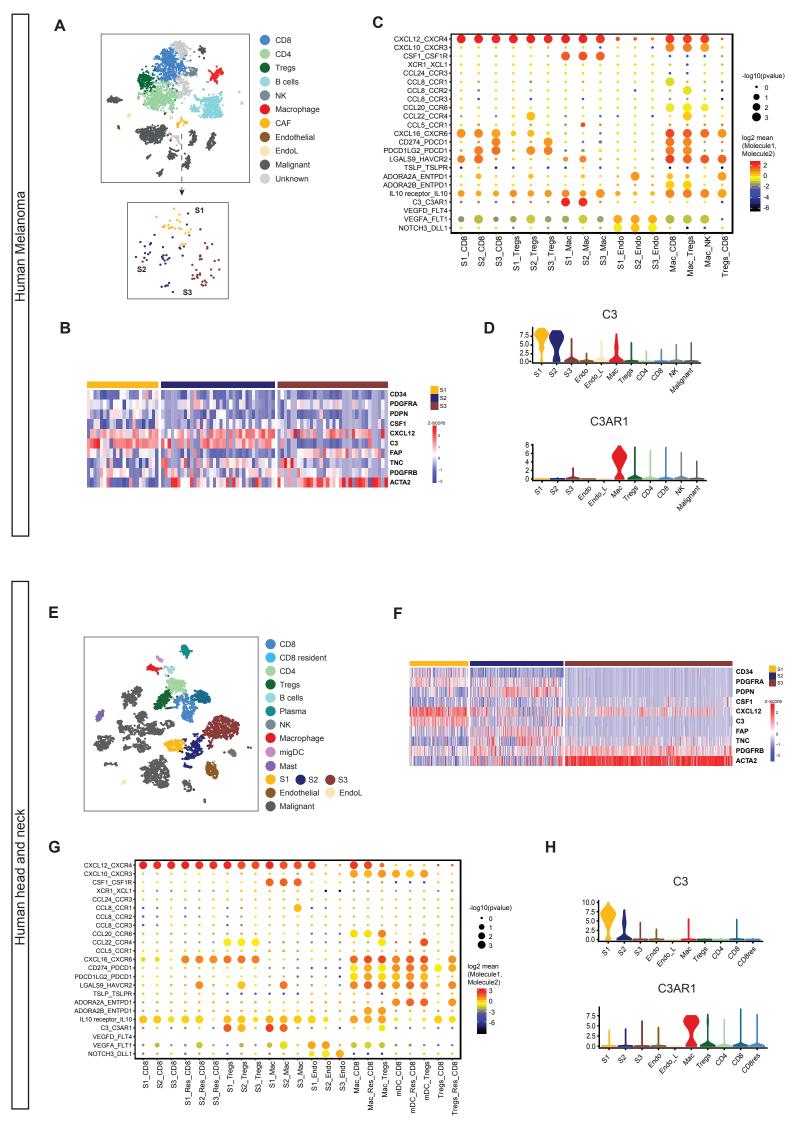


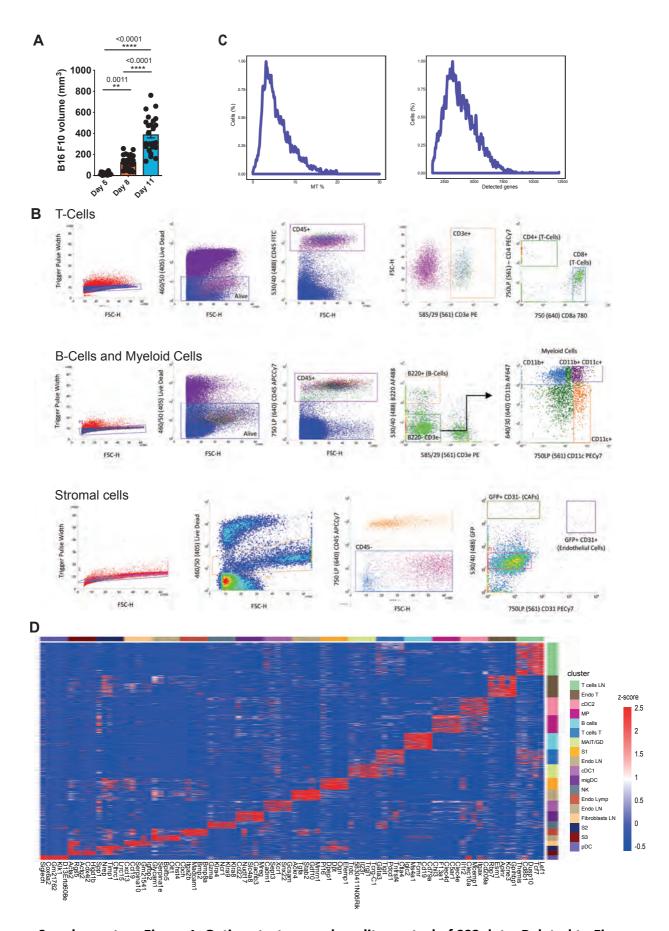






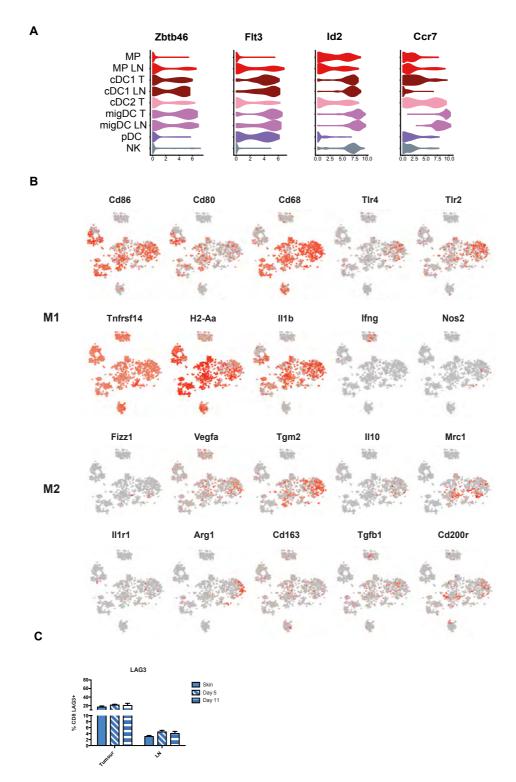






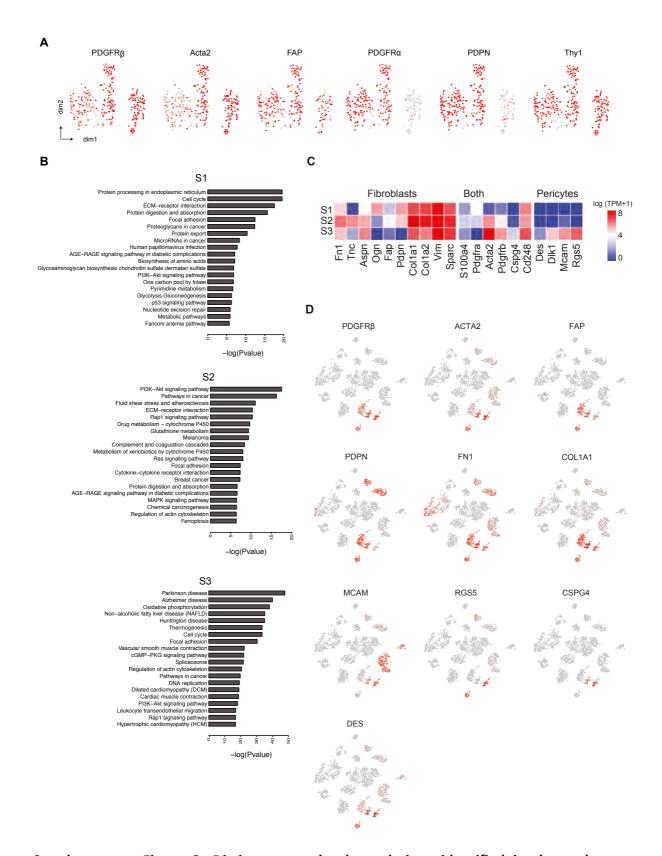
Supplementary Figure 1. Gating strategy and quality control of SS2 data, Related to Figure

**1. (A)** Volumes of B16-F10 melanomas at day 5, day 8 and day 11. Data presented as mean  $\pm$  SEM \* P<0.05, \*\* P<0.01, \*\*\* P<0.001, \*\*\*\* P<0.0001, one way Anova with Tukey post-hoc test, n = 22 individual mice. **(C)** Gating strategy for index sorted cell populations. **(B)** Quality control of the scRNA-seq dataset. Histograms show the distribution of the cells that passed the computational quality control ordered by number of detected genes and mitochondrial gene expression content. **(D)** Heatmap of marker genes showing relative expression (z-score) of the top 5 markers for each cluster presented in Fig. 1B.



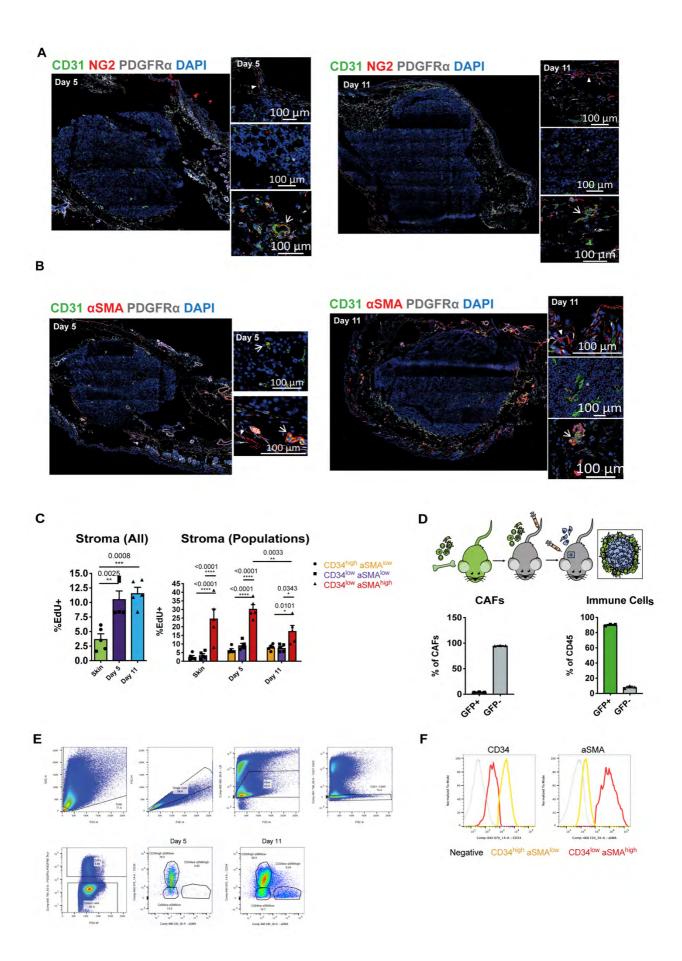
Supplementary Figure 2. Immune phenotypes, Related to Figures 2 and 3. (A) Violin plots showing expression of cDC1 transcription factors for each innate immune subpopulation. (B) tSNE plots showing expression of M1 and M2 macrophage markers in the innate immune subpopulations. Red indicates high expression, grey indicates low expression. (C) Percentage

of Lag3 $^+$  (displayed as a percentage of total CD8 $^+$ T cells), in tumours and lymph nodes isolated from skin, day 5 and day 11 tumour bearing or control mice. Data presented as mean  $\pm$  SEM. n=4 independent mice per time point.

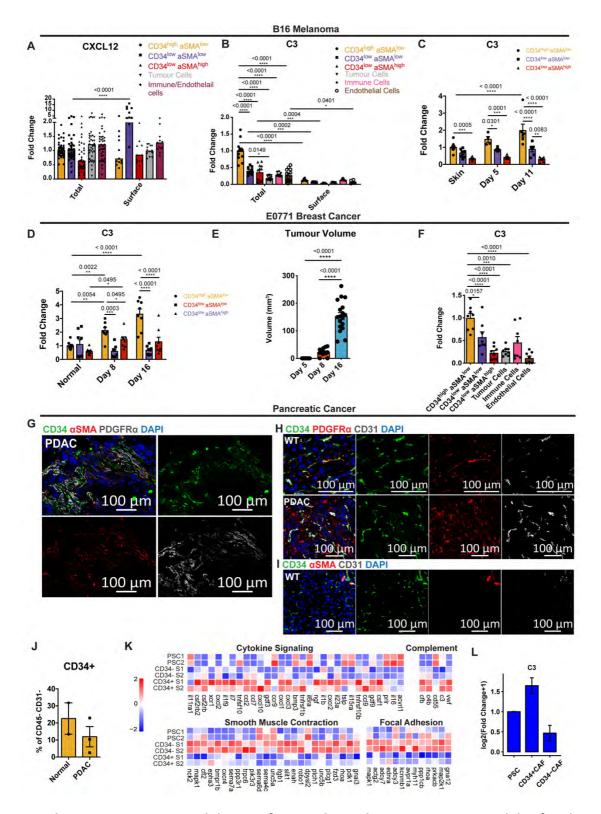


Supplementary Figure 3. Distinct stromal subpopulations identified in the melanoma mouse model, Related to Figure 4. (A) tSNE plots showing expression of typical CAF markers. (B) Bar plot (-log pvalue) depicting the top 20 gene ontology pathways upregulated in each stromal population. (C) Heatmap showing expression of canonical fibroblasts and pericytes

markers in the three stromal populations. **(D)** tSNE plots of all sequenced cells, showing expression of typical pericyte markers is also detected in PDPN<sup>+</sup> lymph node fibroblasts.



Supplementary Figure 4. Validation of CAF markers and CAF origin, Related to Figures 4 and 5. (A) and (B) Confocal imaging showing  $\alpha$ SMA<sup>+</sup> and NG2<sup>+</sup> cells both distinct from and associated with CD31<sup>+</sup> blood vessels. 20x tile scans of whole tumours are displayed, as well as 63x regions of interest. (C) EdU incorporation in stromal populations in skin, day 5 and day 11 tumours (left: % of CD45- CD31- Thy1+, right; individual subsets (S1-S3) incorporation into all proliferating fibroblasts (top) and each subset (bottom) in skin, day 5 and day 11 tumours. \* P<0.05, \*\* P<0.01, \*\*\* P<0.001, \*\*\*\* P<0.0001 One way (left) or two way (right) ANOVA with a Tukey post-hoc test. (D) Diagram (top) depicting the generation of bone marrow chimeric mice by injecting (IV) bone marrow from CAG-EGFP mice into irradiated WT strains. B16-F10 tumours were injected into chimeric mice and allowed to form for 11 days. The proportion of bone derived marrow cells (GFP+) to stromal (CD45- CD31- Thy1+, bottom left) and immune (CD45+, bottom right) populations was assessed by flow cytometry. (E) Gating strategy used to identify stromal subsets along tumour development, (F) showing representative plots from day 5 and 11 tumours and histograms of CD34 and aSMA levels between populations. Scale bars 100  $\mu$ m

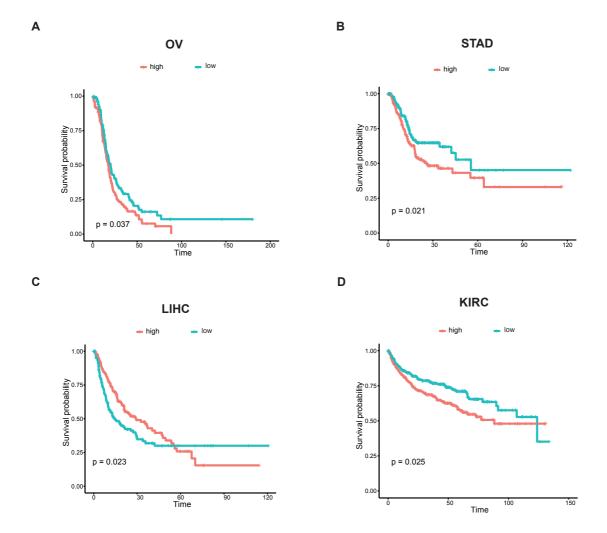


Supplementary Figure 5. Validation of stromal populations in mouse models of melanoma, breast and pancreatic cancer, Related to Figures 5 and 6. B16-F10 melanoma: Total and surface CXCL12 (A) and C3 (B) expression in day 11 tumours in stromal populations, immune, endothelial and tumour cells. CXCL12: n = minimum of 12 mice, C3: n = 6 mice. (C) C3 expression within each stromal population in normal skin, day 5 and day 11 tumours n = minimum of 12 mice, C3: n = 6 mice.

minimum 4 mice. E0771 breast tumours: (D) C3 expression within fibroblast subsets in normal breast tissue, day 8 and day 16 tumours, n = 8 mice. (E) Tumour volumes at day 5, day 8 and day 16, n = 18 mice. (F) C3 expression in fibroblast populations, immune, endothelial and tumour cells in day 16 tumours, n = 8 mice. Pancreatic adenocarcinoma: (G) IF images of KPC tumours showing expression of CD34 (green), αSMA (red) and PDGFRα (grey). (H) IF images of WT pancreas compared to KPC tumours (PDAC), showing expression of CD34 (green), PDGFRα (red) and CD31 (grey). Pancreatic stellate cells in normal tissue express CD34 and PDGFRα, whereas CD34 expression is mostly restricted to CD31+ blood vessels in PDAC tissue. (I) IF images showing CD34 (green),  $\alpha$ SMA (red) and CD31 (grey) in normal pancreatic tissue. Here, pancreatic stellate cells do not express  $\alpha$ SMA. (J) Graph displays FACs quantification of CD34+ fibroblasts as a percentage of CD45-CD31- cells in normal pancreatic tissue and KPC tumours. normal pancreas: n = 2 mice, KPC tumours: n = 3 mice. (K) Publicly available RNA seq data of KPC CD34+ and CD34- stromal cells, as well as normal pancreatic stellate cells (PSCs) was downloaded and analysed. Heat maps show selected pathways from GO analysis performed on differentially expressed genes between CD34+ and CD34- populations, z scores are displayed. (L) Graph displaying log2(Fold change+1) of C3 RNA expression from PSCs, CD34+ and CD34- stromal cells. Graphs were made from previously mentioned publicly available data. \*\* P<0.01, \*\*\* P<0.001, \*\*\*\* P<0.0001, two way anova with a Sidak (A and B) and Tukey (C and D) post-hoc test, one way anova with Tukey post-hoc test. (E and F). All images are representative of at least n=3 mice and acquired at 63x, scale bars displayed.

μm

Supplementary Figure 6. The effects of disrupting C3a/C3aR Interactions on tumour development and immune infiltration, Related to Figure 6. (A) Experimental design of C3aR antagonism, using the small molecule SB290157: Mice received injections of SB290157 at either day 4 and day 6 or day 8 and day 11, all mice were culled at day 11 (left). Tumour volumes ( $mm^3$ ) for vehicle controls and each treatment regime are shown (right), n = 6 mice. (B) Immune infiltration of F4/80+ macrophages and Ly6C+ Ly6G- monocytes in the tumour (left) and blood (right). This is shown as the percentage of CD11b+ cells (F4/80) or CD45+ cells (Ly6C+ Ly6G-), n = 6 tumours. \* = P< 0.05 (Two way anova with Sidak post-hoc test). (C) The effects of neutralising C3a on immune infiltrates in the tumour and blood. Top panel: Fold change in fluorescence intensity of PDL1 on tumour myeloid populations, normalized to IgG day6 (left) and the number of Ly6C+ Ly6G- monocytes in the blood, shown as a percentage of CD45 cells. Middle panel: Number of tumour infiltrating CD8+, CD4+ and FOXP3+ T-cells, displayed as a percentage of CD3e or CD4 T-cells. Bottom panel: Fold change in fluorescence intensity of T-cell exhaustion markers PD1 and Lag3 in CD8 T cells, normalized to IgG day 6 (left). Numbers of CD8 and CD4 T cells in the blood of treated mice, displayed as a percentage of CD3e T-cells. n = minimum of 11 mice. (D) Confocal images showing expression of C3aR on immune populations in day 5 and 11 tumours. Top panel: C3aR is not expressed on Cd3e+ T cells, CD3e (green), C3aR (red) and CD45 (grey). Bottom panel: C3aR is expressed by Ly6C+ CD11b+ monocytes. Images were acquired at 63x and scale bars are displayed. day 5 n=3 tumours, day 11 n=2 tumours.



Supplementary Figure 7. Survival analysis of C3 in different TCGA datasets, Related to Figure

7. (A) Kaplan-Meier survival curve of Ovarian serous cystadenocarcinoma (OV) patients showing progression-free survival based on median C3 expression levels. (B) Kaplan-Meier survival curve of Stomach adenocarcinoma (STAD) patients showing progression-free survival based on median C3 expression levels. (C) Kaplan-Meier survival curve of Liver hepatocellular carcinoma (LIHC) patients showing progression-free survival based on median C3 expression levels. (D) Kaplan-Meier survival curve of Kidney renal clear cell carcinoma (KIRC) patients showing progression-free survival based on median C3 expression levels.