**Abstract**

**PVRL2 tumor baseline levels in CON patients treated with COM701 + nivolumab +/- BMS-986207**

Clinical markers were independent of RQ5, CD4, PVRL and DMMK baseline expression. 37/13 patients had baseline RQ5 (1, FDR); median CD4, PVRL and DMMK were similar, but for both CB and CB patients (Supplementary). In contrast, baseline PVRL2 expression was associated with median PVRL2 score of 200 in CB versus 240 CB patients (p=0.01, Figure 1B).

**PVRL2 genotypic amplification observed in a patient with durable partial response following COM701 + nivolumab +/- BMS-986207 treatment**

PVRL2 genotypic amplification observed in one sample across the clinical cohort and across clinical covariate associations TCGA. A. Correlation of TCGA expression (X axis in a PVRL2 mRNA levels baseline expression for TCGA samples) by genomic status of PVRL2 patients (Y axis with 50 clinical samples, showing amplification) and Geometric (STDEV), slope, intercept and y-intercept of logistic regression parameters of PVRL2 (n=29).

**Increased tumor CD8+ cells infiltration following COM701 + nivolumab +/- BMS-986207 treatment**

Increased tumor CD8+ cells infiltration following COM701 + nivolumab +/- BMS-986207 treatment. A. Kaplan-Meier survival curve showing therapy response in COM701+/-BMS-986207 treated patients. CB treatment arm shows trends of higher CD8+ T cell infiltration at C1D28, C1D56, and C1D84, with increased CD8+ T cell infiltration at C2D28, C2D56, and C2D84 in CB treatment arm patients. B. Increased tumor CD8+ T cell infiltration following COM701 + nivolumab +/- BMS-986207 treatment. COX regression analysis using log rank test. Significant increase at C1D28, C1D56, and C1D84 in CB treatment arm patients. C. Increased tumor CD8+ T cell infiltration at C1D28, C1D56, and C1D84 in CB treatment arm patients. Increased tumor CD8+ T cell infiltration at C1D28, C1D56, and C1D84 in CB treatment arm patients. A. Kaplan-Meier survival curve showing therapy response in COM701+/-BMS-986207 treated patients. CB treatment arm shows trends of higher CD8+ T cell infiltration at C1D28, C1D56, and C1D84, with increased CD8+ T cell infiltration at C2D28, C2D56, and C2D84 in CB treatment arm patients. B. Increased tumor CD8+ T cell infiltration following COM701 + nivolumab +/- BMS-986207 treatment. COX regression analysis using log rank test. Significant increase at C1D28, C1D56, and C1D84 in CB treatment arm patients. C. Increased tumor CD8+ T cell infiltration at C1D28, C1D56, and C1D84 in CB treatment arm patients. Increased tumor CD8+ T cell infiltration at C1D28, C1D56, and C1D84 in CB treatment arm patients. A. Kaplan-Meier survival curve showing therapy response in COM701+/-BMS-986207 treated patients. CB treatment arm shows trends of higher CD8+ T cell infiltration at C1D28, C1D56, and C1D84, with increased CD8+ T cell infiltration at C2D28, C2D56, and C2D84 in CB treatment arm patients. B. Increased tumor CD8+ T cell infiltration following COM701 + nivolumab +/- BMS-986207 treatment. COX regression analysis using log rank test. Significant increase at C1D28, C1D56, and C1D84 in CB treatment arm patients. C. Increased tumor CD8+ T cell infiltration at C1D28, C1D56, and C1D84 in CB treatment arm patients. Increased tumor CD8+ T cell infiltration at C1D28, C1D56, and C1D84 in CB treatment arm patients. A. Kaplan-Meier survival curve showing therapy response in COM701+/-BMS-986207 treated patients. CB treatment arm shows trends of higher CD8+ T cell infiltration at C1D28, C1D56, and C1D84, with increased CD8+ T cell infiltration at C2D28, C2D56, and C2D84 in CB treatment arm patients. B. Increased tumor CD8+ T cell infiltration following COM701 + nivolumab +/- BMS-986207 treatment. COX regression analysis using log rank test. Significant increase at C1D28, C1D56, and C1D84 in CB treatment arm patients. C. Increased tumor CD8+ T cell infiltration at C1D28, C1D56, and C1D84 in CB treatment arm patients. Increased tumor CD8+ T cell infiltration at C1D28, C1D56, and C1D84 in CB treatment arm patients. A. Kaplan-Meier survival curve showing therapy response in COM701+/-BMS-986207 treated patients. CB treatment arm shows trends of higher CD8+ T cell infiltration at C1D28, C1D56, and C1D84, with increased CD8+ T cell infiltration at C2D28, C2D56, and C2D84 in CB treatment arm patients. B. Increased tumor CD8+ T cell infiltration following COM701 + nivolumab +/- BMS-986207 treatment. COX regression analysis using log rank test. Significant increase at C1D28, C1D56, and C1D84 in CB treatment arm patients. C. Increased tumor CD8+ T cell infiltration at C1D28, C1D56, and C1D84 in CB treatment arm patients.

**CONCLUSION**

These results demonstrate the activity of COM701 treatment combinations in terms of clinical responses and immune modulation both in the INO and the pharynx. This is in addition to the increasing evidence showing an increase in T cell responses in INO patients treated with COM701+/-BMS-986207. COM701 treatment combinations have been shown to demonstrate significant increase in T cell responses following COM701+/-BMS-986207 treatment. The INO responses observed in patients treated with COM701+/-BMS-986207 treatment are consistent with the previous data, and the findings presented here support the notion that COM701 treatment combinations have the potential to improve clinical outcomes in patients with platinum-resistant ovarian cancer.