A screenshot of a computer

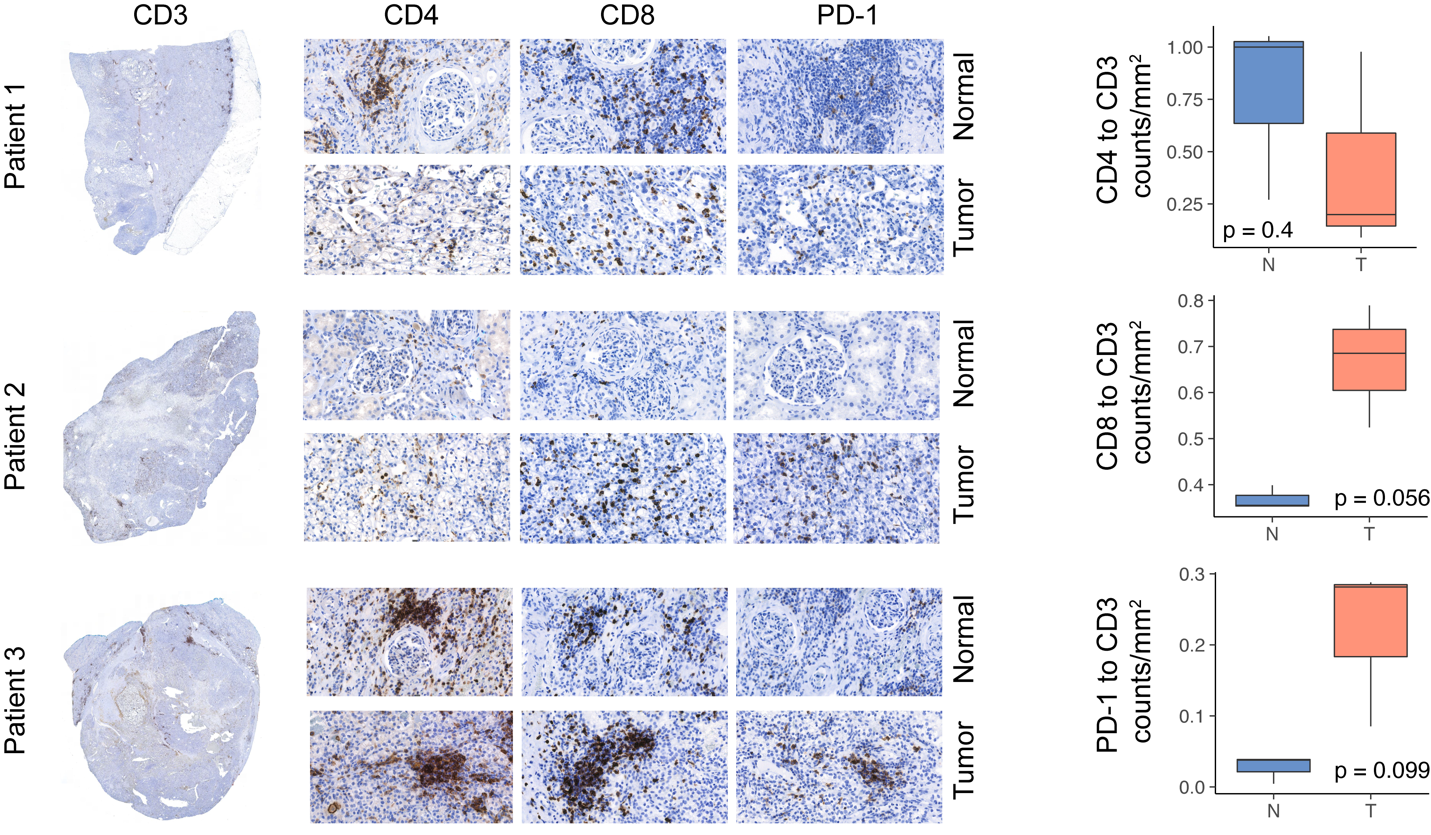
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**Supplemental Figure 1:** Workflow for SCRS of isolated lymphoid and myeloid immune cell populations from ccRCC subjects and computational analysis. SCRS data across ccRCC (both tumor and paired peripheral blood) and data derived from 10x Genomics and EGAS00001002325 were integrated using SCTtransform approach to form a UMAP of 37,055 from 7 different samples and acting as a basis for subclustering and further analysis by cell type. During the subclustering analysis of CD8+, CD4+ T cells, and APCs, single-cells were re-integrated by patient sample, patients and corresponding numbers of cells indicated.

A close up of a logo

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**Supplemental Figure 2:** UMAP plot and corresponding percent bar graph by cluster for doublet estimation using scDblFinder R package across all cells in the integrated data set. Doublets defined as density estimated with log2(x+1) ≥ 3.



**Supplemental Figure 3:** Immunohistochemical results for T cell staining in paired normal and tumor tissue with quantified ratios of counts per unit area.

A picture containing implement, stationary, colorful, computer

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**Supplemental Figure 4:** Top clonotypes for CD8+ T cells for each patient by proportion in each subcluster.

A picture containing sitting, table, screen, computer

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**Supplemental Figure 5: A**. UMAP subclustering of myeloid cells (original clusters 4, 6, 10, 13, 15, and 20). **B**. Normalized correlation values for predicted immune cell phenotypes based on the SingleR R package for selected subclusters. **C**. Percent of cells expressing canonical immune cell markers across the UMAP.

A picture containing television, screen, monitor, sitting

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**Supplemental Figure 6:** Z-transformed normalized enrichment scores from ssGSEA for MHC-related gene sets in the C5 library of the Molecular Signature Database by APC/Myeloid subcluster.

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**Supplemental Figure 7**: A. mRNA expression of signature genes for CD8\_6 (upper panel) and TAM\_3 (lower panel) by histological grade (x-axis) and k-nearest neighbor model prediction.

**Supplemental Methods**

*Highthroughput IHC quantification*

Normal and ccRCC tumor samples from the 3 patients were formalin-fixed and paraffin-embedded samples. After antigen-retrieval, samples were stained with indicated anitbodies . Digital images of 24 IHC-stained slides were obtained using the 3DHistech P1000 Panoramic Scanner (3DHistech, Budapest, Hungary). Each slide was annotated in CaseViewer (3DHistech) for tumor and or normal tissue. Areas with abundant artifact were annotated and subtracted. Image-based algorithms were created for detecting positive cells based on stain intensity using QuantCenter Image Analysis Framework software (3DHistech) and normalized per area analyzed.