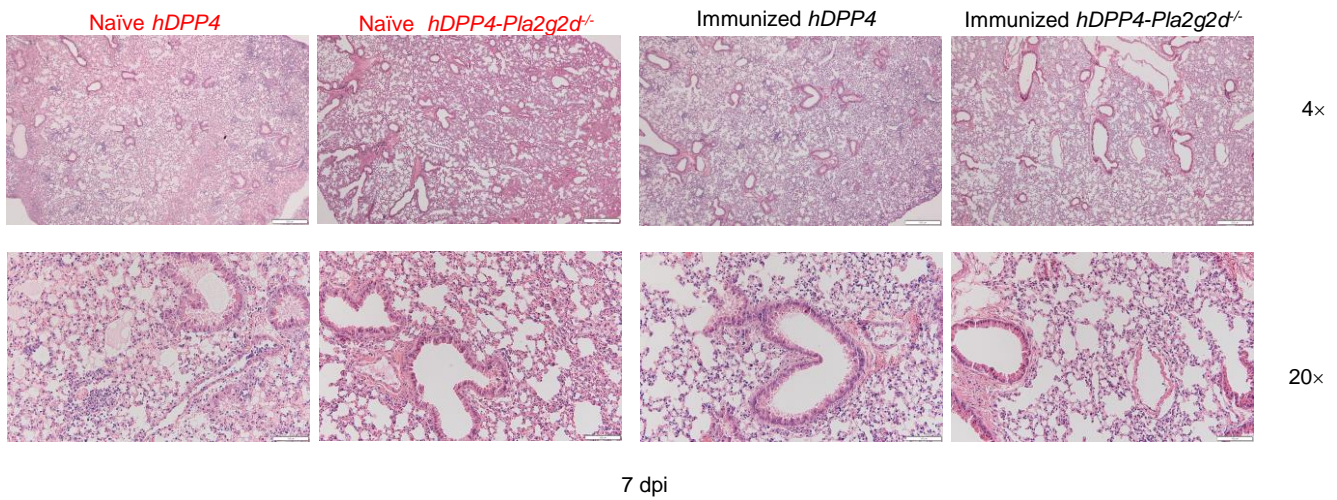
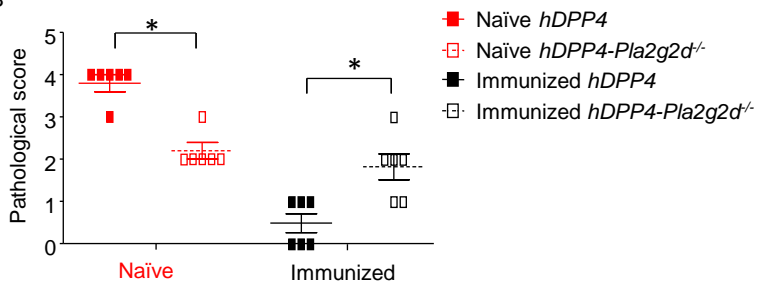


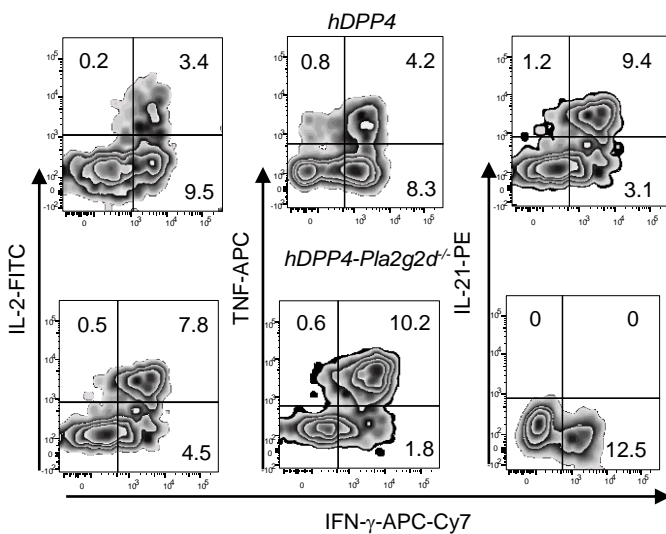
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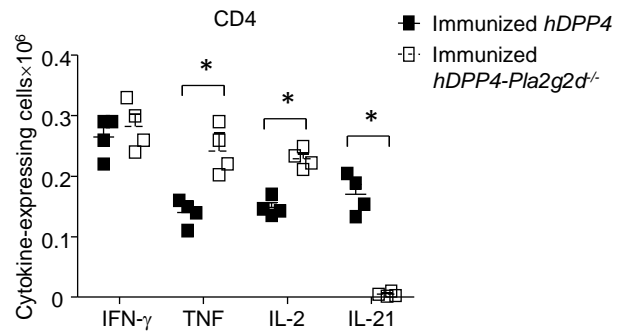
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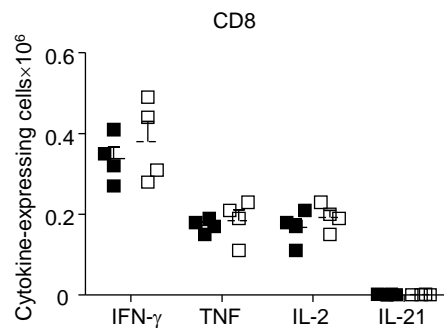
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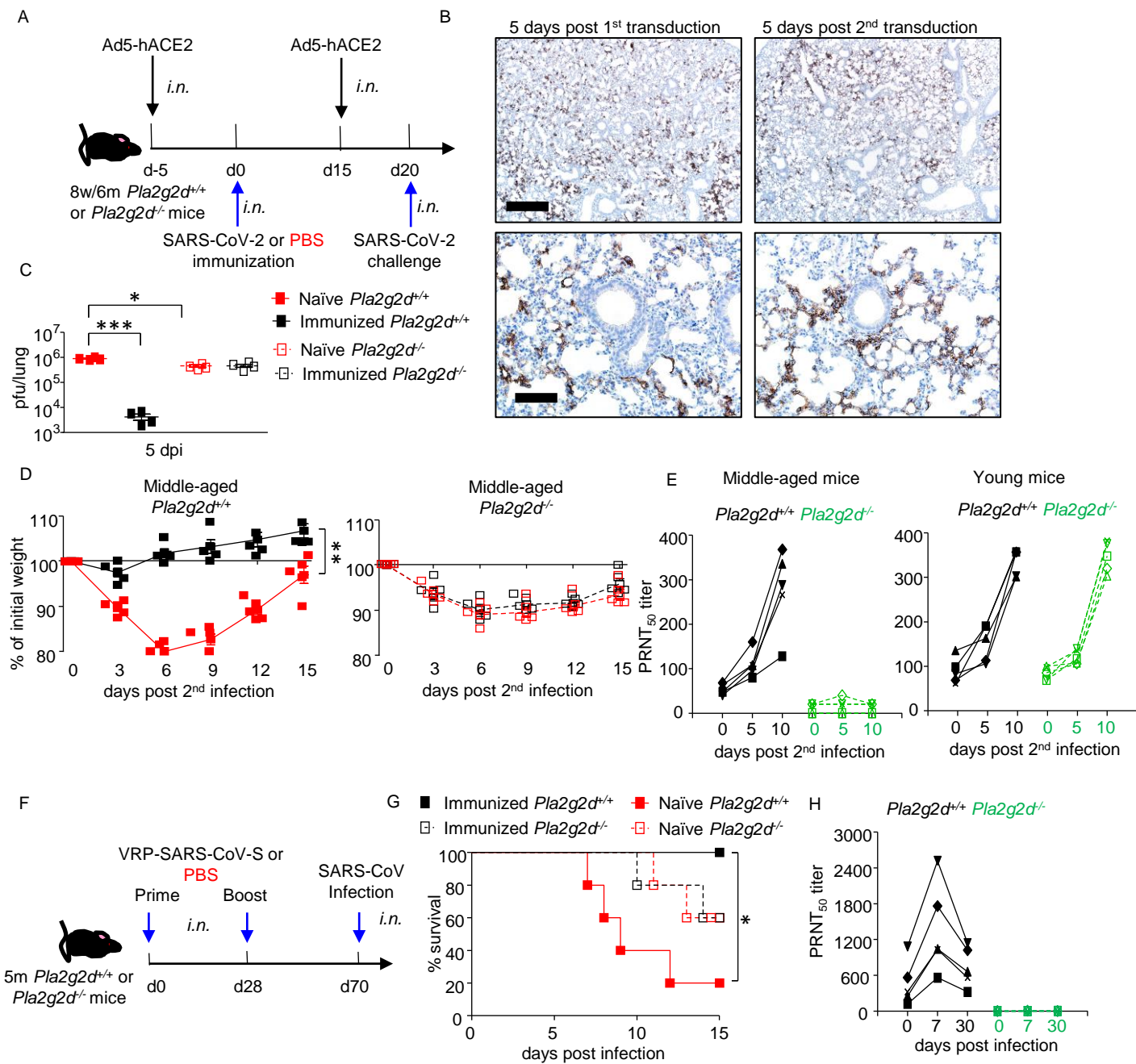
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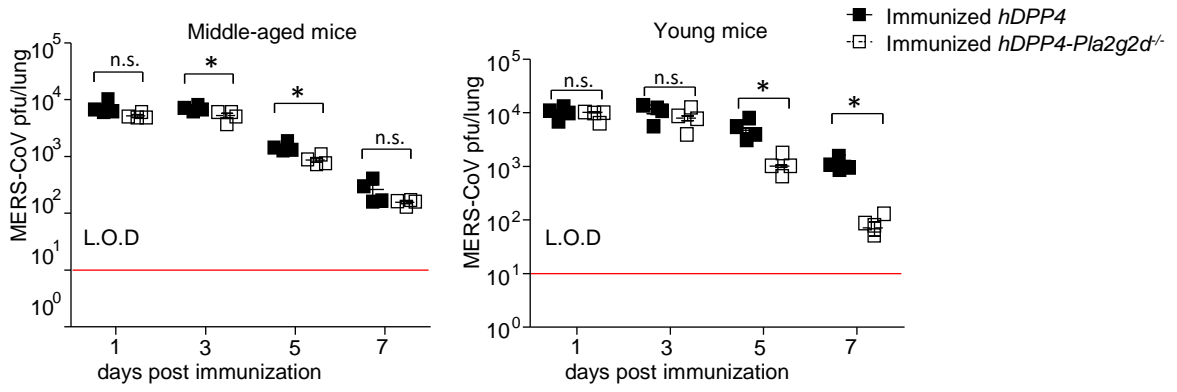
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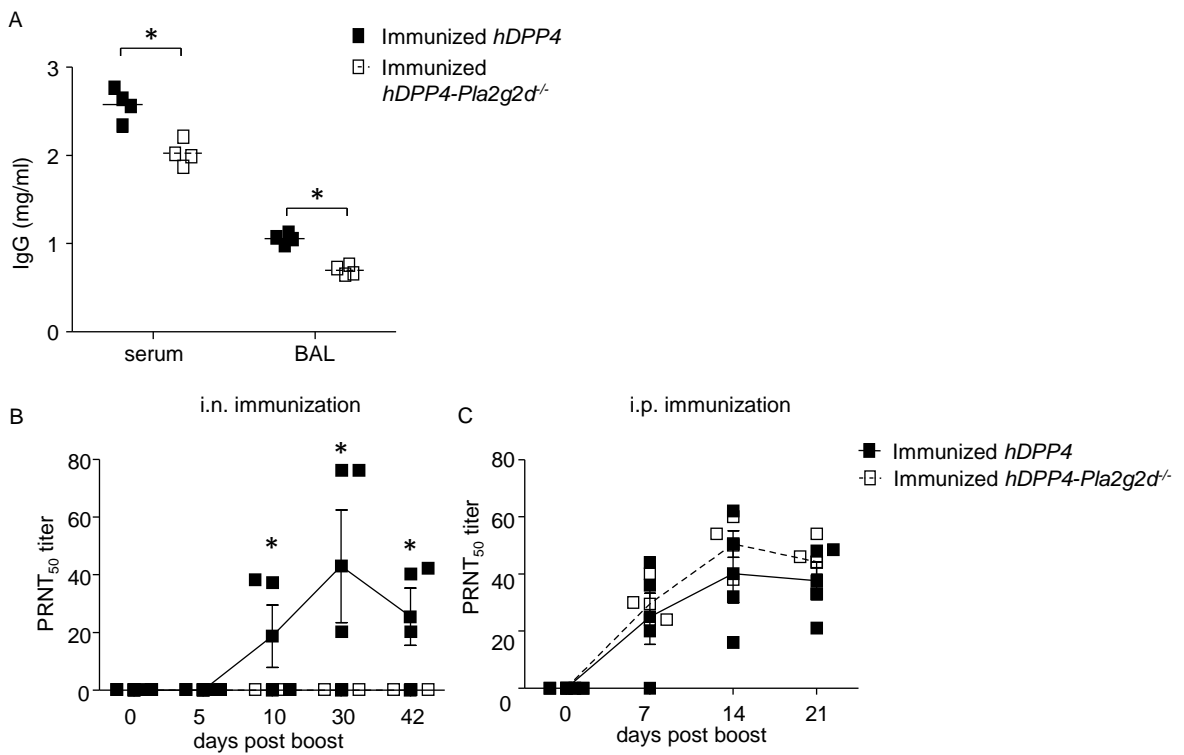
Supplementary Figure 1. Histopathological changes and T cell responses in naïve and VRP-MERS-S immunized middle-aged mice infected with lethal MERS-CoV. (A, B) Representative histological lung sections from mice sacrificed at 7dpi (A) and scoring (B) are shown. $n=6$ /group. (C-E) CD4 (C and D) and CD8 (E) T cells were purified from lungs and DLNs of infected mice on 7dpi and re-stimulated with a MERS-CoV S protein peptide pool for 6 hours at 37°C. BFA was added at the start of culture. IFN- γ , TNF, IL-2, and IL-21 expression by T cells was determined by flow cytometry. $n=4$ mice/group. (B, C, E) Representative data of 3 independent experiments are shown as means \pm SEM and are analyzed by Student's t test. $n=4$ /group, * $p < 0.05$.



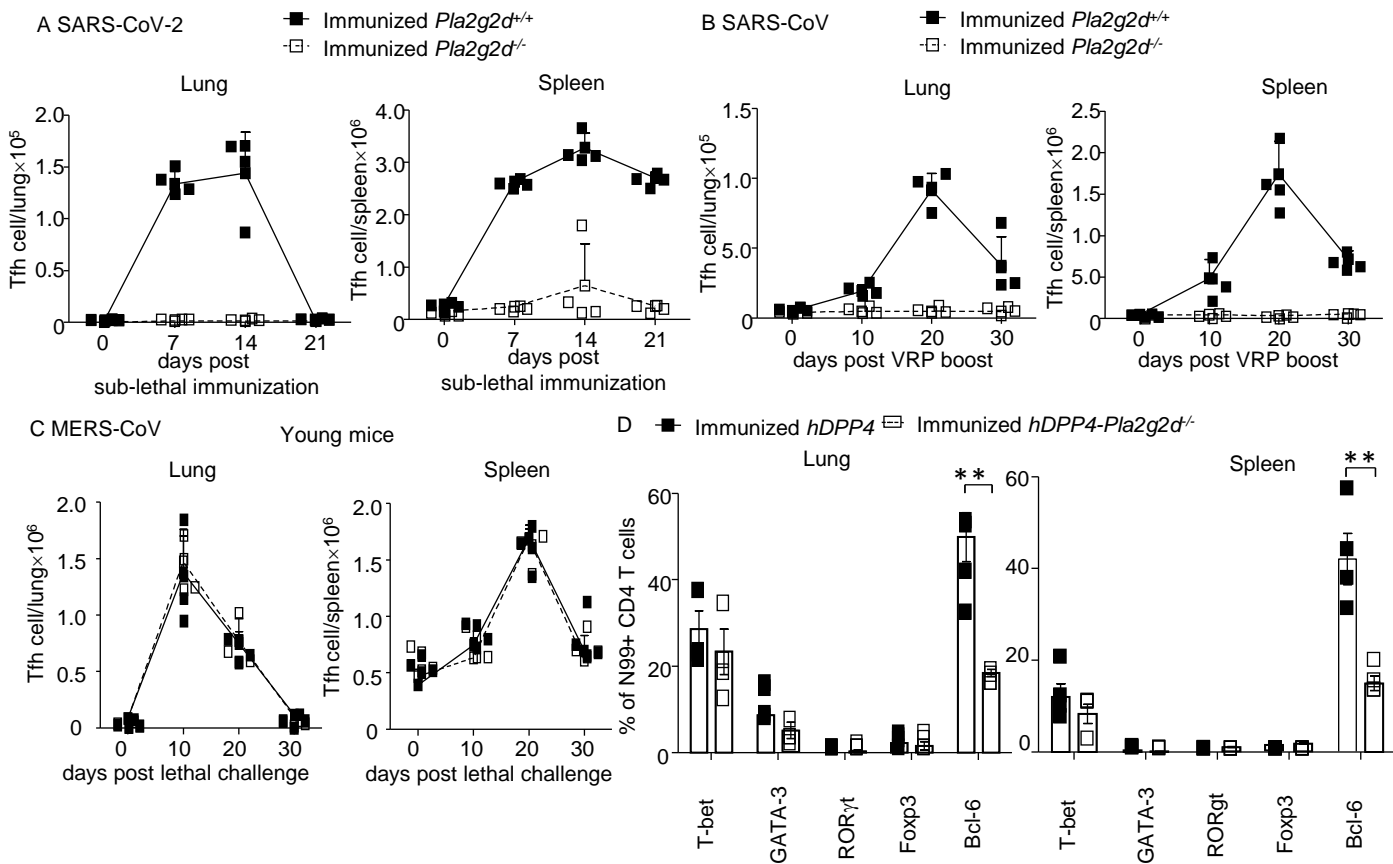
Supplementary Figure 2. Immunization fails to protect middle-aged *Pla2g2d*^{-/-} mice from SARS-CoV-2 or lethal SARS-CoV infection. (A) Protocol for SARS-CoV-2 infection and re-challenge. 8-week (young) or 6-month (middle-aged) *Pla2g2d*^{+/+} or *Pla2g2d*^{-/-} mice were transduced with Ad5-hACE2, followed by 10⁵ pfu infection with SARS-CoV-2 or PBS i.n. 5 days later (day 0). At 20 dpi, mice were challenged with 10⁵ pfu SARS-CoV-2, i.n. (B) Expression of hACE2 in transduced mice lungs. Bar=467 and 94 μ m, top and bottom panels respectively. (C, D) Virus titers in lungs at 5 days post challenge (C) and weights (D) of naïve and immunized middle-aged mice are shown, n=5/group. (E) The titer of serum virus-specific neutralizing antibody from SARS-CoV-2-infected middle-aged and young mice at indicated days post challenge was determined by PRNT₅₀ assay as described in Methods, n=5/group. Antibody titers from individual mice are shown. (F) Protocol for VRP-SARS-S immunization and SARS-CoV infection. 5-month *Pla2g2d*^{+/+} or *Pla2g2d*^{-/-} mice were treated with VRP-SARS-S or PBS i.n. on days 0 and 28, followed by lethal infection with SARS-CoV (10⁵ pfu) on day 70, i.n. (G) Survival of immunized and infected mice is shown and compared using Kaplan-Meier log-rank survival tests, n=5/group. (H) The titer of serum virus-specific neutralizing antibody from SARS-CoV-infected mice at indicated days post challenge was determined by PRNT₅₀ assay as described in Methods, n=5/group. Antibody titers from individual mice are shown. (C, D) Data are shown as means \pm SEM and are representative of 3 independent experiments. Each pair of data shown in C was compared using 1-way ANOVA, while data shown in D were analyzed using Multiple regression analysis.* p<0.05, *** p<0.001.



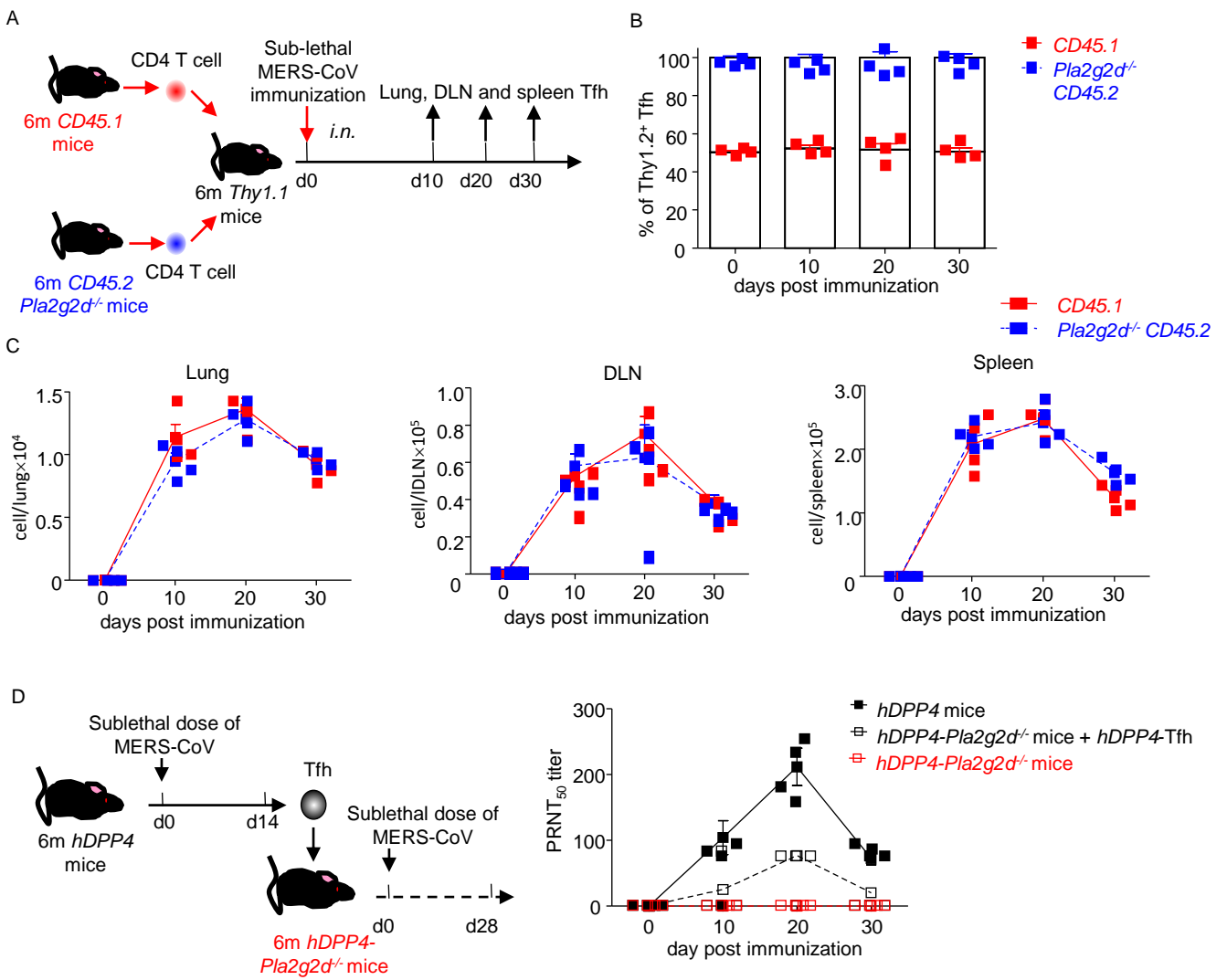
Supplementary Figure 3. Virus clearance in naïve mice immunized with a sublethal dose of MERS-CoV. 8-week (young) or 6-month (middle-aged) *hDPP4* or *hDPP4-Pla2g2d^{-/-}* mice were treated with a sublethal dose (100pfu) of MERS-CoV. Lung virus titers of MERS-CoV at indicated time points are shown, n=4/group. Representative data of 3 independent experiments are shown as mean±SEM and analyzed by Student's t test. *, P < 0.05.



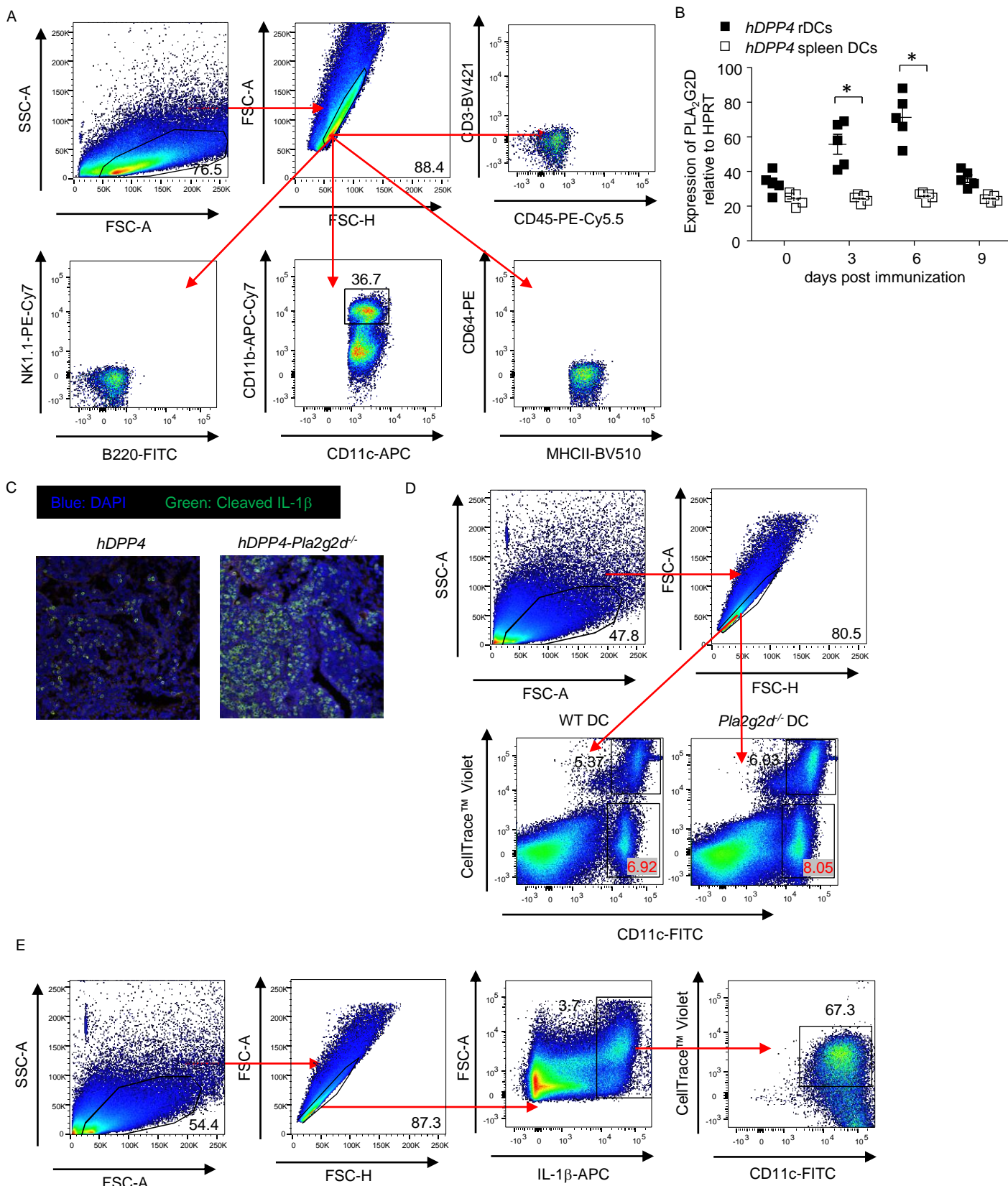
Supplementary Figure 4. Antibody production in immunized middle-aged *hDPP4* and *hDPP4-Pla2g2d^{-/-}* mice. 5-month *hDPP4* or *hDPP4-Pla2g2d^{-/-}* mice were immunized with VRP-MERS-S/VRP-MERS-N, or PBS i.n. on days 0 and 28. **(A)** Sera and BAL IgG were harvested at 15 dpi and quantitated by ELISA using mouse IgG standard as described in Methods, n=6/group. **(B, C)** Serum MERS-CoV-specific PRNT₅₀ antibody titers at indicated days post i.n. **(B)** and i.p. **(C)** immunization with VRP-MERS-S, n=4/group. Data are shown as mean±SEM and are representative of 3 independent experiments. Data shown in **A** and **B** were compared using Student's t test.* p<0.05.



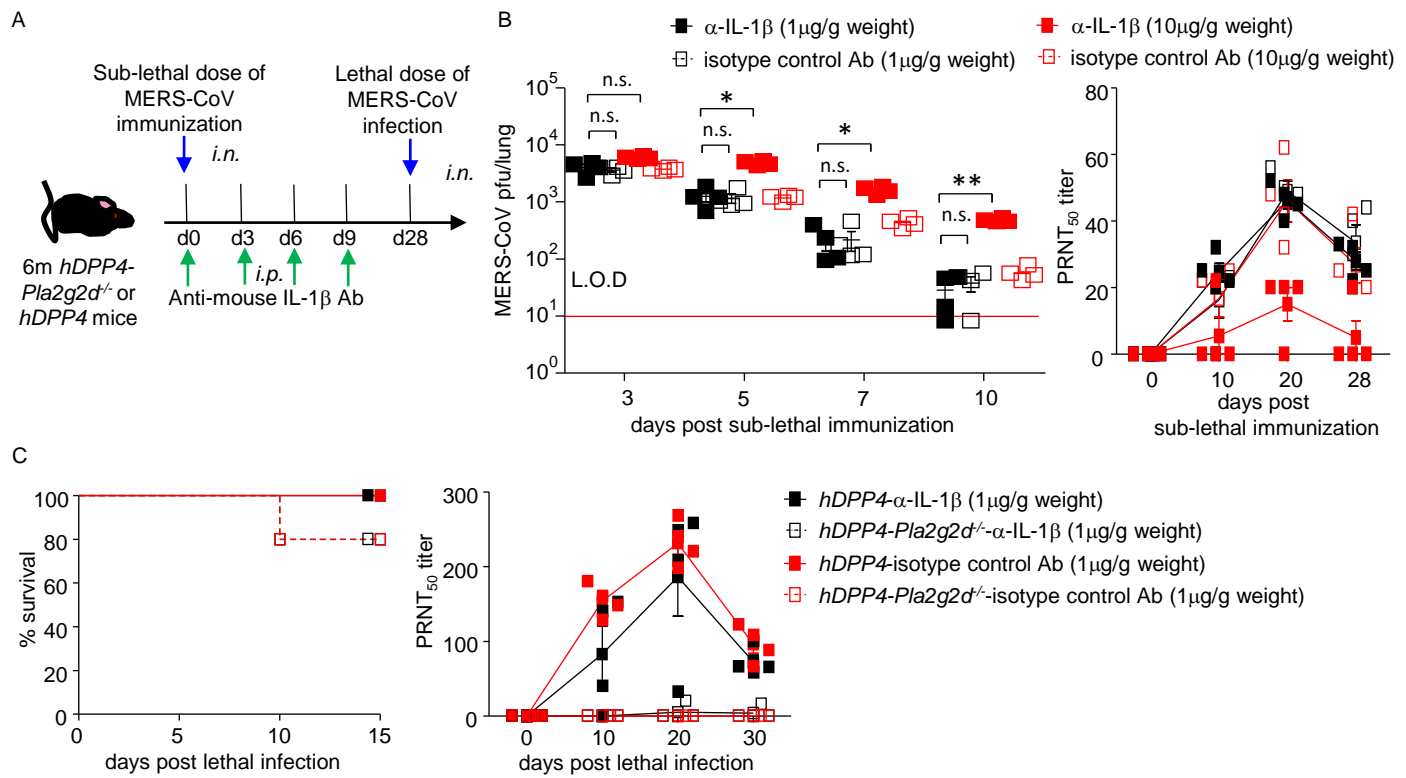
Supplementary Figure 5. PLA₂G2D deficiency specifically impairs the development of Tfh subpopulation. (A-C) Dynamics of Tfh development in lungs and spleens of middle-aged mice immunized with SARS-CoV-2 (A) or VSRP-SARS-S (B), or young mice immunized with a sublethal dose of MERS-CoV (C) at indicated days post immunization, n=5/group. (D) 5-month *hDPP4-Pla2g2d*^{-/-} mice and *hDPP4* mice were immunized with VSRP-MERS-N as described above. Lungs and spleens were harvested on day 70 post priming. Expression of T-bet (Th1), GATA-3 (Th2), RORγt (Th17), Foxp3 (regulatory T cells, Treg) and Bcl-6 (Tfh) by lung and spleen CD4 T cells was determined by flow cytometry. Data are shown as means±SEM and are representative of 3 independent experiments. n=5/group, (D) Data were analyzed using Student's t test. ** p<0.01.



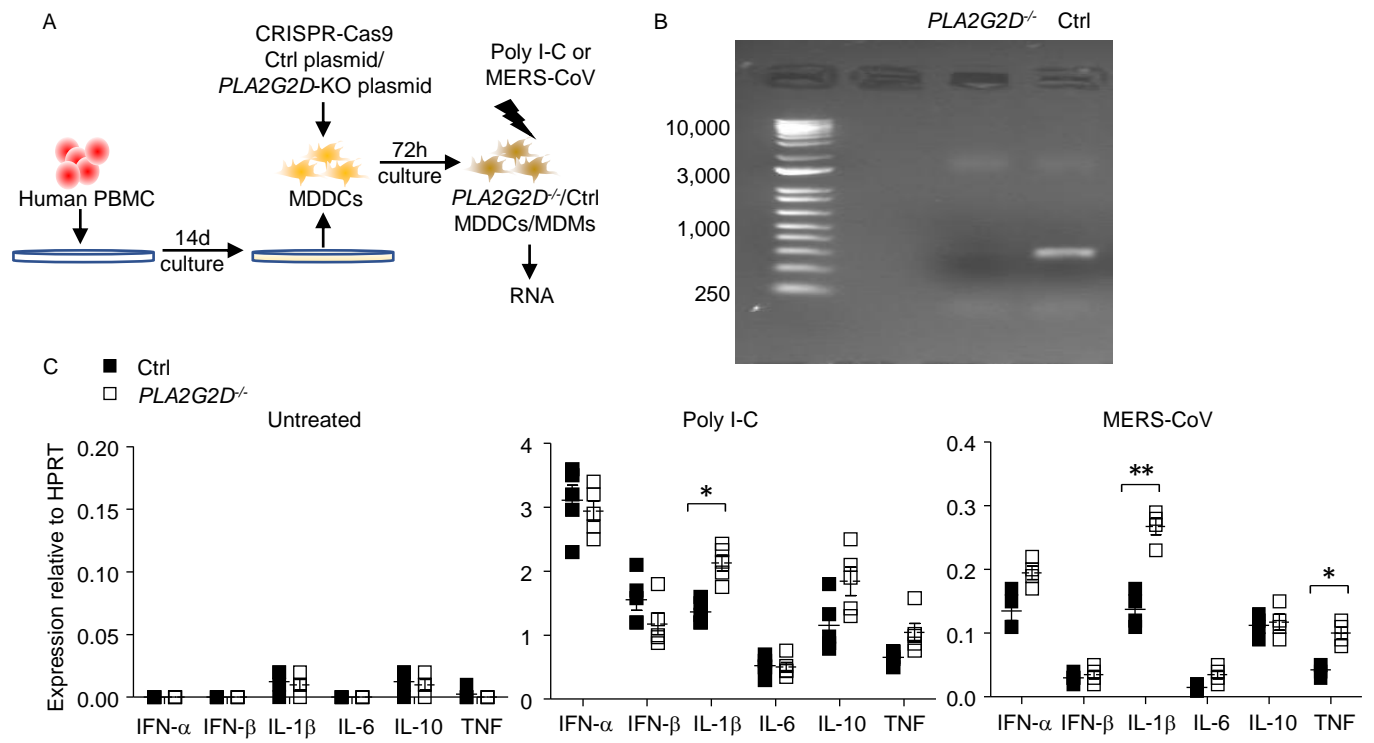
Supplementary Figure 6. Impaired Tfh development in immunized middle-aged mice is mediated by T cell-extrinsic factors. (A) Protocol for CD4 T cell adoptive transfer. (B, C) The relative percentage (B) and absolute numbers (C) of PD-1⁺CXCR5⁺Thy1.1⁺CD45.1⁺ and PD-1⁺CXCR5⁺Thy1.1⁻CD45.1⁻ cells in lungs, DLNs and spleens of recipient Thy1.1⁺ mice at indicated days post infection are shown. (D) Protocol for CD4 Tfh cell adoptive transfer (left) and neutralizing antibody production by recipient mice (right) after lethal challenge. Data are shown as means \pm SEM and are representative of 3 independent experiments. n=4/group/time point.



Supplementary Figure 7. Lung compared to spleen DCs express high levels of PLA₂G2D and IL-1 β . 5-month *hDPP4* and *hDPP4-Pla2g2d^{-/-}* mice were treated with VRP-MERS-S or PBS i.n. on day 0 and 28, followed by a lethal dose (750pfu) of MERS-CoV on day 70, i.n. Mice were treated intranasally with CFSE at day 0 post infection to track the migration of rDCs. **(A)** Phenotype of purified rDCs (CD3⁺CD19⁻CD56⁺MHC-II⁺CD64⁺). **(B)** Expression of *Pla2g2d* by rDCs and spleen DCs harvested from immunized *hDPP4* mice is shown. Data are shown as means \pm SEM and analyzed using Student's t test. n=5/group, * p<0.05. **(C)** Expression of cleaved IL-1 β by purified CD11c⁺ rDCs from *hDPP4* or *hDPP4-Pla2g2d^{-/-}* mice determined by fluorescent microscopy. **(D)** CellTrace dye (Violet)-labelled CD11c⁺ rDCs from *hDPP4* or *hDPP4-Pla2g2d^{-/-}* mice were adoptively transferred into *hDPP4-Pla2g2d^{-/-}* mice as described in Fig. 5C. Transferred CD11c⁺ rDCs in DLN of recipients at 5 days post transfer were detected by flow cytometry. **(E)** CellTrace dye (Violet) and CD11c expression of IL-1 β -expressing cells in DLN were determined by flow cytometry. **(C-E)** Data are representative of 3 independent experiments.



Supplementary Figure 8. IL-1 β blockade alone failed to reverse impaired neutralizing antibody production. (A) 6-month *hDPP4* or *hDPP4-Pla2g2d^{-/-}* mice were inoculated with a sublethal dose (100pfu) of MERS-CoV *i.n.* on day 0 and treated with different doses of anti-IL-1 β antibody. (B) Lung virus titers of MERS-CoV and neutralizing antibody production by *hDPP4* mice were determined at the indicated time points. $n=4$ /group. Each pair of data shown in D was compared using 1-way ANOVA, * $p<0.05$; ** $p<0.01$. (C) The survival of, and neutralizing antibody production by *hDPP4* or *hDPP4-Pla2g2d^{-/-}* mice after lethal challenge ($n=5$ /group) are shown. Data are shown as means \pm SEM and are representative of 3 independent experiments.



Supplementary Figure 9. PLA₂G2D deficiency modifies the inflammatory status of human MDMs and MDDCs. (A) Protocol for engineering human PLA₂G2D^{-/-} MDDCs, using CRISPR-Cas9, as described in Methods. (B) Efficacy of deletion was monitored by PCR for each donor (shown for one donor). (C) RNA expression of inflammation-related molecules (IFN-α, IFN-β, IL-1β, IL-6, IL-10, TNF) in untreated, Poly I-C-treated or MERS-CoV-infected MDDCs as determined by RT-PCR. Data in C are from five 50-60 year old human donors and analyzed using Student's t test, * p<0.05, ** p<0.01.