

1 **Supplementary Figure 1.** Efficacy of MVA-mIL12 in CT26 peritoneal metastatic model.
2 (A) C57BL/6 mice were challenged SC with MC38 cells. After 7 days, mice with
3 established tumors were randomized and treated IT 3 times with MVA empty at 10^7 IFU
4 alone or in combination with α PD1, with MVA empty at 6×10^5 IFU alone or in
5 combination with α PD1 or leave untreated. Tumor volume was monitored over time.
6 Percentages on the graphs indicate the response rate ($n \geq 6$) (B) C57BL/6 mice were
7 challenged SC with MC38 cells. After 7 days, mice with established tumors were
8 randomized and treated IT one time or two times with MVA-mIL12 6×10^5 IFU in
9 combination with α PD1. Tumor volume was monitored over time. Lines in the graphs
10 represent each individual tumor (full lines, responder tumors; dot lines, non-responder
11 tumors). Percentages on the graphs indicate the response rate ($n = 10$). (C) BALB/c
12 mice were injected in the peritoneum with CT26 cells. After 3 days, mice were treated IP
13 with MVA-mIL12 at 10^7 IFU, with MVA-mIL12 at 6×10^5 IFU alone or in combination with
14 α PD1, with MVA empty 10^7 IFU or α PD1 as control. Mice survival was monitored over
15 time ($n = 8$). (D) Mice that survived in Figure S1B were re-challenged IP with CT26 cells
16 and survival was monitored over time ($n \geq 6$). Comparison of survival curves with
17 Gehan-Breslow-Wilcoxon test. ****, $P < 0.0001$.

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19 **Supplementary Figure 2.** Mechanism of action of MVA-mIL12 in CT26 peritoneal
20 metastatic model. (A-D) BALB/c mice were injected in the peritoneum with CT26 cells.
21 After 3 days, mice were treated IP with MVA-mIL12 at 10^7 IFU or with MVA empty at
22 day 0, 2 and 4. At different time points as in the scheme same animals of all the groups
23 were sacrificed and PEC were collected and analyzed by Flow Cytometry ($n \geq 3$). Graph
24 bars represent the percentage of (A) F480+ CD11b+ Macrophages, (B) MHCII+ CD206-
25 M1 Macrophages and CD206+ MHCII- M2 Macrophages at day 14, (C) CD11c+
26 Dendritic Cells, CD103+ XCR1+ cDC1 (D) CD8+ and CD4+ lymphocytes. Data are
27 presented as median values + SEM; $n \geq 3$ mice. (E) BALB/c mice were injected in the
28 peritoneum with CT26 cells. After 3 days, mice were treated IP with MVA-mIL12 10^7 IFU
29 alone or in combination with α CD4 or α CD8 depletion antibody. (F) TREG Flow
30 Cytometry analysis at day 3 of the experiment in (A-D). Graph bars represent the
31 percentage of FOXP3+ CD4+ Lymphocytes. (G) C57BL/6 mice were challenged SC
32 with MC38 cells. After 7 days, mice with established tumors were randomized and
33 treated intra-muscular (IM) as in the scheme with MVA-mIL12 (lower dose) 6×10^5 IFU in
34 combination with α PD1. Tumor volume was monitored over time. Lines in the graph
35 represent each individual tumor. Percentages on the graphs indicate the response rate.
36 One-way ANOVA test with Fisher's LSD test was performed to obtain P value. *, $P <$
37 0.05; **, $P < 0.005$; ***, $P < 0.001$; ****, $P < 0.0001$.

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39 **Supplementary Figure 3. RT-PCR validation of gene expression signature. (A)**
40 C57BL/6 mice were challenged SC with MC38 cells. After 7 days, mice with established
41 tumors were randomized and treated (as in figure 5) with the combination of MVA-IL12
42 (6×10^5 IFU) with α PD1, with MVA-IL12 (6×10^5 IFU) alone, with α PD1 or with MVA empty
43 (6×10^5 IFU). Tumors from all the groups were collected and analyzed by RT-PCR. One-
44 way ANOVA test with Fisher's LSD test was performed to obtain P value. *, $P < 0.05$; **,
45 $P < 0.005$; ***, $P < 0.001$.