

SUPPLEMENTARY TABLES AND FIGURES

Supplementary Table S1. Change from Baseline to Week 52 in efficacy endpoints		
	Filgotinib 200mg (<i>n</i> = 2)	Filgotinib 200mg/ Lanraplenib 30mg (<i>n</i> = 1)
24-hour urine protein in g/day, median change (% change)	-1.8 (-78.3)	-7.2 (-94.6)
Spot UPCR in mg/mg, median change (% change)	-0.6 (-80.3)	-2.3 (-83.0)
24-hour UPCR in mg/mg, median change (% change)	-1.0 (-62.3)	-3.1 (-88.6)
eGFR in mL/min/1.73m ² , median change	-24.5	-14.0
Partial remission, n (%)	2 (100.0)	1 (100.0)
Complete remission, n (%)	1 (50.0)	0 (0.0)
SELENA-SLEDAI total score, median change (% change)	-2.0 (-66.7)	0.0 (0.0)
Physician global assessment score, median % change	-100.0	-51.4
Patient global assessment score, median % change	-43.8	-26.6
Anti-dsDNA in IU/mL, median change	39.0	43.0
C3 complement component in mg/dL, median change	-22.0	50.3
C4 complement component in mg/dL, median change	-3.7	6.2

SD = standard deviation; g = gram; mg = milligram; UPCR = urine protein to creatinine ratio; eGFR = estimated glomerular filtration rate; SELENA-SLEDAI = Safety of Estrogens in Lupus National Assessment-Systemic Lupus Erythematosus Disease Activity Index; anti-dsDNA = anti-double-stranded DNA antibody.

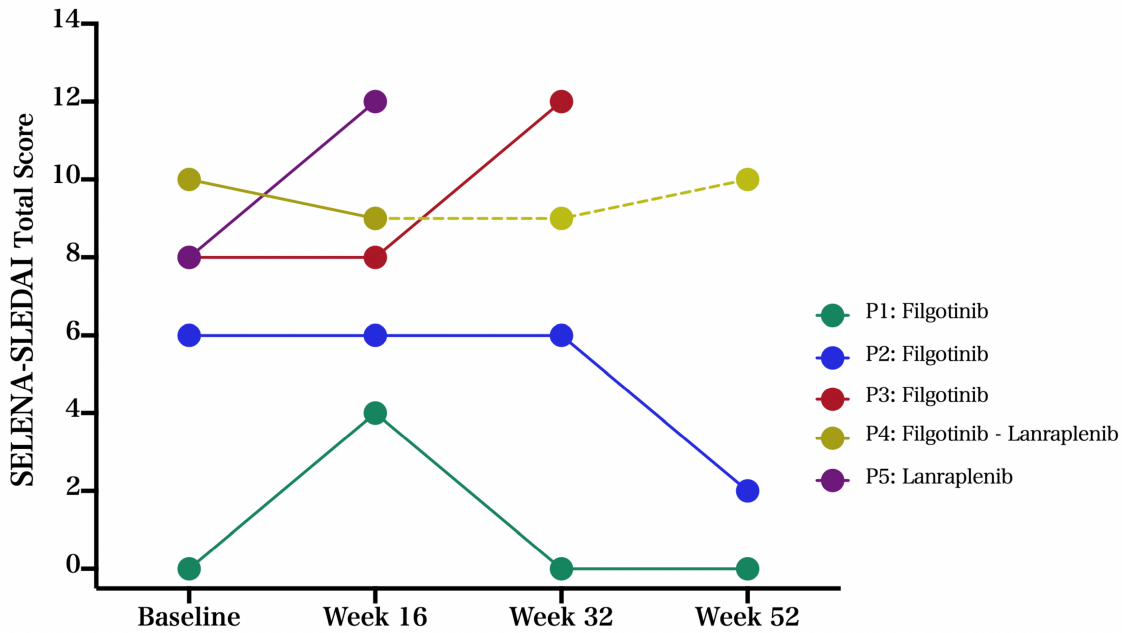
Supplementary Table S2. Treatment-emergent treatment-related adverse events						
	Up to Week 16		After Week 16			
	Filgotinib 200mg (<i>n</i> = 5)	Lanraplenib 30mg (<i>n</i> = 4)	Filgotinib 200mg (<i>n</i> = 3)	Lanraplenib 30mg (<i>n</i> = 0)	Filgotinib 200mg/ Lanraplenib 30mg (<i>n</i> = 1)	Lanraplenib 30mg /Filgotinib 200mg (<i>n</i> = 1)
Subjects with any treatment-related TEAE, n (%)	2 (40.0)	1 (25.0)	0 (0.0)	-	0 (0.0)	0 (0.0)
Nausea	1 (20.0)	0 (0.0)	0 (0.0)	-	0 (0.0)	0 (0.0)
Fatigue	1 (20.0)	0 (0.0)	0 (0.0)	-	0 (0.0)	0 (0.0)
Lymphocytes decreased	0 (0.0)	1 (25.0)	0 (0.0)	-	0 (0.0)	0 (0.0)

mg = milligram; TEAE = treatment-emergent adverse event.
Safety Analysis Set includes subjects who received at least 1 dose of study drug. Treatment-emergent events began on or after the study drug start date up to 30 days after permanent discontinuation of study drug or led to premature study drug discontinuation.

Supplementary Table S3. TEAEs leading to premature discontinuation of study drug

	Up to Week 16		After Week 16			
	Filgotinib 200mg (n = 5)	Lanraplenib 30mg (n = 4)	Filgotinib 200mg (n = 3)	Lanraplenib 30mg (n = 0)	Filgotinib 200mg/Lanraplenib 30mg (n = 1)	Lanraplenib 30mg/Filgotinib 200mg (n = 1)
Subjects with any TEAE leading to discontinuation of study drug, n (%)	1 (20.0)	2 (50.0)	0 (0.0)	-	0 (0.0)	0 (0.0)
Neutropenia	1 (20.0)	0 (0.0)	0 (0.0)	-	0 (0.0)	0 (0.0)
Lymphocytes decreased	0 (0.0)	1 (25.0)	0 (0.0)	-	0 (0.0)	0 (0.0)
Lupus	0 (0.0)	1 (25.0)	0 (0.0)	-	0 (0.0)	0 (0.0)

mg = milligram; TEAE = treatment-emergent adverse event.
Safety Analysis Set includes subjects who received at least 1 dose of study drug. Treatment-emergent events began on or after the study drug start date up to 30 days after permanent discontinuation of study drug or led to premature study drug discontinuation. Multiple adverse events are counted only once per subject for each preferred term.



Supplementary Figure S1. Patient-level changes in the SELENA-SLEDAI total score