

ANTIBODIES TO LILRB2**SEQUENCE LISTING**

The instant application contains a Sequence Listing which has been submitted electronically in
 5 ASCII format and is hereby incorporated by reference in its entirety. Said ASCII copy, created on
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BACKGROUND

Myeloid cells, such as dendritic cells and macrophages, can instruct the adaptive immune system
 10 to mount a response against tumor cells and pathogens by presenting peptide antigens to T cells while
 expressing immunogenic cytokines and costimulatory signals, thereby promoting cytotoxic T cell
 activation and proliferation. Conversely, in a steady state condition, myeloid cells maintain tolerance to
 endogenous proteins by presenting self-antigens to T cells in the context of non-immunogenic signals,
 such as regulatory cytokines, which can promote regulatory T cells and suppress immunogenicity.

15 Cancer cells can evade the immune system by engaging signaling pathways associated with
 immunosuppressive or immunoregulatory antigen presentation. Such evasion events represent a major
 obstacle to therapeutic strategies that rely on promoting anti-tumor immunity. Therefore, there is a need
 for therapeutic compositions and methods that prevent tumor-induced immunosuppression and promote
 immunogenic presentation of tumor antigens by myeloid cells.

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SUMMARY

The present invention features antibodies that specifically bind to human LILRB2. Also provided
 are compositions of the anti-LILRB2 antibodies and methods of using the anti-LILRB2 antibodies and
 compositions thereof.

25 In one aspect, the invention provides antibodies that specifically binds to human LILRB2, wherein
 the antibody comprises the following complementarity determining regions (CDRs): (a) a CDR-H1
 comprising the amino acid sequence of JY(J)₂G(J)₂ (SEQ ID NO: 171); (b) a CDR-H2 comprising the
 amino acid sequence of (J)₂W(J)₁₁KJ (SEQ ID NO: 172); (c) a CDR-H3 comprising the amino acid
 sequence of (J)₂I(J)₃TDYV(J)₃ (SEQ ID NO: 173); (d) a CDR-L1 comprising the amino acid sequence of
 30 (J)₈DLJ (SEQ ID NO: 174); (e) a CDR-L2 comprising the amino acid sequence of (J)₇ (SEQ ID NO: 175);
 and (f) a CDR-L3 comprising the amino acid sequence of (J)₃YJYPLJ (SEQ ID NO: 176); wherein each J
 is independently a naturally occurring amino acid (see, e.g., Table 1, below).

In some embodiments, the CDR-H2 comprises the amino acid sequence of SJW(J)₁₁KJ (SEQ ID
 NO: 177) and/or the CDR-L3 comprises the amino acid sequence of (J)₃YDYPLJ (SEQ ID NO: 178).

35 In some embodiments, the CDR-H1 comprises the amino acid sequence of: (i) TYAMGVS (SEQ
 ID NO: 15); (ii) JYAMGVS (SEQ ID NO: 179); (iii) TYJMGVS (SEQ ID NO: 180); (iv) TYAJGVS (SEQ ID
 NO: 181); (v) TYAMGJS (SEQ ID NO: 182); (vi) TYAMGVJ (SEQ ID NO: 183); or (vii) a variant of any one
 of (ii) to (vi) comprising an additional J amino acid in place of a recited amino acid that is represented by a
 J in SEQ ID NO: 171. Thus, when a variant sequence is aligned with SEQ ID NO: 171, it maintains the
 40 non-J amino acids that are set forth in SEQ ID NO: 171. The additional J amino acid in the variant thus
 aligns with an amino acid that is a J in SEQ ID NO: 171.

In some embodiments, the CDR-H2 comprises the amino acid sequence of: (i) SIWWNGNKYNNPSLKS (SEQ ID NO: 16); (ii) SJWWNGNKYNNPSLKS (SEQ ID NO: 184); (iii) SIWJNGNKYNNPSLKS (SEQ ID NO: 185); (iv) SIWWJGNGNKYNNPSLKS (SEQ ID NO: 186); (v) SIWWNJNKYNNPSLKS (SEQ ID NO: 187); (vi) SIWWNGJKYNNPSLKS (SEQ ID NO: 188); (vii) SIWWNGNJYNNPSLKS (SEQ ID NO: 189); (viii) SIWWNGNKJNNPSLKS (SEQ ID NO: 190); (ix) SIWWNGNKYJNPSLKS (SEQ ID NO: 191); (x) SIWWNGNKYNJPSLKS (SEQ ID NO: 192); (xi) SIWWNGNKYNNJSLKS (SEQ ID NO: 193); (xii) SIWWNGNKYNNPJLKS (SEQ ID NO: 194); (xiii) SIWWNGNKYNNPSJKS (SEQ ID NO: 195); (xiv) SIWWNGNKYNNPSLKJ (SEQ ID NO: 196); or (xv) a variant of any one of (ii) to (xiv) comprising an additional J amino acid in place of a recited amino acid that is represented by a J in SEQ ID NO: 172. Thus, when a variant sequence is aligned with SEQ ID NO: 172, it maintains the non-J amino acids that are set forth in SEQ ID NO: 172. The additional J amino acid in the variant thus aligns with an amino acid that is a J in SEQ ID NO: 172.

In some embodiments, the CDR-H3 comprises the amino acid sequence of: (i) SRIIRFTDYVMDA (SEQ ID NO: 17); (ii) JRIIRFTDYVMDA (SEQ ID NO: 197); (iii) SJIRFTDYVMDA (SEQ ID NO: 198); (iv) SRIJRFTDYVMDA (SEQ ID NO: 199); (v) SRIJFTDYVMDA (SEQ ID NO: 200); (vi) SRIIRJTDYVMDA (SEQ ID NO: 201); (vii) SRIIRFTDYVJDA (SEQ ID NO: 202); (viii) SRIIRFTDYVMJA (SEQ ID NO: 203); (ix) SRIIRFTDYVMDJ (SEQ ID NO: 204); or (x) a variant of any one of (ii) to (ix) comprising an additional J amino acid in place of a recited amino acid that is represented by a J in SEQ ID NO: 173. Thus, when a variant sequence is aligned with SEQ ID NO: 173, it maintains the non-J amino acids that are set forth in SEQ ID NO: 173. The additional J amino acid in the variant thus aligns with an amino acid that is a J in SEQ ID NO: 173.

In some embodiments, the CDR-L1 comprises the amino acid sequence of: (i) RASEDIYNDLA (SEQ ID NO: 18); (ii) JASEDIYNDLA (SEQ ID NO: 205); (iii) RASEDIYNDLA (SEQ ID NO: 206); (iv) RAJEDIYNDLA (SEQ ID NO: 207); (v) RASJDIYNDLA (SEQ ID NO: 208); (vi) RASEJIYNDLA (SEQ ID NO: 209); (vii) RASEDJYNDLA (SEQ ID NO: 210); (viii) RASEDIJNDLA (SEQ ID NO: 211); (ix) RASEDIYJDLA (SEQ ID NO: 212); (x) RASEDIYNDLJ (SEQ ID NO: 213); or (xi) a variant of any one of (ii) to (x) comprising an additional J amino acid in place of a recited amino acid that is represented by a J in SEQ ID NO: 174. Thus, when a variant sequence is aligned with SEQ ID NO: 174, it maintains the non-J amino acids that are set forth in SEQ ID NO: 174. The additional J amino acid in the variant thus aligns with an amino acid that is a J in SEQ ID NO: 174.

In some embodiments, the CDR-L2 comprises the amino acid sequence of: (i) NANSLHT (SEQ ID NO: 19); (ii) JANSLHT (SEQ ID NO: 214); (iii) NJNSLHT (SEQ ID NO: 215); (iv) NAJSLHT (SEQ ID NO: 216); (v) NANJLHT (SEQ ID NO: 217); (vi) NANSJHT (SEQ ID NO: 218); (vii) NANSLJT (SEQ ID NO: 219); (viii) NANSLHJ (SEQ ID NO: 220); or (ix) a variant of any one of (ii) to (viii) comprising an additional J amino acid in place of a recited amino acid that is represented by a J in SEQ ID NO: 175. Thus, when a variant sequence is aligned with SEQ ID NO: 175, it maintains the non-J amino acids that are set forth in SEQ ID NO: 175. The additional J amino acid in the variant thus aligns with an amino acid that is a J in SEQ ID NO: 175.

In some embodiments, the CDR-L3 comprises the amino acid sequence of: (i) QQYYDYPLT (SEQ ID NO: 20); (ii) JQYYDYPLT (SEQ ID NO: 221); (iii) QJYYDYPLT (SEQ ID NO: 222); (iv) QQJYDYPLT (SEQ ID NO: 223); (v) QQYYDYPLJ (SEQ ID NO: 224); or (vi) a variant of any one of (ii) to (v) comprising an additional J amino acid in place of a recited amino acid that is represented by a J in

SEQ ID NO: 176. Thus, when a variant sequence is aligned with SEQ ID NO: 176, it maintains the non-J amino acids that are set forth in SEQ ID NO: 176. The additional J amino acid in the variant thus aligns with an amino acid that is a J in SEQ ID NO: 176.

In some embodiments, the CDR-H2 comprises the amino acid sequence of
 5 JIWWNGNKYNNPSLKS (SEQ ID NO: 225), or a variant thereof comprising an additional J amino acid in place of a recited amino acid that is represented by a J in SEQ ID NO: 172, and/or the CDR-L3 comprises the amino acid sequence of QQYYJYPLT (SEQ ID NO: 226), or a variant thereof comprising an additional J amino acid in place of a recited amino acid that is represented by a J in SEQ ID NO: 176. Thus, when a variant sequence is aligned with SEQ ID NO: 176, it maintains the non-J amino acids that are set forth in
 10 SEQ ID NO: 176. The additional J amino acid in the variant thus aligns with an amino acid that is a J in SEQ ID NO: 176.

In various embodiments of the above, one or more of the CDRs comprises said additional J amino acid. In additional embodiments, one or more of the CDRs comprises 2, 3, 4, 5, 6, 7, 8, 9, 10, or more additional J amino acids. In these additional embodiments, each of the additional J amino acids
 15 aligns with an amino acid that is a J in the respective generic formula for the CDR. The specifically recited amino acids of a generic formula are maintained.

In some embodiments, the CDR-H3 comprises the amino acid sequence of (J)₂IJXJTDYV(J)₃ (SEQ ID NO: 227), wherein X is not arginine. In some embodiments, X is selected from the group consisting of aspartate, glutamate, and alanine. In some embodiments, the CDR-H3 comprises the
 20 sequence of: (i) JRIIXFTDYVMDA (SEQ ID NO: 228); (ii) SJIIXFTDYVMDA (SEQ ID NO: 229); (iii) SRIIXFTDYVMDA (SEQ ID NO: 230); (iv) SRIIXFTDYVMDA (SEQ ID NO: 231); (v) SRIIXJTDYVMDA (SEQ ID NO: 232); (vi) SRIIXFTDYVJDA (SEQ ID NO: 233); (vii) SRIIXFTDYVMJA (SEQ ID NO: 234); (viii) SRIIXFTDYVMDJ (SEQ ID NO: 235); or (ix) a variant of any one of (ii) to (iii) or (v) to (viii) comprising an additional J amino acid in place of a recited amino acid that is represented by a J in SEQ ID NO: 173.

In some embodiments, the antibody comprises a variable heavy chain (V_H) region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 3, 13, 23, 33, 43, 53, 63, 73, 83, 93, 103, or 113, and/or a variable light chain (V_L) region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 4, 14, 24, 34, 44, 54, 64, 74, 84, 94, 104, or 114. It is to be understood herein that if a sequence is required in an independent
 30 claim and a dependent claim permits variability in a larger sequence encompassing the sequence of the independent claim, that the variability is not applicable to the sequence required in the independent claim,

In some embodiments, the antibody comprises a variable heavy chain (V_H) region comprising the amino acid sequence of SEQ ID NO: 3, 13, 23, 33, 43, 53, 63, 73, 83, 93, 103, or 113, and/or a variable light chain (V_L) region comprising the amino acid sequence of SEQ ID NO: 4, 14, 24, 34, 44, 54, 64, 74,
 35 84, 94, 104, or 114.

In some embodiments, the antibody comprises a heavy chain comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 1, 11, 21, 31, 41, 51, 61, 71, 81, 91, 101, or 111, and/or a light chain comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 2, 22, 32, 42, 52, 62, 72, 82, 92, 102, or 112.

40 In another aspect, the invention provides an antibody that specifically binds to human LILRB2, wherein the antibody comprises the following six complementarity determining regions (CDRs): (a) a CDR-H1 comprising the amino acid sequence of SEQ ID NO: 15; (b) a CDR-H2 comprising the amino

acid sequence of SEQ ID NO: 16; (c) a CDR-H3 comprising the amino acid sequence of SEQ ID NO: 17; (d) a CDR-L1 comprising the amino acid sequence of SEQ ID NO: 18; (e) a CDR-L2 comprising the amino acid sequence of SEQ ID NO: 19; and (f) a CDR-L3 comprising the amino acid sequence of SEQ ID NO: 20.

5 In some embodiments, the antibody comprises a variable heavy chain (V_H) region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 13 and a variable light chain (V_L) region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 14, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 15-17, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 18-20. In some embodiments, the antibody comprises a V_H region comprising the amino acid sequence of SEQ ID NO: 13 and a V_L region comprising the amino acid sequence of SEQ ID NO: 14. In some embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 11 and a light chain comprising the amino acid sequence of SEQ ID NO: 12.

15 In some embodiments, the antibody comprises a V_H region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 53 and a V_L region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 54, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 15-17, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 18-20. In particular embodiments, the antibody comprises a V_H region comprising the amino acid sequence of SEQ ID NO: 53 and a variable light chain V_L region comprising the amino acid sequence of SEQ ID NO: 54. In some embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 51 and a light chain comprising the amino acid sequence of SEQ ID NO: 52.

25 In other embodiments, the antibody comprises a V_H region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 63 and a V_L region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 64, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 15-17, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 18-20. In some embodiments, the antibody comprises a V_H region comprising the amino acid sequence of SEQ ID NO: 63 and a V_L region comprising the amino acid sequence of SEQ ID NO: 64. In some embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 61 and a light chain comprising the amino acid sequence of SEQ ID NO: 62.

35 In some embodiments, the antibody comprises a V_H region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 73 and a V_L region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 74, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 15-17, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 18-20. In particular embodiments, the antibody comprises a V_H region comprising the amino acid sequence of SEQ ID NO: 73 and a V_L region comprising the amino acid sequence of SEQ ID NO: 74. In some embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 71 and a light chain comprising the amino acid sequence of SEQ ID NO: 72.

In other embodiments, the antibody comprises a V_H region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 83 and a V_L region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 84, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 15-17, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 18-20. In some embodiments, the antibody comprises a V_H region comprising the amino acid sequence of SEQ ID NO: 83 and a V_L region comprising the amino acid sequence of SEQ ID NO: 84. In particular embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 81 and a light chain comprising the amino acid sequence of SEQ ID NO: 82.

In other embodiments, the antibody comprises a V_H region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 93 and a V_L region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 94, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 15-17, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 18-20. In some embodiments, the antibody comprises a V_H region comprising the amino acid sequence of SEQ ID NO: 93 and a V_L region comprising the amino acid sequence of SEQ ID NO: 94. In particular embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 91 and a light chain comprising the amino acid sequence of SEQ ID NO: 92.

In other embodiments, the antibody comprises a V_H region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 103 and a V_L region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 104, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 15-17, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 18-20. In some embodiments, the antibody comprises a V_H region comprising the amino acid sequence of SEQ ID NO: 103 and a V_L region comprising the amino acid sequence of SEQ ID NO: 104. In particular embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 101 and a light chain comprising the amino acid sequence of SEQ ID NO: 102.

In other embodiments, the antibody comprises a V_H region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 113 and a V_L region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 114, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 15-17, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 18-20. In some embodiments, the antibody comprises a V_H region comprising the amino acid sequence of SEQ ID NO: 113 and a V_L region comprising the amino acid sequence of SEQ ID NO: 114. In particular embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 111 and a light chain comprising the amino acid sequence of SEQ ID NO: 112.

In another aspect, the invention provides an antibody that specifically binds to human LILRB2, wherein the antibody comprises the following six CDRs: (a) a CDR-H1 comprising the amino acid sequence of SEQ ID NO: 5; (b) a CDR-H2 comprising the amino acid sequence of SEQ ID NO: 6; (c) a CDR-H3 comprising the amino acid sequence of SEQ ID NO: 7; (d) a CDR-L1 comprising the amino acid sequence of SEQ ID NO: 8; (e) a CDR-L2 comprising the amino acid sequence of SEQ ID NO: 9; and (f) a CDR-L3 comprising the amino acid sequence of SEQ ID NO: 10.

In some embodiments, the antibody comprises a V_H region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 3 and a V_L region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 4, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 5-7, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 8-10. In some embodiments, the antibody comprises a V_H region comprising the amino acid sequence of SEQ ID NO: 3 and a V_L region comprising the amino acid sequence of SEQ ID NO: 4. In particular embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 1 and a light chain comprising the amino acid sequence of SEQ ID NO: 2.

In another aspect, the invention features an antibody that specifically binds to human LILRB2, wherein the antibody comprises the following six CDRs: (a) a CDR-H1 comprising the amino acid sequence of SEQ ID NO: 25; (b) a CDR-H2 comprising the amino acid sequence of SEQ ID NO: 26; (c) a CDR-H3 comprising the amino acid sequence of SEQ ID NO: 27; (d) a CDR-L1 comprising the amino acid sequence of SEQ ID NO: 28; (e) a CDR-L2 comprising the amino acid sequence of SEQ ID NO: 29; and (f) a CDR-L3 comprising the amino acid sequence of SEQ ID NO: 30.

In some embodiments, the antibody comprises a V_H region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 23 and a V_L region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 24, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 25-27, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 28-30. In some embodiments, the antibody comprises a V_H region comprising the amino acid sequence of SEQ ID NO: 23 and a V_L region comprising the amino acid sequence of SEQ ID NO: 24. In some embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 21 and a light chain comprising the amino acid sequence of SEQ ID NO: 22.

In another aspect, the invention features an antibody that specifically binds to human LILRB2, wherein the antibody comprises the following six CDRs: (a) a CDR-H1 comprising the amino acid sequence of SEQ ID NO: 35; (b) a CDR-H2 comprising the amino acid sequence of SEQ ID NO: 36; (c) a CDR-H3 comprising the amino acid sequence of SEQ ID NO: 37; (d) a CDR-L1 comprising the amino acid sequence of SEQ ID NO: 38; (e) a CDR-L2 comprising the amino acid sequence of SEQ ID NO: 39; and (f) a CDR-L3 comprising the amino acid sequence of SEQ ID NO: 40.

In some embodiments, the antibody comprises a V_H region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 33 and a V_L region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 34, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 35-37, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 38-40. In some embodiments, the antibody comprises a V_H region comprising the amino acid sequence of SEQ ID NO: 33 and a V_L region comprising the amino acid sequence of SEQ ID NO: 34. In some embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 31 and a light chain comprising the amino acid sequence of SEQ ID NO: 32.

In another aspect, the invention features an antibody that specifically binds to human LILRB2, wherein the antibody comprises the following six CDRs: (a) a CDR-H1 comprising the amino acid sequence of SEQ ID NO: 45; (b) a CDR-H2 comprising the amino acid sequence of SEQ ID NO: 46; (c) a

CDR-H3 comprising the amino acid sequence of SEQ ID NO: 47; (d) a CDR-L1 comprising the amino acid sequence of SEQ ID NO: 48; (e) a CDR-L2 comprising the amino acid sequence of SEQ ID NO: 49; and (f) a CDR-L3 comprising the amino acid sequence of SEQ ID NO: 50.

5 In some embodiments, the antibody comprises a V_H region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 43 and a V_L region comprising an amino acid sequence that is at least 90% identical to the amino acid sequence of SEQ ID NO: 44, wherein the V_H region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 45-47, and the V_L region comprises three CDRs comprising the amino acid sequences of SEQ ID NOs: 48-50. In some embodiments, the antibody comprises a V_H region comprising the amino acid sequence of
10 SEQ ID NO: 43 and a V_L region comprising the amino acid sequence of SEQ ID NO: 44. In some embodiments, the antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 41 and a light chain comprising the amino acid sequence of SEQ ID NO: 42.

In some embodiments of any of the antibodies described herein, e.g., those described above, the heavy chain of the antibody additionally comprises a C-terminal lysine.

15 With respect to all of the aspects and embodiments summarized above, when a specific sequence is referenced, the invention also includes variants of the sequences. In various embodiments, a variant can be specified as including 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, or more substitutions of a recited sequence.

In another aspect, the invention features an antibody that cross-competes for binding to human
20 LILRB2 with an antibody of the preceding aspects.

In another aspect, the invention features an antibody that specifically binds to human LILRB2 and blocks the binding of HLA-G and/or HLA-A2 to human LILRB2. In some embodiments, the blocking is determined in a HLA-G tetramer blocking assay using human monocyte-derived macrophages, human myeloid cells, and/or a cell line expressing LILRB2. In some embodiments, the assay includes the use of
25 HLA-G conjugated beads. In some embodiments, the antibody blocks HLA-G tetramer with an EC_{50} of less than 20 nM (e.g., less than 10 nM, less than 5 nM, less than 2 nM, less than 1.0 nM, less than 0.5 nM, or less than 0.2 nM). In some embodiments, the antibody blocks HLA-G tetramer with an EC_{50} of less than 0.2 nM. In some embodiments, the blocking is determined in a HLA-A2 tetramer blocking assay using human monocyte-derived macrophages. In some embodiments, the antibody blocks HLA-A2
30 tetramer with an EC_{50} of less than 20 nM (e.g., less than 10 nM, less than 5 nM, less than 2 nM, less than 1.0 nM, less than 0.5 nM, or less than 0.2 nM). In some embodiments, the antibody blocks HLA-A2 tetramer with an EC_{50} of less than 0.2 nM. In any of the foregoing embodiments, in which the antibody specifically binds to human LILRB2 and blocks the binding of HLA-G and/or HLA-A2 to human LILRB2, the antibody can be any of the antibodies of any other one or more aspects of the invention.

35 In another aspect, the invention provides an antibody that specifically binds to human LILRB2, wherein said antibody is capable of converting an M2-like macrophage to an M1-like macrophage. In some embodiments, the conversion of an M2-like macrophage to an M1-like macrophage is indicated by an increased expression of one or more genes (e.g., one, two, three, four, five, or all six genes) selected from the group consisting of CXCL9, CXCL11, IRF1, TAP1, IL6R, and IL15. Additionally or alternatively,
40 in some embodiments, the conversion of an M2-like macrophage to an M1-like macrophage is indicated by a decreased expression of one or more genes (e.g., one, two, three, four, five, six, seven, eight, or nine genes) selected from the group consisting of IL-10, CCL2, TGFB β 2, CXCL13, IL21R, CD36, CR1,

C1QB, and TGFBI. In some embodiments, the conversion of an M2-like macrophage to an M1-like macrophage is detected using a tumor histoculture assay. In some embodiments, the conversion of an M2-like macrophage to an M1-like macrophage is detected using a primary human macrophage assay using human monocyte-derived macrophages. In some embodiments, the conversion of an M2-like macrophage to an M1-like macrophage is indicated by an increased expression of one, two, or all three cytokines selected from the group consisting of TNF α , IL-1 β , and IL-6, and/or the conversion of an M2-like macrophage to an M1-like macrophage is indicated by decreased expression of one or both cytokines selected from the group consisting of IL-10 and CCL-2. In any of the foregoing embodiments, in which the antibody is capable of converting an M2-like macrophage to an M1-like macrophage, the antibody can be any of the antibodies of any other one or more aspects of the invention.

In some embodiments of any of the preceding aspects, the antibody binds to LILRB2 with a dissociation constant (K_D) of less than 3.0 nM (e.g., less than 1.5 nM, less than 1.0 nM, or less than 750 pM).

In some embodiments of any of the preceding aspects, the antibody is a monoclonal antibody. In some embodiments of any of the preceding aspects, the antibody is a chimeric antibody, a humanized antibody, a CDR-grafted antibody, or a human antibody. In some embodiments of any of the preceding aspects, the antibody includes an Fc region selected from the group consisting of a native Fc region, a variant Fc region, and a functional Fc region. In some embodiments of any of the preceding aspects, the antibody is a conjugate antibody or is detectably labeled. In some embodiments of any of the preceding aspects, the antibody is an IgG1 antibody, an IgG2 antibody, an IgG3 antibody, or an IgG4 antibody.

In all aspects of the invention, if an optional more specific embodiment is not consistent with a more general embodiment, then it may be considered as excluded from the general embodiment.

In another aspect, the invention provides a nucleic acid molecule encoding a polypeptide of the antibody of any of the preceding aspects.

In another aspect, the invention provides a host cell or vector including a nucleic acid molecule encoding a polypeptide of the antibody of any of the preceding aspects.

In another aspect, the invention features a pharmaceutical composition comprising the antibody of any of the preceding aspects or a nucleic acid molecule encoding the antibody of any of the preceding aspects.

In another aspect, the invention provides a method of treating a disease in a subject in need thereof, the method including administering to the subject a therapeutically effective amount of the antibody of any of the preceding aspects. In some embodiments, the disease is a cancer (see, e.g., examples of cancer types listed elsewhere herein). In some embodiments, the method further includes administering the antibody in combination with a second therapeutic agent (e.g., an immunotherapy or a cancer vaccine). In some embodiments, the second therapeutic agent is an immunotherapy comprising a PD-1 therapy and/or an ICOS therapy.

In another aspect, the invention provides a method of enhancing an anti-tumor immune response in a subject in need thereof, the method including administering to the subject a therapeutically effective amount of any of the preceding aspects. In some embodiments, the method further includes administering the antibody in combination with a second therapeutic agent (e.g., an immunotherapy or a cancer vaccine). In some embodiments, the second therapeutic agent is an immunotherapy comprising a PD-1 therapy and/or an ICOS therapy.

In other aspects, the invention includes use of the antibodies, pharmaceutical compositions, and combinations for preventing, treating, ameliorating one or more symptoms of a disease or condition (e.g., as described herein, for example, cancer) or the use of these agents for the preparation of a medicament for these purposes.

5 In another aspect, the invention provides a kit including a pharmaceutical composition comprising the antibody of any of the preceding aspects or a nucleic acid molecule encoding the antibody of any of the preceding aspects and instructions for use.

In a further aspect, the invention provides an oligonucleotide comprising a nucleic acid fragment, wherein nucleic acid fragment comprises at least 16 consecutive nucleic acid residues of the
10 oligonucleotide sequence of CGTCACCCTCAGTTGTCAG (SEQ ID NO: 143) or TCCGTGTAATCCAAGATGCTG (SEQ ID NO: 158). In some embodiments, the nucleic acid fragment comprises at least 16 consecutive nucleic acid residues of the oligonucleotide sequence of AGTCCCGTCACCCTCAGTTGTCAGGGGAG (SEQ ID NO: 169) or TCGTATCCGTGTAATCCAAGATGCTGATTTT (SEQ ID NO: 170).

15 The invention also includes a qPCR primer set comprising a forward primer and a reverse primer, wherein the forward primer comprises a nucleic acid fragment comprising at least 16 consecutive nucleic acid residues of the oligonucleotide sequence of SEQ ID NO: 143 or 169, and the reverse primer comprises a nucleic acid fragment comprising at least 16 consecutive nucleic acid residues of the oligonucleotide sequence of SEQ ID NO: 158 or 170, wherein the qPCR primer set is optionally
20 comprised within a kit that further comprises a probe comprising at least 16 consecutive residues of SEQ ID NO: 167.

In addition, the invention includes a method of quantifying a level of LILRB2 expression in a biological sample, the method comprising: (a) obtaining cDNA derived from a biological sample; (b) performing qPCR on the cDNA using an oligonucleotide of claim 87 or 88, or a qPCR primer set or kit of
25 claim 89, to produce an amplification product, wherein the qPCR is specific for LILRB2; and (c) quantifying the amplification product to determine the level of LILRB2 expression.

In another aspect, the invention provides use of an antibody as described herein (e.g., above and elsewhere herein) for treating or preventing a disease (e.g., cancer; see, e.g., below) in a subject in need thereof by administration of a therapeutically effective amount the antibody to the subject.

30 In a further aspect, the invention includes use of a therapeutically effective amount of an antibody as described herein (e.g., above and elsewhere herein) for enhancing an anti-tumor immune response in a subject in need thereof by administering an effective amount of the antibody to the subject.

In either of the above aspects, the use can further include administering the antibody in combination with a second therapeutic agent (e.g., an immunotherapy (e.g., a PD-1 therapy and/or an
35 ICOS therapy) or a cancer vaccine).

BRIEF DESCRIPTION OF THE DRAWINGS

FIG. 1 is a drawing depicting a model of a LILRB2-expressing myeloid cell and a HLA-G-expressing tumor cell. A blocking anti-LILRB2 antibody is shown between the LILRB2 expressed on the
40 myeloid cell and the HLA-G expressed on the tumor cell.

FIGS. 2A-2L are flow cytometry plots showing downregulation of maturation markers on DCs by HLA-G tetramers. Expression of maturation markers was assessed by flow cytometry on LILRB2^{hi/pos}

donor (FIGS. 2A-2F) and LILRB2^{low/neg} donor (FIGS. 2G-2L) immature dendritic cells (iDCs) cultured in media alone (open histograms, dotted lines), or matured with a cytokine cocktail in the absence (open histograms, solid lines) or presence (filled histograms) of HLA-G tetramer. Histograms are gated on live cells, as shown in FIGS. 2A and 2G. FIGS. 2B and 2H show LILRB2 expression; FIGS. 2C and 2I show CD11c expression; FIGS. 2D and 2J show HLA-DR expression; FIGS. 2E and 2K show CD86 expression; and FIGS. 2F and 2L show CD80 expression.

FIGS. 3A and 3B are tables showing results of a chimeric anti-LILRB2 screening. Shaded boxes indicate results which met threshold criteria for each screening assay.

FIG. 4 is a graph showing results of a cell-based LILR family cross-reactivity screen of anti-LILRB2 chimeric mAbs. hLILRB2-specific (filled symbols) and cross-reactive (open symbols) antibodies from the screen are shown. Antibodies detected with greater than two-fold binding over isotype control mAb were identified as hLILR cross-reactive antibodies (the dotted line represents this threshold).

FIG. 5 is a graph showing results of cell-based HLA-G blocking by anti-LILRB2 mAbs. HLA-G blocking anti-LILRB2 chimeric mAbs are shown in white bars and were identified as mAbs able to block at least 50% HLA-G binding to hLILRB2+ cells (dotted line). Non-blocking LILRB2 chimeric mAbs are represented in black bars, and an isotype control mAb is in a gray bar.

FIG. 6 is a graph showing results of cell-based HLA-A2 blocking by anti-LILRB2 mAbs. HLA-A2 blocking anti-LILRB2 chimeric mAbs are shown in white bars and were identified as mAbs able to block at least 50% HLA-A2 binding to hLILRB2+ cells (dotted line). Non-blocking LILRB2 chimeric mAbs are represented in black bars, and an isotype control mAb is in a gray bar.

FIGS. 7A and 7B are graphs showing results of cell-based functional assays of anti-LILRB2 mAbs. FIG. 7A shows TNF α production relative to isotype. FIG. 7B shows IL-10 production relative to isotype. Isotype controls are shown in gray/gray dashed lines.

FIGS. 8A and 8B are graphs showing correlation of ligand blocking vs M1-promoting cytokines by anti-LILRB2 mAbs. A positive correlation between HLA-G blocking (FIG. 8A) and HLA-A2 blocking (FIG. 8B) and TNF α produced in response to anti-LILRB2 mAbs (black circles) was observed in primary cell assays. Negative control mAbs are shown in gray.

FIGS. 9A-9C are graphs showing primary cell human-NHP cross-reactivity assessment of anti-LILRB2 mAbs. Antibodies were incubated with human (FIG. 9A), cyno (FIG. 9B), and rhesus (FIG. 9C) whole blood. Anti-LILRB2 mAbs showed greater binding LILRB2+ populations including monocytes (circles) and neutrophils (squares) relative to lymphocytes (triangles). All anti-LILRB2 mAbs bound human monocytes and neutrophils, and a single anti-LILRB2 mAb was found to exhibit cross-species binding to cyno and rhesus monocytes and neutrophils. Bars indicate mean of two donors per species.

FIGS. 10A and 10B are graphs showing on-cell binding assessment to CHO-expressed putative rhesus LILRB2 (LILRBb). Select anti-hLILRB2 chimeric mAb (black) bound selectively to putative rhesus LILRBb (FIG. 10A) in a dose-dependent and specific manner. This anti-hLILRB2 mAb did not bind the closely related protein in rhesus, LILRBa (FIG. 10B). Isotype control mAb (gray) did not bind either cell line.

FIGS. 11A and 11B are tables showing results of the humanized anti-LILRB2 characterization.

FIG. 12 is a graph showing results of a cell-based LILR family cross-reactivity screen of anti-LILRB2 humanized mAbs. hLILRB2-specific (filled symbols) antibodies from the screen are shown. No LILR-cross-reactive antibodies were identified.

FIG. 13 is a graph showing cell-based affinity determination of humanized anti-hLILRB2 mAbs. All anti-hLILRB2 mAbs tested exhibited dose-dependent specific binding to cell-expressed hLILRB2 (black), while the isotype control mAb did not bind hLILRB2 (gray).

FIG. 14 is a graph showing cell-based HLA-G blocking by anti-LILRB2 humanized mAbs.

- 5 Humanized anti-hLILRB2 mAbs (black, filled circles) block HLA-G:hLILRB2 interactions on primary human macrophages within the sub-nanomolar range. Isotype control mAb (gray) and non-blocking, chimeric anti-hLILRB2 mAb (open circles) did not disrupt the interaction between HLA-G and cell-expressed hLILRB2.

FIG. 15 is a graph showing cell-based HLA-A2 blocking by anti-LILRB2 humanized mAbs.

- 10 Humanized anti-hLILRB2 mAbs (black, filled circles) block HLA-A2:hLILRB2 interactions on primary human macrophages within the sub-nanomolar range. Isotype control mAb (gray) and non-blocking, chimeric anti-hLILRB2 mAb (open circles) did not disrupt the interaction between HLA-A2 and cell-expressed hLILRB2.

FIGS. 16A and 16B are graphs showing results of a cell-based functional assay of anti-LILRB2

- 15 humanized mAbs. Humanized anti-hLILRB2 mAbs (black, filled circles) exhibit M1-promoting activity as measured by TNF α production (FIG. 16A) and suppressive-M2 activity as measured by a reduction in IL-10 production (FIG. 16B) by LPS-stimulated HMDMs. Negative control mAbs including isotype control (gray) and non-ligand blocking anti-hLILRB2 chimeric mAb (open circles) did not show activity in this assay.

FIGS. 17A and 17B are graphs showing results of an on-cell binding assessment to CHO-

- 20 expressed rhesus LILRB2 (LILRBb). Select anti-hLILRB2 humanized mAb (black) bound selectively to rhesus LILRBb (FIG. 17A) in a dose-dependent and specific manner. This anti-hLILRB2 mAb did not bind the closely related protein in rhesus, LILRBa (FIG. 17B). Isotype control mAb (gray) did not bind either cell line.

FIG. 18 is a volcano plot showing log₂ (fold change) in gene expression in response to treatment with respect to palivizumab control vs. -log₁₀ (nominal p value). Each dot depicts the average normalized change in gene expression across all samples receiving the same treatment. Calculations were performed in MATLAB®, and p values were calculated by performing using the ttest function (the null hypothesis is that the average normalized log₂ (fold change) in gene expression across all samples for a particular treatment is 0).

- 30 FIG. 19 is a hierarchical clustering heatmap showing the log₂ (fold change) in gene expression of each gene (row) in each treated sample (column) normalized to an IgG4 control for each kidney histoculture sample. Each gene in the list showed differential expression to at least two treatments with a nominal p value less than 0.055 (see Table 7). The expression of Set 1 genes is generally downregulated in response to treatment (gray boxes) and the expression of Set 2 genes is generally upregulated in response to treatment (black boxes). The noise threshold is set at 0.3 based on housekeeping gene expression distribution. A Euclidean distance metric was used in the complete linkage clustering, which was performed in Spotfire.

FIG. 20 is a graph showing a response score for each donor to each ligand-blocking anti-LILRB2

- 40 antibodies.
- FIGS. 21A and 21B are graphs showing monoculture signature scores for each of three anti-LILRB2 antibodies for each non-responder, partial responder, and full responder.

FIG. 22 is a graph showing binding of serum protein to antibodies over antibody concentration. No serum protein binding to LILRB2 antibodies was observed.

FIGS. 23A-23D are graphs showing the results of a whole blood cytokine release assay. FIG. 23A shows IL-4 secretion, FIG. 23B shows IL-6 secretion, FIG. 23C shows IL-8 secretion, and FIG. 23D shows TNF α secretion. The assay was incubated for 24 hours at 37°C. Plasma was then isolated with cytokines and measured using a 10-cytokine MSD panel. Data are mean $\pm$ SD of three donors.

FIGS. 24A-24D are graphs showing the results of a neutrophil activation assay. FIG. 24A shows CD11b expression (as geometric mean fluorescence intensity), FIG. 24B shows the percent of CD11b high cells, FIG. 24C shows CD62L expression (as geometric mean fluorescence intensity), and FIG. 24D shows the percent of CD62L low cells, each in response to various antibody concentrations. The assay was incubated for 2 hours at 37°C. Changes in neutrophil activation markers (increase in CD11b and decrease in CD62L) were assessed by flow cytometry. Data are mean $\pm$ SD of two donors.

FIG. 25 is a graph showing the serum concentration of anti-LILRB2 antibody in cynomolgus monkeys over time, after a 30 mg/kg dose or a three mg/kg dose. Data are the average $\pm$ SD of three individual monkeys.

FIGS. 26A and 26B are graphs showing peripheral blood neutrophil populations measured by complete blood count (CBC) assay in cynomolgus monkeys pre-study and following dosing of anti-LILRB2 antibodies. Data are presented as absolute number of cells (FIG. 26A) and as a percent of total (FIG. 26B).

FIGS. 27A and 27B are graphs showing growth of tumors in mice over time after inoculation with B16.SIY cells. FIG. 27A shows tumor growth in wild type (WT) mice, and FIG. 27B shows tumor growth in PirB knockout (Pirb $^{-/-}$) mice.

FIGS. 28A and 28B are graphs showing growth of tumors in mice over time after inoculation with LLC cells. FIG. 28A shows tumor growth in WT mice, and FIG. 28B shows tumor growth in Pirb $^{-/-}$ mice.

FIGS. 29A and 29B are graphs showing growth of tumors in mice over time after inoculation with MC38 cells. FIG. 29A shows tumor growth in WT mice, and FIG. 29B shows tumor growth in Pirb $^{-/-}$ mice.

FIG. 30 shows the sequences of the heavy chain (SEQ ID NO: 53) and light chain (SEQ ID NO: 54) variable regions of J-19.h1.

FIG. 31 is a histogram of the IFN γ PD response scores from 173 tumor samples from 80 tumors treated with palivizumab for 24 hours.

FIG. 32 is a Venn diagram and chart describing the PD response rates to J-19.h1 across 3 indications: renal cell carcinoma, head and neck cancer, and lung cancer.

FIG. 33 is a series of graphs showing Keytruda signature scores calculated for untreated samples, based on normalized gene expression (raw gene expression is normalized to housekeeping genes and negative control probes, then log2 transformed).

FIG. 34, left panel, is a table showing average IFN γ PD signature scores calculated for 18 head and neck tumors in response to J-19.h1, pembrolizumab, or J-19.h1 combined with pembrolizumab.

DETAILED DESCRIPTION OF SOME EMBODIMENTS

In general, the present invention features antibodies against leukocyte immunoglobulin-like receptor B2 (LILRB2), e.g., antibodies useful for treating disease (e.g., cancer). This invention is based, in part, on the discovery that it is possible to generate antibodies that are simultaneously (1) specific to LILRB2 (e.g., in that they do not bind other LILRA and LILRB family members), (2) capable of blocking HLA-G and/or HLA-A2 binding to LILRB2 on macrophages, and (3) capable of promoting a pro-inflammatory phenotype in contacted macrophages. Indeed, the present application discloses the identification of three independent families of such antibodies and discloses that antibodies with the above properties are capable of inducing tumor-associated macrophages to exhibit anti-cancer properties. Based, in part, on these properties, as well as favorable pharmacokinetic and safety properties in animal models relevant to human physiology, the disclosed antibodies are candidates for therapeutic use in humans.

Antibodies that specifically bind LILRB2 (e.g., human LILRB2) are provided. Antibody heavy chains and light chains that are capable of forming antibodies that bind LILRB2 (e.g., human LILRB2) are also provided. In addition, antibodies, heavy chains, and light chains comprising one or more particular complementarity determining region (CDR) are provided. Also provided are antibodies that cross-compete for binding to LILRB2 (e.g., human LILRB2) with any of the antibodies described herein. In some aspects, the present invention provides antibodies that specifically bind to LILRB2 (e.g., human LILRB2) and blocks the binding of HLA-G and/or HLA-A2 to human LILRB2. Also provided are antibodies that specifically bind to LILRB2 (e.g., human LILRB2) and are capable of converting an M2-like macrophage into an M1-like macrophage. Polynucleotides encoding antibodies to LILRB2 (e.g., any of the LILRB2 antibodies provided herein) are provided. Polynucleotides encoding antibody heavy chains or light chains thereof are also provided. Host cells containing polynucleotides disclosed herein are also provided. Additionally, pharmaceutical compositions including any of the antibodies or polynucleotides provided herein are provided. Methods of treatment using antibodies to LILRB2 are provided. Such methods include, but are not limited to, methods of treating cancer.

The section headings used herein are for organizational purposes only and are not to be construed as limiting the subject matter described.

All references cited herein, including patent applications, patent publications, and Genbank Accession numbers are herein incorporated by reference, as if each individual reference were specifically and individually indicated to be incorporated by reference in its entirety.

The techniques and procedures described or referenced herein are generally well understood and commonly employed using conventional methodology by those skilled in the art, such as, for example, the widely utilized methodologies described in Sambrook et al., *Molecular Cloning: A Laboratory Manual* 3rd. edition (2001) Cold Spring Harbor Laboratory Press, Cold Spring Harbor, N.Y. Current Protocols in Molecular Biology (F. M. Ausubel, et al. eds., (2003)); the series *Methods in Enzymology* (Academic Press, Inc.); *PCR 2: A Practical Approach* (M. J. MacPherson, B. D. Hames and G. R. Taylor eds. (1995)), Harlow and Lane, eds. (1988) *Antibodies, A Laboratory Manual*, and *Animal Cell Culture* (R. I. Freshney, ed. (1987)); *Oligonucleotide Synthesis* (M. J. Gait, ed., 1984); *Methods in Molecular Biology*, Humana Press; *Cell Biology: A Laboratory Notebook* (J. E. Cellis, ed., 1998) Academic Press; *Animal Cell Culture* (R. I. Freshney, ed., 1987); *Introduction to Cell and Tissue Culture* (J. P. Mather and P. E. Roberts, 1998) Plenum Press; *Cell and Tissue Culture Laboratory Procedures* (A. Doyle, J. B. Griffiths,

and D. G. Newell, eds., 1993-8) J. Wiley and Sons; Handbook of Experimental Immunology (D. M. Weir and C. C. Blackwell, eds.); Gene Transfer Vectors for Mammalian Cells (J. M. Miller and M. P. Calos, eds., 1987); PCR: The Polymerase Chain Reaction, (Mullis et al., eds., 1994); Current Protocols in Immunology (J. E. Coligan et al., eds., 1991); Short Protocols in Molecular Biology (Wiley and Sons, 1999); Immunobiology (C. A. Janeway and P. Travers, 1997); Antibodies (P. Finch, 1997); Antibodies: A Practical Approach (D. Catty, ed., IRL Press, 1988-1989); Monoclonal Antibodies: A Practical Approach (P. Shepherd and C. Dean, eds., Oxford University Press, 2000); Using Antibodies: A Laboratory Manual (E. Harlow and D. Lane (Cold Spring Harbor Laboratory Press, 1999); The Antibodies (M. Zanetti and J. D. Capra, eds., Harwood Academic Publishers, 1995); and Cancer: Principles and Practice of Oncology (V. T. DeVita et al., eds., J.B. Lippincott Company, 1993); and updated versions thereof.

I. Definitions

Unless otherwise defined, scientific and technical terms used in connection with the present disclosure shall have the meanings that are commonly understood by those of ordinary skill in the art. Further, unless otherwise required by context or expressly indicated, singular terms shall include pluralities and plural terms shall include the singular. For any conflict in definitions between various sources or references, the definition provided herein will control.

It is understood that embodiments of the invention described herein include "consisting" and/or "consisting essentially of" embodiments. As used herein, the singular form "a", "an," and "the" includes plural references unless indicated otherwise. Use of the term "or" herein is not meant to imply that alternatives are mutually exclusive.

In this application, the use of "or" means "and/or" unless expressly stated or understood by one skilled in the art. In the context of a multiple dependent claim, the use of "or" refers back to more than one preceding independent or dependent claim.

The terms "nucleic acid molecule," "nucleic acid," and "polynucleotide" may be used interchangeably, and refer to a polymer of nucleotides. Such polymers of nucleotides may contain natural and/or non-natural nucleotides, and include, but are not limited to, DNA, RNA, and PNA. "Nucleic acid sequence" refers to the linear sequence of nucleotides that comprise the nucleic acid molecule or polynucleotide.

The terms "polypeptide" and "protein" are used interchangeably to refer to a polymer of amino acid residues, and are not limited to a minimum length. Such polymers of amino acid residues may contain natural or non-natural amino acid residues, and include, but are not limited to, peptides, oligopeptides, dimers, trimers, and multimers of amino acid residues. Both full-length proteins and fragments thereof are encompassed by the definition. The terms also include post-expression modifications of the polypeptide, for example, glycosylation, sialylation, acetylation, phosphorylation, and the like. Furthermore, for purposes of the present disclosure, a "polypeptide" refers to a protein which includes modifications, such as deletions, additions, and substitutions (generally conservative in nature), to the native sequence, as long as the protein maintains the desired activity. These modifications may be deliberate, as through site-directed mutagenesis, or may be accidental, such as through mutations of hosts which produce the proteins or errors due to PCR amplification.

The term "specifically binds" to an antigen or epitope is a term that is well understood in the art, and methods to determine such specific binding are also well known in the art. A molecule is said to

exhibit "specific binding" or "preferential binding" if it reacts or associates more frequently, more rapidly, with greater duration and/or with greater affinity with a particular cell or substance than it does with alternative cells or substances. An antibody "specifically binds" or "preferentially binds" to a target if it binds with greater affinity, avidity, more readily, and/or with greater duration than it binds to other substances. For example, an antibody that specifically or preferentially binds to an LILRB2 epitope is an antibody that binds this epitope with greater affinity, avidity, more readily, and/or with greater duration than it binds to other LILRB2 epitopes or non-LILRB2 epitopes. It is also understood by reading this definition that, for example, an antibody (or moiety or epitope) that specifically or preferentially binds to a first target may or may not specifically or preferentially bind to a second target. As such, "specific binding" or "preferential binding" does not necessarily require (although it can include) exclusive binding. Generally, but not necessarily, reference to binding means preferential binding. "Specificity" refers to the ability of a binding protein to selectively bind an antigen.

As used herein, "substantially pure" refers to material which is at least 50% pure (that is, free from contaminants), e.g., at least 90% pure, at least 95% pure, at least 98% pure, or at least 99% pure.

The term "cross-competes" refers to competitive binding of one molecule with another, e.g., by binding to all or part of the same epitope. Cross-competition can be determined using the experiments described herein (e.g., biolayer interferometry), for example, by detecting no positive response signal upon addition of a second antibody to a sensor after a first antibody is bound to the signal. In particular embodiments, one LILRB2 antibody cross-competes another LILRB2 antibody for binding to LILRB2. Characterization of such cross-competition between LILRB2 antibodies is described, e.g., in Example 3.

The term "antibody" herein is used in the broadest sense and encompasses various antibody structures, including but not limited to monoclonal antibodies, polyclonal antibodies, multispecific antibodies (for example, bispecific (such as Bi-specific T-cell engagers) and trispecific antibodies), and antibody fragments so long as they exhibit the desired antigen-binding activity.

The term antibody includes, but is not limited to, fragments that are capable of binding to an antigen, such as Fv, single-chain Fv (scFv), Fab, Fab', di-scFv, sdAb (single domain antibody) and (Fab')₂ (including a chemically linked F(ab')₂). Papain digestion of antibodies produces two identical antigen-binding fragments, called "Fab" fragments, each with a single antigen-binding site, and a residual "Fc" fragment, whose name reflects its ability to crystallize readily. Pepsin treatment yields an F(ab')₂ fragment that has two antigen-combining sites and is still capable of cross-linking antigen. The term antibody also includes, but is not limited to, chimeric antibodies, humanized antibodies, and antibodies of various species such as mouse, human, cynomolgus monkey, etc. Furthermore, for all antibody constructs provided herein, variants having the sequences from other organisms are also contemplated. Thus, if a human version of an antibody is disclosed, one of skill in the art will appreciate how to transform the human sequence based antibody into a mouse, rat, cat, dog, horse, etc. sequence. Antibody fragments also include either orientation of single chain scFvs, tandem di-scFv, diabodies, tandem tri-sdcFv, minibodies, etc. Antibody fragments also include nanobodies (sdAb, an antibody having a single, monomeric domain, such as a pair of variable domains of heavy chains, without a light chain). An antibody fragment can be referred to as being a specific species in some embodiments (for example, human scFv or a mouse scFv). This denotes the sequences of at least part of the non-CDR regions, rather than the source of the construct.

The term "monoclonal antibody" refers to an antibody of a substantially homogeneous population of antibodies, that is, the individual antibodies comprising the population are identical except for possible naturally-occurring mutations that may be present in minor amounts. Monoclonal antibodies are highly specific, being directed against a single antigenic site. Furthermore, in contrast to polyclonal antibody preparations, which typically include different antibodies directed against different determinants (epitopes), each monoclonal antibody is directed against a single determinant on the antigen. Thus, a sample of monoclonal antibodies can bind to the same epitope on the antigen. The modifier "monoclonal" indicates the character of the antibody as being obtained from a substantially homogeneous population of antibodies, and is not to be construed as requiring production of the antibody by any particular method.

For example, the monoclonal antibodies may be made by the hybridoma method first described by Kohler and Milstein, 1975, *Nature* 256:495, or may be made by recombinant DNA methods such as described in U.S. Pat. No. 4,816,567. The monoclonal antibodies may also be isolated from phage libraries generated using the techniques described in McCafferty et al., 1990, *Nature* 348:552-554, for example.

The term "CDR" denotes a complementarity determining region as defined by the Kabat numbering scheme. Kabat et al., *Sequences of Proteins of Immunological Interest*, 5th Ed. Public Health Service, National Institutes of Health, Bethesda, MD (1991). Exemplary CDRs (CDR-L1, CDR-L2, CDR-L3, CDR-H1, CDR-H2, and CDR-H3) occur at amino acid residues 24-34 of L1, 50-56 of L2, 89-97 of L3, 31-35B of H1, 50-65 of H2, and 95-102 of H3. CDRs can also be provided as shown in any one or more of the accompanying figures. With the exception of CDR1 in a variable heavy chain region (V_H), CDRs generally comprise the amino acid residues that form the hypervariable loops. The various CDRs within an antibody can be designated by their appropriate number and chain type, including, without limitation as: a) CDR-L1, CDR-L2, CDR-L3, CDR-H1, CDR-H2, and CDR-H3; b) CDRL1, CDRL2, CDRL3, CDRH1, CDRH2, and CDRH3; c) LCDR-1, LCDR-2, LCDR-3, HCDR-1, HCDR-2, and HCDR-3; or d) LCDR1, LCDR2, LCDR3, HCDR1, HCDR2, and HCDR3; etc. The term "CDR" is used herein to also encompass HVR or a "hypervariable region", including hypervariable loops. Exemplary hypervariable loops occur at amino acid residues 26-32 (L1), 50-52 (L2), 91-96 (L3), 26-32 (H1), 53-55 (H2), and 96-101 (H3). (Chothia and Lesk, 1987, *J. Mol. Biol.* 196:901-917.)

The term "heavy chain variable region" or V_H as used herein refers to a region comprising at least three heavy chain CDRs. In some embodiments, the heavy chain variable region includes the three CDRs and at least FR2 and FR3. In some embodiments, the heavy chain variable region includes at least heavy chain HCDR1, framework (FR) 2, HCDR2, FR3, and HCDR3. In some embodiments, a heavy chain variable region also comprises at least a portion of an FR1 and/or at least a portion of an FR4.

The term "heavy chain constant region" as used herein refers to a region comprising at least three heavy chain constant domains, C_{H1} , C_{H2} , and C_{H3} . Of course, non-function-altering deletions and alterations within the domains are encompassed within the scope of the term "heavy chain constant region," unless designated otherwise. Nonlimiting exemplary heavy chain constant regions include γ , δ , and α . Nonlimiting exemplary heavy chain constant regions also include ϵ and μ . Each heavy constant region corresponds to an antibody isotype. For example, an antibody comprising a γ constant region is an IgG antibody, an antibody comprising a δ constant region is an IgD antibody, and an antibody comprising an α constant region is an IgA antibody. Further, an antibody comprising a μ constant region is an IgM antibody, and an antibody comprising an ϵ constant region is an IgE antibody. Certain isotypes

can be further subdivided into subclasses. For example, IgG antibodies include, but are not limited to, IgG1 (comprising a γ_1 constant region), IgG2 (comprising a γ_2 constant region), IgG3 (comprising a γ_3 constant region), and IgG4 (comprising a γ_4 constant region) antibodies; IgA antibodies include, but are not limited to, IgA1 (comprising an α_1 constant region) and IgA2 (comprising an α_2 constant region)

5 antibodies; and IgM antibodies include, but are not limited to, IgM1 and IgM2.

The term "heavy chain" as used herein refers to a polypeptide comprising at least a heavy chain variable region, with or without a leader sequence. In some embodiments, a heavy chain comprises at least a portion of a heavy chain constant region. The term "full-length heavy chain" as used herein refers to a polypeptide comprising a heavy chain variable region and a heavy chain constant region, with or

10 without a leader sequence.

The term "light chain variable region" of V_L as used herein refers to a region comprising at least three light chain CDRs. In some embodiments, the light chain variable region includes the three CDRs and at least FR2 and FR3. In some embodiments, the light chain variable region includes at least light chain LCDR1, framework (FR) 2, LCDR2, FR3, and LCDR3. For example, a light chain variable region

15 may comprise light chain CDR1, framework (FR) 2, CDR2, FR3, and CDR3. In some embodiments, a light chain variable region also comprises at least a portion of an FR1 and/or at least a portion of an FR4.

The term "light chain constant region" as used herein refers to a region comprising a light chain constant domain, C_L . Nonlimiting exemplary light chain constant regions include λ and κ . Of course, non-function-altering deletions and alterations within the domains are encompassed within the scope of the

20 term "light chain constant region," unless designated otherwise.

The term "light chain" as used herein refers to a polypeptide comprising at least a light chain variable region, with or without a leader sequence. In some embodiments, a light chain comprises at least a portion of a light chain constant region. The term "full-length light chain" as used herein refers to a polypeptide comprising a light chain variable region and a light chain constant region, with or without a

25 leader sequence.

An "acceptor human framework" for the purposes herein is a framework comprising the amino acid sequence of a light chain variable domain (V_L) framework or a heavy chain variable domain (V_H) framework derived from a human immunoglobulin framework or a human consensus framework, as defined below. An acceptor human framework derived from a human immunoglobulin framework or a human consensus framework can comprise the same amino acid sequence thereof, or it can contain amino acid sequence changes. In some embodiments, the number of amino acid changes are 10 or fewer, 9 or fewer, 8 or fewer, 7 or fewer, 6 or fewer, 5 or fewer, 4 or fewer, 3 or fewer, or 2 or fewer. In some embodiments, the V_L acceptor human framework is identical in sequence to the V_L human immunoglobulin framework sequence or human consensus framework sequence.

35 "Affinity" refers to the strength of the sum total of noncovalent interactions between a single binding site of a molecule (for example, an antibody) and its binding partner (for example, an antigen). The affinity of a molecule X for its partner Y can generally be represented by the equilibrium dissociation constant (K_D). Affinity can be measured by common methods known in the art (such as, for example, ELISA K_D , KinExA, bio-layer interferometry (BLI), and/or surface plasmon resonance devices (such as a

40 BIACORE® device), including those described herein).

The term " K_D ", as used herein, refers to the equilibrium dissociation constant of an antibody-antigen interaction.

In some embodiments, the " K_D " of the antibody is measured by using surface plasmon resonance assays using a BIACORE®-2000 or a BIACORE®-3000 (BIAcore, Inc., Piscataway, N.J.) at 25°C with immobilized antigen CM5 chips at ~10 response units (RU). Briefly, carboxymethylated dextran biosensor chips (CM5, BIAcore, Inc.) are activated with N-ethyl-N'-(3-dimethylaminopropyl)-carbodiimide hydrochloride (EDC) and N-hydroxysuccinimide (NHS) according to the supplier's instructions. Antigen is diluted with 10 mM sodium acetate, pH 4.8, to 5 µg/ml (~0.2 µM), before injection at a flow rate of 5 µL/minute to achieve approximately 10 response units (RU) of coupled protein. Following the injection of antigen, 1 M ethanolamine is injected to block unreacted groups. For kinetics measurements, serial dilutions of polypeptide, for example, full length antibody, are injected in PBS with 0.05% TWEEN-20™ surfactant (PBST) at 25°C at a flow rate of approximately 25 µL/min. Association rates (k_{on}) and dissociation rates (k_{off}) are calculated using a simple one-to-one Langmuir binding model (BIACORE® Evaluation Software version 3.2) by simultaneously fitting the association and dissociation sensorgrams. The equilibrium dissociation constant (K_D) is calculated as the ratio k_{off}/k_{on} . See, for example, Chen et al., 1999, *J. Mol. Biol.* 293:865-881. If the on-rate exceeds $10^6 \text{ M}^{-1}\text{s}^{-1}$ by the surface plasmon resonance assay above, then the on-rate can be determined by using a fluorescent quenching technique that measures the increase or decrease in fluorescence emission intensity (excitation=295 nm; emission=340 nm, 16 nm band-pass) at 25°C of a 20 nM anti-antigen antibody in PBS, pH 7.2, in the presence of increasing concentrations of antigen as measured in a spectrometer, such as a stop-flow equipped spectrophotometer (Aviv Instruments) or a 8000-series SLM-AMINCO™ spectrophotometer (ThermoSpectronic) with a stirred cuvette.

In some embodiments, the difference between said two values (for example, K_D values) is substantially the same, for example, less than about 50%, less than about 40%, less than about 30%, less than about 20%, and/or less than about 10% as a function of the reference/comparator value.

In some embodiments, the difference between said two values (for example, K_D values) is substantially different, for example, greater than about 10%, greater than about 20%, greater than about 30%, greater than about 40%, and/or greater than about 50% as a function of the value for the reference/comparator molecule.

"Surface plasmon resonance" denotes an optical phenomenon that allows for the analysis of real-time biospecific interactions by detection of alterations in protein concentrations within a biosensor matrix, for example using the BIAcore™ system (BIAcore International AB, a GE Healthcare company, Uppsala, Sweden and Piscataway, N.J.). For further descriptions, see Jonsson et al., 1993, *Ann. Biol. Clin.* 51:19-26.

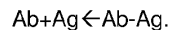
"Bilayer interferometry" refers to an optical analytical technique that analyzes the interference pattern of light reflected from a layer of immobilized protein on a biosensor tip and an internal reference layer. Changes in the number of molecules bound to the biosensor tip cause shifts in the interference pattern that can be measured in real-time. A nonlimiting exemplary device for bilayer interferometry is FORTEBIO® OCTET® RED96 system (Pall Corporation). See, e.g., Abdiche et al., 2008, *Anal. Biochem.* 377: 209-277.

The term " k_{on} ", as used herein, refers to the rate constant for association of an antibody to an antigen. Specifically, the rate constants (k_{on} and k_{off}) and equilibrium dissociation constant (K_D) are measured using IgGs (bivalent) with monovalent antigen (e.g., LILRB2 antigen). " K_{on} ", " k_{on} ", "association rate constant", or " k_a ", are used interchangeably herein. The value indicates the binding rate of a binding

protein to its target antigen or the rate of complex formation between an antibody and antigen, shown by the equation:



The term " k_{off} ", as used herein, refers to the rate constant for dissociation of an antibody from the antibody/antigen complex. k_{off} is also denoted as " K_{off} " or the "dissociation rate constant". This value indicates the dissociation rate of an antibody from its target antigen or separation of Ab-Ag complex over time into free antibody and antigen as shown by the equation:



The term "biological activity" refers to any one or more biological properties of a molecule (whether present naturally as found in vivo, or provided or enabled by recombinant means). Biological properties include, but are not limited to, binding a receptor, inducing cell proliferation, inhibiting cell growth, inducing maturation or activation (e.g., myeloid cell maturation or activation), inhibiting maturation or activation (e.g., myeloid cell maturation or activation), inducing cytokine expression or secretion (e.g., inflammatory cytokines or immunosuppressive cytokines), inducing apoptosis, and enzymatic activity. In some embodiments, biological activity of an LILRB2 protein includes, for example, conversion of M2-like macrophages to M1-like macrophages.

An "M2-like macrophage," as used herein, refers to a macrophage characterized by one or more immunosuppressive characteristics, relative to a reference. Immunosuppressive characteristics include decreased maturation marker or activation marker expression (e.g., decreased expression of one or more costimulatory markers (e.g., CD80 or CD86), decreased antigen presentation (e.g., by HLA expression), decreased expression of inflammatory cytokines (e.g., TNF α , IL-6, or IL-1 β), and increased regulatory or suppressive marker expression (e.g., increased IL-10 or CCL-2 expression or secretion). Immunosuppressive characteristics may additionally or alternatively be characterized by decrease in immunogenic or inflammatory gene expression, or increase in immunosuppressive or immunoregulatory gene expression, according to methods known in the art. Immunosuppressive characteristics may additionally or alternatively be characterized by one or more functional qualities, such as the ability to inhibit activation and/or expansion of other immune cells. Assays suitable for identifying a macrophage as an M2-like macrophage are known in the art and described herein. For example, a primary human macrophage assay can be used to determine whether a macrophage is an M2-like macrophage or an M1-like macrophage. In some instances, an M2-like macrophage is a tumor-associated macrophage. In the context of determining whether a macrophage is an M2-like macrophage, a reference can be provided by a control macrophage of the same or different origin (e.g., an untreated control or an LPS-treated control). In embodiments in which a candidate macrophage is a tumor-associated macrophage, a control may be a non-tumor-associated macrophage (e.g., from a healthy donor). Alternatively, a reference can be a predetermined threshold, e.g., a parameter derived from an art-known immunosuppressive threshold.

An "M1-like macrophage," as used herein, refers to a macrophage characterized by one or more immunogenic (e.g., immunostimulatory or activatory) characteristics, relative to a reference. Immunogenic characteristics include increased maturation marker or activation marker expression (e.g., increased expression of one or more costimulatory markers (e.g., CD80 or CD86), increased antigen presentation (e.g., by HLA expression), increased expression of activating cytokines (e.g., TNF α , IL-6, or

IL-1 β), decreased regulatory or suppressive marker expression (e.g., decreased IL-10 or CCL-2 expression or secretion). Immunogenic characteristics may additionally or alternatively be characterized by increase in immunogenic or inflammatory gene expression, or decrease in immunosuppressive or immunoregulatory gene expression, according to methods known in the art. Immunogenic characteristics may additionally or alternatively be characterized by one or more functional qualities, such as the ability to activate and/or expand other immune cells. Assays suitable for identifying a macrophage as an M1-like macrophage are known in the art and described herein. For example, a primary human macrophage assay can be used to determine whether a macrophage is an M2-like macrophage or an M1-like macrophage. In some instances, an M1-like macrophage is a tumor-associated macrophage (e.g., a tumor-associated macrophage that has been exposed to an antibody to LILRB2). In the context of determining whether a macrophage is an M1-like macrophage, a reference can be provided by a control macrophage of the same or different origin (e.g., an untreated control or an immunosuppressed control). In embodiments in which a candidate macrophage is a tumor-associated macrophage, a control may be a non-tumor-associated macrophage (e.g., from a healthy donor). Alternatively, a reference can be a predetermined threshold, e.g., a parameter derived from an art-known immunogenic threshold.

"Conversion of an M2-like macrophage to an M1-like macrophage" can be identified upon detection of an increase in any one or more characteristics of an M1-like macrophage, a decrease in any one or more characteristics of an M2-like macrophage, or any combination thereof.

As used herein, a "human monocyte-derived macrophage," a "human monocyte-differentiated macrophage," or an "HMDM" refers to a macrophage that has been derived from a primary human monocyte. In some embodiments, the primary human macrophage is derived from monocytes from whole blood (e.g., from a PBMC population). In some embodiments, primary human monocytes are incubated in the presence of M-CSF for seven days. A human monocyte-derived macrophage can be obtained using the methods described in Example 6.

As used herein, the term "tetramer blocking assay" refers to an assay including the following steps:

- (1) plate 1×10^5 macrophages (e.g., human monocyte differentiated macrophages (HMDMs)) in a well of a 96-well round-bottom tissue culture plate;
- (2) add 50 μ L test antibody (e.g., LILRB2 antibody or isotype control) in buffer (e.g., FACS buffer (1xDPBS containing 2% HI-FBS (Sigma)+0.05% Sodium Azide));
- (3) incubate 30 minutes at 4°C;
- (4) wash cells in buffer (e.g., FACS buffer) and resuspend in 50 μ L buffer (e.g., FACS buffer) containing 1 μ g/mL tetramer (e.g., fluorochrome-labeled tetramer, e.g., HLA-G or HLA-A2 tetramer);
- (5) incubate protected from light for 30-60 minutes at 4°C;
- (6) wash cells in buffer (e.g., FACS buffer); and
- (7) quantify tetramer binding (e.g., using flow cytometry).

A "chimeric antibody" as used herein refers to an antibody in which a portion of the heavy and/or light chain is derived from a particular source or species, while at least a part of the remainder of the heavy and/or light chain is derived from a different source or species. In some embodiments, a chimeric antibody refers to an antibody comprising at least one variable region from a first species (such as mouse, rat, cynomolgus monkey, etc.) and at least one constant region from a second species (such as human, cynomolgus monkey, etc.). In some embodiments, a chimeric antibody comprises at least one

mouse variable region and at least one human constant region. In some embodiments, a chimeric antibody comprises at least one cynomolgus variable region and at least one human constant region. In some embodiments, all of the variable regions of a chimeric antibody are from a first species and all of the constant regions of the chimeric antibody are from a second species. The chimeric construct can also be a functional fragment, as noted above.

A "humanized antibody" as used herein refers to an antibody in which at least one amino acid in a framework region of a non-human variable region has been replaced with the corresponding amino acid from a human variable region. In some embodiments, a humanized antibody comprises at least one human constant region or fragment thereof. In some embodiments, a humanized antibody is an antibody fragment, such as Fab, an scFv, a (Fab')₂, etc. The term humanized also denotes forms of non-human (for example, murine) antibodies that are chimeric immunoglobulins, immunoglobulin chains, or fragments thereof (such as Fv, Fab, Fab', F(ab')₂ or other antigen-binding subsequences of antibodies) that contain minimal sequence of non-human immunoglobulin. Humanized antibodies can include human immunoglobulins (recipient antibody) in which residues from a complementary determining region (CDR) of the recipient are substituted by residues from a CDR of a non-human species (donor antibody) such as mouse, rat, or rabbit having the desired specificity, affinity, and capacity. In some instances, Fv framework region (FR) residues of the human immunoglobulin are replaced by corresponding non-human residues. Furthermore, the humanized antibody can comprise residues that are found neither in the recipient antibody nor in the imported CDR or framework sequences, but are included to further refine and optimize antibody performance. In general, the humanized antibody can comprise substantially all of at least one, and typically two, variable domains, in which all or substantially all of the CDR regions correspond to those of a non-human immunoglobulin and all or substantially all of the FR regions are those of a human immunoglobulin consensus sequence. In some embodiments, the humanized antibody can also comprise at least a portion of an immunoglobulin constant region or domain (Fc), typically that of a human immunoglobulin. Other forms of humanized antibodies have one or more CDRs (CDR L1, CDR L2, CDR L3, CDR H1, CDR H2, and/or CDR H3) which are altered with respect to the original antibody, which are also termed one or more CDRs "derived from" one or more CDRs from the original antibody. As will be appreciated, a humanized sequence can be identified by its primary sequence and does not necessarily denote the process by which the antibody was created.

An "CDR-grafted antibody" as used herein refers to a humanized antibody in which one or more complementarity determining regions (CDRs) of a first (non-human) species have been grafted onto the framework regions (FRs) of a second (human) species.

A "human antibody" as used herein encompasses antibodies produced in humans, antibodies produced in non-human animals that comprise human immunoglobulin genes, such as XENOMOUSE® mice, and antibodies selected using in vitro methods, such as phage display (Vaughan et al., 1996, *Nat. Biotechnol.*, 14:309-314; Sheets et al., 1998, *Proc. Natl. Acad. Sci. (USA)*, 95:6157-6162; Hoogenboom and Winter, 1991, *J. Mol. Biol.*, 227:381; Marks et al., 1991, *J. Mol. Biol.*, 222:581), wherein the antibody repertoire is based on a human immunoglobulin sequence. The term "human antibody" denotes the genus of sequences that are human sequences. Thus, the term is not designating the process by which the antibody was created, but the genus of sequences that are relevant.

A "functional Fc region" possesses an "effector function" of a native sequence Fc region. Exemplary "effector functions" include Fc receptor binding; C1q binding; CDC; ADCC; phagocytosis;

down regulation of cell surface receptors (for example B cell receptor; BCR), etc. Such effector functions generally require the Fc region to be combined with a binding domain (for example, an antibody variable domain) and can be assessed using various assays.

5 A "native sequence Fc region" comprises an amino acid sequence identical to the amino acid sequence of an Fc region found in nature. Native sequence human Fc regions include a native sequence human IgG1 Fc region (non-A and A allotypes); native sequence human IgG2 Fc region; native sequence human IgG3 Fc region; and native sequence human IgG4 Fc region as well as naturally occurring variants thereof.

10 A "variant Fc region" comprises an amino acid sequence which differs from that of a native sequence Fc region by virtue of at least one amino acid modification. In some embodiments, a "variant Fc region" comprises an amino acid sequence which differs from that of a native sequence Fc region by virtue of at least one amino acid modification, yet retains at least one effector function of the native sequence Fc region. In some embodiments, the variant Fc region has at least one amino acid substitution compared to a native sequence Fc region or to the Fc region of a parent polypeptide, for example, from about one to about ten amino acid substitutions, and preferably, from about one to about 15 five amino acid substitutions in a native sequence Fc region or in the Fc region of the parent polypeptide. In some embodiments, the variant Fc region herein will possess at least about 80% sequence identity with a native sequence Fc region and/or with an Fc region of a parent polypeptide, at least about 90% sequence identity therewith, at least about 95%, at least about 96%, at least about 97%, at least about 20 98%, or at least about 99% sequence identity therewith.

"Fc receptor" or "FcR" describes a receptor that binds to the Fc region of an antibody. In some embodiments, an FcγR is a native human FcR. In some embodiments, an FcR is one which binds an IgG antibody (a gamma receptor) and includes receptors of the FcγRI, FcγRII, and FcγRIII subclasses, including allelic variants and alternatively spliced forms of those receptors. FcγRII receptors include 25 FcγRIIA (an "activating receptor") and FcγRIIB (an "inhibiting receptor"), which have similar amino acid sequences that differ primarily in the cytoplasmic domains thereof. Activating receptor FcγRIIA contains an immunoreceptor tyrosine-based activation motif (ITAM) in its cytoplasmic domain. Inhibiting receptor FcγRIIB contains an immunoreceptor tyrosine-based inhibition motif (ITIM) in its cytoplasmic domain. See, for example, Daeron, 1997, *Annu. Rev. Immunol.* 15:203-234. FcRs are reviewed, for example, in 30 Ravetch and Kinet, 1991, *Annu. Rev. Immunol.* 9:457-92; Capel et al., 1994, *Immunomethods*, 4:25-34; and de Haas et al., 1995, *J. Lab. Clin. Med.* 126:330-41. Other FcRs, including those to be identified in the future, are encompassed by the term "FcR" herein.

The term "Fc receptor" or "FcR" also includes the neonatal receptor, FcRn, which is responsible for the transfer of maternal IgGs to the fetus (Guyer et al., 1976, *J. Immunol.* 117:587 and Kim et al., 35 1994, *J. Immunol.* 24:249) and regulation of homeostasis of immunoglobulins. Methods of measuring binding to FcRn are known. See, for example, Ghetie and Ward, 1997, *Immunol. Today*, 18(12):592-598; Ghetie et al., 1997, *Nat. Biotechnol.*, 15(7):637-640; Hinton et al., 2004, *J. Biol. Chem.* 279(8):6213-6216; and WO 2004/92219 (Hinton et al.).

40 "Effector functions" refer to biological activities attributable to the Fc region of an antibody, which vary with the antibody isotype. Examples of antibody effector functions include: Clq binding and complement dependent cytotoxicity (CDC); Fc receptor binding; antibody-dependent cell-mediated

cytotoxicity (ADCC); phagocytosis; down regulation of cell surface receptors (for example B cell receptor); and B cell activation.

“Antibody-dependent cell-mediated cytotoxicity” or “ADCC” refers to a form of cytotoxicity in which secreted Ig bound onto Fc receptors (FcRs) present on certain cytotoxic cells (for example NK cells, neutrophils, and macrophages) enable these cytotoxic effector cells to bind specifically to an antigen-bearing target cell and subsequently kill the target cell with cytotoxins. The primary cells for mediating ADCC, NK cells, express FcγRIII only, whereas monocytes express FcγRI, FcγRII, and FcγRIII. FcR expression on hematopoietic cells is summarized in Table 3 on page 464 of Ravetch and Kinet, 1991, *Annu. Rev. Immunol* 9:457-92. To assess ADCC activity of a molecule of interest, an in vitro ADCC assay, such as that described in U.S. Pat. Nos. 5,500,362, 5,821,337, or 6,737,056 (Presta), may be performed. Useful effector cells for such assays include PBMC and NK cells. Alternatively, or additionally, ADCC activity of the molecule of interest may be assessed in vivo, for example, in an animal model such as that disclosed in Clynes et al., 1998, *Proc. Natl. Acad. Sci. (USA)* 95:652-656. Additional polypeptide variants with altered Fc region amino acid sequences (polypeptides with a variant Fc region) and increased or decreased ADCC activity are described, for example, in U.S. Pat. No. 7,923,538, and U.S. Pat. No. 7,994,290.

“Complement dependent cytotoxicity” or “CDC” refers to the lysis of a target cell in the presence of complement. Activation of the classical complement pathway is initiated by the binding of the first component of the complement system (C1q) to antibodies (of the appropriate subclass), which are bound to their cognate antigen. To assess complement activation, a CDC assay, for example, as described in Gazzano-Santoro et al., 1996, *J. Immunol. Methods* 202:163, may be performed. Polypeptide variants with altered Fc region amino acid sequences (polypeptides with a variant Fc region) and increased or decreased C1q binding capability are described, for example, in U.S. Pat. No. 6,194,551 B1, U.S. Pat. No. 7,923,538, U.S. Pat. No. 7,994,290, and WO 1999/51642. See also, for example, Idusogie et al., 2000, *J. Immunol.* 164: 4178-4184.

A polypeptide variant with “altered” FcR binding affinity or ADCC activity is one which has either enhanced or diminished FcR binding activity and/or ADCC activity compared to a parent polypeptide or to a polypeptide comprising a native sequence Fc region. The polypeptide variant which “displays increased binding” to an FcR binds at least one FcR with better affinity than the parent polypeptide. The polypeptide variant which “displays decreased binding” to an FcR, binds at least one FcR with lower affinity than a parent polypeptide. Such variants which display decreased binding to an FcR may possess little or no appreciable binding to an FcR, for example, 0-20% binding to the FcR compared to a native sequence IgG Fc region.

The polypeptide variant which “mediates antibody-dependent cell-mediated cytotoxicity (ADCC) in the presence of human effector cells more effectively” than a parent antibody is one which in vitro or in vivo is more effective at mediating ADCC, when the amounts of polypeptide variant and parent antibody used in the assay are essentially the same. Generally, such variants will be identified using the in vitro ADCC assay as herein disclosed, but other assays or methods for determining ADCC activity, for example in an animal model etc., are contemplated.

The term “substantially similar” or “substantially the same,” as used herein, denotes a sufficiently high degree of similarity between two or more numeric values such that one of skill in the art would consider the difference between the two or more values to be of little or no biological and/or statistical

significance within the context of the biological characteristic measured by said value. In some embodiments the two or more substantially similar values differ by no more than about any one of 5%, 10%, 15%, 20%, 25%, or 50%.

5 The phrase "substantially different," as used herein, denotes a sufficiently high degree of difference between two numeric values such that one of skill in the art would consider the difference between the two values to be of statistical significance within the context of the biological characteristic measured by said values. In some embodiments, the two substantially different numeric values differ by greater than about any one of 10%, 20%, 25%, 30%, 35%, 40%, 45%, 50%, 60%, 70%, 80%, 90%, or 100%.

10 The phrase "substantially reduced," as used herein, denotes a sufficiently high degree of reduction between a numeric value and a reference numeric value such that one of skill in the art would consider the difference between the two values to be of statistical significance within the context of the biological characteristic measured by said values. In some embodiments, the substantially reduced numeric values is reduced by greater than about any one of 10%, 20%, 25%, 30%, 35%, 40%, 45%, 50%, 60%, 70%, 80%, 90%, or 100% compared to the reference value.

15 The term "leader sequence" refers to a sequence of amino acid residues located at the N-terminus of a polypeptide that facilitates secretion of a polypeptide from a mammalian cell. A leader sequence can be cleaved upon export of the polypeptide from the mammalian cell, forming a mature protein. Leader sequences can be natural or synthetic, and they can be heterologous or homologous to the protein to which they are attached.

20 A "native sequence" polypeptide comprises a polypeptide having the same amino acid sequence as a polypeptide found in nature. Thus, a native sequence polypeptide can have the amino acid sequence of naturally occurring polypeptide from any mammal. Such native sequence polypeptide can be isolated from nature or can be produced by recombinant or synthetic means. The term "native sequence" polypeptide specifically encompasses naturally occurring truncated or secreted forms of the polypeptide (for example, an extracellular domain sequence), naturally occurring variant forms (for example, alternatively spliced forms) and naturally occurring allelic variants of the polypeptide.

25 A polypeptide "variant" means a biologically active polypeptide having at least about 80% amino acid sequence identity with the native sequence polypeptide after aligning the sequences and introducing gaps, if necessary, to achieve the maximum percent sequence identity, and not considering any conservative substitutions as part of the sequence identity. Such variants include, for instance, polypeptides wherein one or more amino acid residues are added, or deleted, at the N- or C-terminus of the polypeptide. In some embodiments, a variant will have at least about 80% amino acid sequence identity. In some embodiments, a variant will have at least about 90% amino acid sequence identity. In some embodiments, a variant will have at least about 95% amino acid sequence identity with the native sequence polypeptide.

30 As used herein, "percent (%) amino acid sequence identity" and "homology" with respect to a peptide, polypeptide or antibody sequence are defined as the percentage of amino acid residues in a candidate sequence that are identical with the amino acid residues in the specific peptide or polypeptide sequence, after aligning the sequences and introducing gaps, if necessary, to achieve the maximum percent sequence identity, and not considering any conservative substitutions as part of the sequence identity. Alignment for purposes of determining percent amino acid sequence identity can be achieved in

various ways that are within the skill in the art, for instance, using publicly available computer software such as BLAST, BLAST-2, ALIGN, or MEGALIGN™ (DNASTAR) software. Those skilled in the art can determine appropriate parameters for measuring alignment, including any algorithms needed to achieve maximal alignment over the full length of the sequences being compared.

5 An amino acid substitution may include but are not limited to the replacement of one amino acid in a polypeptide with another amino acid. Exemplary substitutions are shown in Table 1. Amino acid substitutions may be introduced into an antibody of interest and the products screened for a desired activity, for example, retained/improved antigen binding, decreased immunogenicity, or improved ADCC or CDC.

10

Table 1.

Original Residue	Exemplary Substitutions
Ala (A)	Val; Leu; Ile
Arg (R)	Lys; Gln; Asn
Asn (N)	Gln; His; Asp, Lys; Arg
Asp (D)	Glu; Asn
Cys (C)	Ser; Ala
Gln (Q)	Asn; Glu
Glu (E)	Asp; Gln
Gly (G)	Ala
His (H)	Asn; Gln; Lys; Arg
Ile (I)	Leu; Val; Met; Ala; Phe; Norleucine
Leu (L)	Norleucine; Ile; Val; Met; Ala; Phe
Lys (K)	Arg; Gln; Asn
Met (M)	Leu; Phe; Ile
Phe (F)	Trp; Leu; Val; Ile; Ala; Tyr
Pro (P)	Ala
Ser (S)	Thr
Thr (T)	Val; Ser
Trp (W)	Tyr; Phe
Tyr (Y)	Trp; Phe; Thr; Ser
Val (V)	Ile; Leu; Met; Phe; Ala; Norleucine

Amino acids may be grouped according to common side-chain properties:

- 15 (1) hydrophobic: Norleucine, Met, Ala, Val, Leu, Ile;
 (2) neutral hydrophilic: Cys, Ser, Thr, Asn, Gln;
 (3) acidic: Asp, Glu;
 (4) basic: His, Lys, Arg;
 (5) residues that influence chain orientation: Gly, Pro;
 (6) aromatic: Trp, Tyr, Phe.

20 Non-conservative substitutions will entail exchanging a member of one of these classes for another class.

The term "vector" is used to describe a polynucleotide that can be engineered to contain a cloned polynucleotide or polynucleotides that can be propagated in a host cell. A vector can include one or more of the following elements: an origin of replication, one or more regulatory sequences (such as, for example, promoters and/or enhancers) that regulate the expression of the polypeptide of interest, and/or one or more selectable marker genes (such as, for example, antibiotic resistance genes and genes that can be used in colorimetric assays, for example, β -galactosidase). The term "expression vector" refers to a vector that is used to express a polypeptide of interest in a host cell.

A "host cell" refers to a cell that may be or has been a recipient of a vector or isolated polynucleotide. Host cells may be prokaryotic cells or eukaryotic cells. Exemplary eukaryotic cells include mammalian cells, such as primate or non-primate animal cells; fungal cells, such as yeast; plant cells; and insect cells. Nonlimiting exemplary mammalian cells include, but are not limited to, NSO cells, PER.C6® cells (Crucell), and 293 and CHO cells, and their derivatives, such as 293-6E and DG44 cells, respectively. Host cells include progeny of a single host cell, and the progeny may not necessarily be completely identical (in morphology or in genomic DNA complement) to the original parent cell due to natural, accidental, or deliberate mutation. A host cell includes cells transfected in vivo with a polynucleotide(s) as provided herein.

The term "isolated" as used herein refers to a molecule that has been separated from at least some of the components with which it is typically found in nature or produced. For example, a polypeptide is referred to as "isolated" when it is separated from at least some of the components of the cell in which it was produced. Where a polypeptide is secreted by a cell after expression, physically separating the supernatant containing the polypeptide from the cell that produced it is considered to be "isolating" the polypeptide. Similarly, a polynucleotide is referred to as "isolated" when it is not part of the larger polynucleotide (such as, for example, genomic DNA or mitochondrial DNA, in the case of a DNA polynucleotide) in which it is typically found in nature, or is separated from at least some of the components of the cell in which it was produced, for example, in the case of an RNA polynucleotide. Thus, a DNA polynucleotide that is contained in a vector inside a host cell may be referred to as "isolated".

The terms "individual" or "subject" are used interchangeably herein to refer to an animal; for example a mammal. In some embodiments, methods of treating mammals, including, but not limited to, humans, rodents, simians, felines, canines, equines, bovines, porcines, ovines, caprines, mammalian laboratory animals, mammalian farm animals, mammalian sport animals, and mammalian pets, are provided. In some examples, an "individual" or "subject" refers to an individual or subject in need of treatment for a disease or disorder. In some embodiments, the subject to receive the treatment can be a patient, designating the fact that the subject has been identified as having a disorder of relevance to the treatment, or being at adequate risk of contracting the disorder.

A "disease" or "disorder" as used herein refers to a condition where treatment is needed and/or desired.

"Cancer" and "tumor," as used herein, are interchangeable terms that refer to any abnormal cell or tissue growth or proliferation in an animal. As used herein, the terms "cancer" and "tumor" encompass solid and hematological/lymphatic cancers and also encompass malignant, pre-malignant, and benign growth, such as dysplasia. Examples of cancer include but are not limited to, carcinoma, lymphoma, blastoma, sarcoma, and leukemia. More particular non-limiting examples of such cancers include kidney

cancer (e.g., renal cell carcinoma, e.g., papillary renal cell carcinoma), squamous cell cancer, mesothelioma, teratoma, small-cell lung cancer, pituitary cancer, esophageal cancer, astrocytoma, soft tissue sarcoma, lung cancer (e.g., non-small cell lung cancer, adenocarcinoma of the lung, squamous carcinoma of the lung), cancer of the peritoneum, hepatocellular cancer, gastrointestinal cancer (e.g., stomach cancer), pancreatic cancer, cervical cancer, ovarian cancer, liver cancer, bladder cancer, hepatoma, breast cancer, colon cancer, colorectal cancer, rectal cancer, endometrial or uterine carcinoma, salivary gland carcinoma, liver cancer, prostate cancer, vulval cancer, thyroid cancer, thymoma, hepatic carcinoma, brain cancer, glioma, glioblastoma, endometrial cancer, testis cancer, cholangiocarcinoma, cholangiosarcoma, gallbladder carcinoma, gastric cancer, melanoma (e.g., uveal melanoma), pheochromocytoma, paraganglioma, adenoid cystic carcinoma, and various types of head and neck cancer (e.g., squamous head and neck cancer).

As used herein, "treatment" is an approach for obtaining beneficial or desired clinical results. "Treatment" as used herein, covers any administration or application of a therapeutic for disease in a mammal, including a human. For purposes of this disclosure, beneficial or desired clinical results include, but are not limited to, any one or more of: alleviation of one or more symptoms, diminishment of extent of disease, preventing or delaying spread (for example, metastasis, for example metastasis to the lung or to the lymph node) of disease, preventing or delaying recurrence of disease, delay or slowing of disease progression, amelioration of the disease state, inhibiting the disease or progression of the disease, inhibiting or slowing the disease or its progression, arresting its development, and remission (whether partial or total). Also encompassed by "treatment" is a reduction of pathological consequence of a proliferative disease. The methods provided herein contemplate any one or more of these aspects of treatment. In-line with the above, the term treatment does not require one-hundred percent removal of all aspects of the disorder.

"Ameliorating" means a lessening or improvement of one or more symptoms as compared to not administering an anti-LILRB2 antibody. "Ameliorating" also includes shortening or reduction in duration of a symptom.

In the context of cancer, the term "treating" includes any or all of: inhibiting growth of cancer cells, inhibiting replication of cancer cells, lessening of overall tumor burden and ameliorating one or more symptoms associated with the disease.

The term "biological sample" means a quantity of a substance from a living thing or formerly living thing. Such substances include, but are not limited to, blood, (for example, whole blood), plasma, serum, urine, amniotic fluid, synovial fluid, endothelial cells, leukocytes, monocytes, other cells, organs, tissues, bone marrow, lymph nodes and spleen.

The term "control" refers to a composition known to not contain an analyte ("negative control") or to contain analyte ("positive control"). A positive control can comprise a known concentration of analyte. "Control," "positive control," and "calibrator" may be used interchangeably herein to refer to a composition comprising a known concentration of analyte. A "positive control" can be used to establish assay performance characteristics and is a useful indicator of the integrity of reagents (for example, analytes).

"Predetermined cutoff" and "predetermined level" refer generally to an assay cutoff value that is used to assess diagnostic/prognostic/therapeutic efficacy results by comparing the assay results against the predetermined cutoff/level, where the predetermined cutoff/level already has been linked or associated with various clinical parameters (for example, severity of disease, progression, non-

progression, improvement, etc.). While the present disclosure may provide exemplary predetermined levels, it is well-known that cutoff values may vary depending on the nature of the immunoassay (for example, antibodies employed, etc.). It further is well within the skill of one of ordinary skill in the art to adapt the disclosure herein for other immunoassays to obtain immunoassay-specific cutoff values for those other immunoassays based on this disclosure. Whereas the precise value of the predetermined cutoff/level may vary between assays, correlations as described herein (if any) may be generally applicable.

The terms "inhibition" or "inhibit" refer to a decrease or cessation of any phenotypic characteristic or to the decrease or cessation in the incidence, degree, or likelihood of that characteristic. To "reduce" or "inhibit" is to decrease, reduce or arrest an activity, function, and/or amount as compared to a reference. In some embodiments, by "reduce" or "inhibit" is meant the ability to cause an overall decrease of 20% or greater. In some embodiments, by "reduce" or "inhibit" is meant the ability to cause an overall decrease of 50% or greater. In some embodiments, by "reduce" or "inhibit" is meant the ability to cause an overall decrease of 75%, 85%, 90%, 95%, or greater. In some embodiments, the amount noted above is inhibited or decreased over a period of time, relative to a control dose (such as a placebo) over the same period of time. A "reference" as used herein, refers to any sample, standard, or level that is used for comparison purposes. A reference may be obtained from a healthy and/or non-diseased sample. In some examples, a reference may be obtained from an untreated sample. In some examples, a reference is obtained from a non-diseased on non-treated sample of a subject individual. In some examples, a reference is obtained from one or more healthy individuals who are not the subject or patient.

As used herein, "delaying development of a disease" means to defer, hinder, slow, retard, stabilize, suppress and/or postpone development of the disease (such as cancer). This delay can be of varying lengths of time, depending on the history of the disease and/or individual being treated. As is evident to one skilled in the art, a sufficient or significant delay can, in effect, encompass prevention, in that the individual does not develop the disease. For example, a late stage cancer, such as development of metastasis, may be delayed.

"Preventing," as used herein, includes providing prophylaxis with respect to the occurrence or recurrence of a disease in a subject that may be predisposed to the disease but has not yet been diagnosed with the disease. Unless otherwise specified, the terms "reduce," "inhibit," or "prevent" do not denote or require complete prevention over all time.

As used herein, to "suppress" a function or activity is to reduce the function or activity when compared to otherwise same conditions except for a condition or parameter of interest, or alternatively, as compared to another condition. For example, an antibody which suppresses tumor growth reduces the rate of growth of the tumor compared to the rate of growth of the tumor in the absence of the antibody.

A "therapeutically effective amount" of a substance/molecule, agonist or antagonist may vary according to factors such as the disease state, age, sex, and weight of the individual, and the ability of the substance/molecule, agonist or antagonist to elicit a desired response in the individual. A therapeutically effective amount is also one in which any toxic or detrimental effects of the substance/molecule, agonist or antagonist are outweighed by the therapeutically beneficial effects. A therapeutically effective amount may be delivered in one or more administrations. A therapeutically effective amount refers to an amount effective, at dosages and for periods of time necessary, to achieve the desired therapeutic and/or prophylactic result.

A “prophylactically effective amount” refers to an amount effective, at dosages and for periods of time necessary, to achieve the desired prophylactic result. Typically but not necessarily, since a prophylactic dose is used in subjects prior to or at an earlier stage of disease, the prophylactically effective amount will be less than the therapeutically effective amount.

5 The terms “pharmaceutical formulation” and “pharmaceutical composition” refer to a preparation which is in such form as to permit the biological activity of the active ingredient(s) to be effective, and which contains no additional components which are unacceptably toxic to a subject to which the formulation would be administered. Such formulations may be sterile.

10 A “pharmaceutically acceptable carrier” refers to a non-toxic solid, semisolid, or liquid filler, diluent, encapsulating material, formulation auxiliary, or carrier conventional in the art for use with a therapeutic agent that together comprise a “pharmaceutical composition” for administration to a subject. A pharmaceutically acceptable carrier is non-toxic to recipients at the dosages and concentrations employed and is compatible with other ingredients of the formulation. The pharmaceutically acceptable carrier is appropriate for the formulation employed.

15 A “sterile” formulation is aseptic or essentially free from living microorganisms and their spores.

 A “PD-1 therapy” encompasses any therapy that modulates PD-1 binding to PD-L1 and/or PD-L2. PD-1 therapies may, for example, directly interact with PD-1 and/or PD-L1. In some embodiments, a PD-1 therapy includes a molecule that directly binds to and/or influences the activity of PD-1. In some embodiments, a PD-1 therapy includes a molecule that directly binds to and/or influences the activity of PD-L1. Thus, an antibody that binds to PD-1 or PD-L1 and blocks the interaction of PD-1 to PD-L1 is a PD-1 therapeutic. When a desired subtype of PD-1 therapy is intended, it will be designated by the phrase “PD-1 specific” for a therapy involving a molecule that interacts directly with PD-1, or “PD-L1 specific” for a molecule that interacts directly with PD-L1, as appropriate. Unless designated otherwise, all disclosure contained herein regarding PD-1 therapy applies to PD-1 therapy generally, as well as PD-1 specific and/or PD-L1 specific therapies. Nonlimiting exemplary PD-1 therapies include nivolumab (BMS-936558, MDX-1106, ONO-4538); pidilizumab, lambrolizumab/pembrolizumab (KEYTRUDA®, MK-3475); durvalumab; RG-7446; MSB-0010718C; AMP-224; BMS-936559 (an anti-PD-L1 antibody); AMP-514; MDX-1105; ANB-011; anti-LAG-3/PD-1; anti-PD-1 Ab (CoStim); anti-PD-1 Ab (Kadmon Pharm.); anti-PD-1 Ab (Immunovo); anti-TIM-3/PD-1 Ab (AnaptysBio); anti-PD-L1 Ab (CoStim/Novartis); MEDI-4736 (an anti-PD-L1 antibody, Medimmune/AstraZeneca); RG7446/MPDL3280A (an anti-PD-L1 antibody, Genentech/Roche); KD-033, PD-1 antagonist (Agenus); STI-A1010; STI-A1110; TSR-042; and other antibodies that are directed against programmed death-1 (PD-1) or programmed death ligand 1 (PD-L1).

Administration “in combination with” one or more further therapeutic agents includes simultaneous (concurrent) and consecutive or sequential administration in any order.

35 The term “concurrently” is used herein to refer to administration of two or more therapeutic agents, where at least part of the administration overlaps in time or where the administration of one therapeutic agent falls within a short period of time relative to administration of the other therapeutic agent. For example, the two or more therapeutic agents are administered with a time separation of no more than about a specified number of minutes.

40 The term “sequentially” is used herein to refer to administration of two or more therapeutic agents where the administration of one or more agent(s) continues after discontinuing the administration of one

or more other agent(s). For example, administration of the two or more therapeutic agents are administered with a time separation of more than about a specified number of minutes.

As used herein, "in conjunction with" refers to administration of one treatment modality in addition to another treatment modality. As such, "in conjunction with" refers to administration of one treatment modality before, during or after administration of the other treatment modality to the individual.

The term "package insert" is used to refer to instructions customarily included in commercial packages of therapeutic products, that contain information about the indications, usage, dosage, administration, combination therapy, contraindications and/or warnings concerning the use of such therapeutic products.

An "article of manufacture" is any manufacture (for example, a package or container) or kit comprising at least one reagent, for example, a medicament for treatment of a disease or disorder (for example, cancer), or a probe for specifically detecting a biomarker described herein. In some embodiments, the manufacture or kit is promoted, distributed, or sold as a unit for performing the methods described herein.

The terms "label" and "detectable label" mean a moiety attached to an antibody or its analyte to render a reaction (for example, binding) between the members of the specific binding pair, detectable. The labeled member of the specific binding pair is referred to as "detectably labeled." Thus, the term "labeled binding protein" refers to a protein with a label incorporated that provides for the identification of the binding protein. In some embodiments, the label is a detectable marker that can produce a signal that is detectable by visual or instrumental means, for example, incorporation of a radiolabeled amino acid or attachment to a polypeptide of biotinyl moieties that can be detected by marked avidin (for example, streptavidin containing a fluorescent marker or enzymatic activity that can be detected by optical or colorimetric methods). Examples of labels for polypeptides include, but are not limited to, the following: radioisotopes or radionuclides (for example, ^3H , ^{14}C , ^{35}S , ^{90}Y , ^{99}Tc , ^{111}In , ^{125}I , ^{131}I , ^{177}Lu , ^{166}Ho , or ^{153}Sm); chromogens, fluorescent labels (for example, FITC, rhodamine, lanthanide phosphors), enzymatic labels (for example, horseradish peroxidase, luciferase, alkaline phosphatase); chemiluminescent markers; biotinyl groups; predetermined polypeptide epitopes recognized by a secondary reporter (for example, leucine zipper pair sequences, binding sites for secondary antibodies, metal binding domains, epitope tags); and magnetic agents, such as gadolinium chelates. Representative examples of labels commonly employed for immunoassays include moieties that produce light, for example, acridinium compounds, and moieties that produce fluorescence, for example, fluorescein. In this regard, the moiety itself may not be detectably labeled but may become detectable upon reaction with yet another moiety.

The term "conjugate" refers to an antibody that is chemically linked to a second chemical moiety, such as a therapeutic or cytotoxic agent. The term "agent" includes a chemical compound, a mixture of chemical compounds, a biological macromolecule, or an extract made from biological materials. In some embodiments, the therapeutic or cytotoxic agents include, but are not limited to, pertussis toxin, taxol, cytochalasin B, gramicidin D, ethidium bromide, emetine, mitomycin, etoposide, teniposide, vincristine, vinblastine, colchicin, doxorubicin, daunorubicin, dihydroxy anthracin dione, mitoxantrone, mithramycin, actinomycin D, 1-dehydrotestosterone, glucocorticoids, procaine, tetracaine, lidocaine, propranolol, and puromycin and analogs or homologs thereof. When employed in the context of an immunoassay, the conjugate antibody may be a detectably labeled antibody used as the detection antibody.

II. Anti-LILRB2 Antibodies

Novel antibodies directed against LILRB2 are provided. Anti-LILRB2 antibodies include, but are not limited to, humanized antibodies, chimeric antibodies, mouse antibodies, human antibodies, and antibodies comprising the heavy chain and/or light chain CDRs discussed herein. In some embodiments, an isolated antibody that binds to LILRB2 is provided. In some embodiments, a monoclonal antibody that binds to LILRB2 is provided.

In some aspects, an anti-LILRB2 antibody comprises at least one, two, three, four, five, or six CDRs selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 15; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 16; (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 17; (d) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 18; (e) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 19; and (f) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 20.

In some aspects, an anti-LILRB2 antibody comprises at least one, two, three, four, five, or six CDRs selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 95; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 96; (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 97; (d) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 98; (e) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 99; and (f) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 100.

In some aspects, an anti-LILRB2 antibody comprises at least one, two, three, four, five, or six CDRs selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 105; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 106; (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 107; (d) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 108; (e) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 109; and (f) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 110.

In some aspects, an anti-LILRB2 antibody comprises at least one, two, three, four, five, or six CDRs selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 115; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 116; (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 117; (d) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 118; (e) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 119; and (f) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 120.

In some embodiments, an anti-LILRB2 antibody is provided that competes with an anti-LILRB2 antibody described herein. In some embodiments, an antibody that competes for binding (i.e., cross-competes) with any of the antibodies provided herein can be made and/or used.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three heavy chain CDR sequences selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 15; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 16; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 17.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three light chain CDR sequences selected from (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 18; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 19; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 20.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three heavy chain CDR sequences selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 95; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 96; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 97.

5 In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three light chain CDR sequences selected from (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 98; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 99; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 100.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three heavy chain CDR sequences selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 105; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 106; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 107.

10 In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three light chain CDR sequences selected from (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 108; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 109; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 110.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three heavy chain CDR sequences selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 115; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 116; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 117.

20 In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three light chain CDR sequences selected from (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 118; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 119; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 120.

25 In some embodiments, any of the six CDRs provided herein can be combined as subparts with any of the other CDRs provided herein, for a total of six CDRs in a construct. Thus, in some embodiments, two CDRs from a first antibody (for example, CDR-H1 and CDR-H2) can be combined with four CDRs from a second antibody (CDR-H3, CDR-L1, CDR-L2, and CDR-L3). In some embodiments, two or fewer residues in one or more of the CDRs can be replaced to obtain a variant thereof. In some

30 embodiments, two or fewer residues can be replaced in 1, 2, 3, 4, 5, or 6 of the CDRs.

In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H) domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 13. In some embodiments, a V_H sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some

35 embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 13. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 13,

40 including post-translational modifications of that sequence.

In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 15; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 16; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 17.

5 In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 14. In some embodiments, a V_L sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In
10 some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 14. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID NO: 14, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of
15 SEQ ID NO: 18; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 19; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 20.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 13 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%,
20 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 14. In some embodiments, a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%,
25 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 13. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 14. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally,
30 the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 13 and the V_L domain sequence of SEQ ID NO: 14, including post-translational modifications of one or both sequence.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some
35 embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 13 and SEQ ID NO: 14, respectively, including post-translational modifications of those sequences.

In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 11 and a light chain comprising the amino acid sequence of SEQ ID NO: 12.

In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H)
40 domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 53. In some embodiments, a V_H sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions

(for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 53. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 53, including post-translational modifications of that sequence.

In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 15; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 16; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 17.

In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 54. In some embodiments, a V_L sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 54. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID NO: 54, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 18; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 19; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 20.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 53 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 54. In some embodiments, a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 53. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 54. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 53 and the V_L domain sequence of SEQ ID NO: 54, including post-translational modifications of one or both sequence.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 53 and SEQ ID NO: 54, respectively, including post-translational modifications of those sequences.

In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 51 and a light chain comprising the amino acid sequence of SEQ ID NO: 52.

5 In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H) domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 63. In some embodiments, a V_H sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some
10 embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 63. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 63, including post-translational modifications of that sequence.

In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of
15 SEQ ID NO: 15; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 16; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 17.

In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 64. In some embodiments, a V_L
20 sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 64. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the
25 CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID NO: 64, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 18; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 19; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 20.

30 In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 63 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 64. In some embodiments, a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity
35 contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been
40 substituted, inserted, and/or deleted in SEQ ID NO: 63. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 64. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally,

the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 63 and the V_L domain sequence of SEQ ID NO: 64, including post-translational modifications of one or both sequence.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some
5 embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 63 and SEQ ID NO: 64, respectively, including post-translational modifications of those sequences.

In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 61 and a light chain comprising the amino acid sequence of SEQ ID NO: 62.

10 In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H) domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 73. In some embodiments, a V_H sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but
15 an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 73. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 73, including post-translational modifications of that sequence.

20 In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 15; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 16; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 17.

In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%,
25 or 100% sequence identity to the amino acid sequence of SEQ ID NO: 74. In some embodiments, a V_L sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ
30 ID NO: 74. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID NO: 74, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 18; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 19; and (c) CDR-L3
35 comprising the amino acid sequence of SEQ ID NO: 20.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 73 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%,
40 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 74. In some embodiments, a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%,

97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 73. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 74. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 73 and the V_L domain sequence of SEQ ID NO: 74, including post-translational modifications of one or both sequence.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 73 and SEQ ID NO: 74, respectively, including post-translational modifications of those sequences.

In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 71 and a light chain comprising the amino acid sequence of SEQ ID NO: 72.

In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H) domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 83. In some embodiments, a V_H sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 83. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 83, including post-translational modifications of that sequence.

In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 15; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 16; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 17.

In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 84. In some embodiments, a V_L sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 84. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID NO: 84, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 18; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 19; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 20.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 83 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 84. In some embodiments, a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 83. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 84. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 83 and the V_L domain sequence of SEQ ID NO: 84, including post-translational modifications of one or both sequence.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 83 and SEQ ID NO: 84, respectively, including post-translational modifications of those sequences.

In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 81 and a light chain comprising the amino acid sequence of SEQ ID NO: 82.

In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H) domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 93. In some embodiments, a V_H sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 93. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 93, including post-translational modifications of that sequence.

In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 95; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 96; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 97.

In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 94. In some embodiments, a V_L sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ

ID NO: 94. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID NO: 94, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 98; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 99; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 100.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 93 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 94. In some embodiments, a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 93. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 94. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 93 and the V_L domain sequence of SEQ ID NO: 94, including post-translational modifications of one or both sequence.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 93 and SEQ ID NO: 94, respectively, including post-translational modifications of those sequences.

In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 91 and a light chain comprising the amino acid sequence of SEQ ID NO: 92.

In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H) domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 103. In some embodiments, a V_H sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 103. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 103, including post-translational modifications of that sequence.

In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 105; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 106; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 107.

In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 104. In some embodiments, a V_L sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains
5 substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 104. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID
10 NO: 104, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 108; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 109; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 110.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least
15 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 103 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 104. In some embodiments, a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions
20 relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 103. In some embodiments,
25 a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 104. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 103 and the V_L domain sequence of SEQ ID NO: 104, including post-translational modifications of one or both sequence.

30 In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 103 and SEQ ID NO: 104, respectively, including post-translational modifications of those sequences.

35 In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 101 and a light chain comprising the amino acid sequence of SEQ ID NO: 102.

In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H) domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 113. In some embodiments, a V_H
40 sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In

some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 113. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 113, including post-translational modifications of that sequence.

5 In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 115; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 116; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 117.

In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%,
10 or 100% sequence identity to the amino acid sequence of SEQ ID NO: 114. In some embodiments, a V_L sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ
15 ID NO: 114. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID NO: 114, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 118; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 119; and (c) CDR-L3
20 comprising the amino acid sequence of SEQ ID NO: 120.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 113 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%,
25 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 114. In some embodiments, a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%,
30 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 113. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 114. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 113
35 and the V_L domain sequence of SEQ ID NO: 114, including post-translational modifications of one or both sequence.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 113 and SEQ ID
40 NO: 114, respectively, including post-translational modifications of those sequences.

In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 111 and a light chain comprising the amino acid sequence of SEQ ID NO: 112.

5 In some aspects, an anti-LILRB2 antibody comprises at least one, two, three, four, five, or six CDRs selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 5; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 6; (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 7; (d) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 8; (e) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 9; and (f) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 10.

10 In some embodiments, an anti-LILRB2 antibody is provided that competes with an anti-LILRB2 antibody described herein. In some embodiments, an antibody that competes for binding (i.e., cross-competes) with any of the antibodies provided herein can be made and/or used.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three heavy chain CDR sequences selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 5; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 6; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 7.

15 In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three light chain CDR sequences selected from (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 8; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 9; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 10.

In some embodiments, any of the six CDRs provided herein can be combined as subparts with any of the other CDRs provided herein, for a total of six CDRs in a construct. Thus, in some embodiments, two CDRs from a first antibody (for example, CDR-H1 and CDR-H2) can be combined with four CDRs from a second antibody (CDR-H3, CDR-L1, CDR-L2, and CDR-L3). In some embodiments, 25 two or fewer residues in one or more of the CDRs can be replaced to obtain a variant thereof. In some embodiments, two or fewer residues can be replaced in 1, 2, 3, 4, 5, or 6 of the CDRs.

In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H) domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 3. In some embodiments, a V_H sequence 30 having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 3. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 3, 35 including post-translational modifications of that sequence.

In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 5; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 6; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 7.

40 In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 4. In some embodiments, a V_L

sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 4. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID NO: 4, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 8; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 9; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 10.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 3 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 4. In some embodiments, a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 3. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 4. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 3 and the V_L domain sequence of SEQ ID NO: 4, including post-translational modifications of one or both sequence.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 3 and SEQ ID NO: 4, respectively, including post-translational modifications of those sequences.

In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 1 and a light chain comprising the amino acid sequence of SEQ ID NO: 2.

In some aspects, an anti-LILRB2 antibody comprises at least one, two, three, four, five, or six CDRs selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 25; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 26; (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 27; (d) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 28; (e) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 29; and (f) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 30.

In some embodiments, an anti-LILRB2 antibody is provided that competes with an anti-LILRB2 antibody described herein. In some embodiments, an antibody that competes for binding (i.e., cross-competes) with any of the antibodies provided herein can be made and/or used.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three heavy chain CDR sequences selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID

NO: 25; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 26; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 27.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three light chain CDR sequences selected from (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 28; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 29; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 30.

In some embodiments, any of the six CDRs provided herein can be combined as subparts with any of the other CDRs provided herein, for a total of six CDRs in a construct. Thus, in some embodiments, two CDRs from a first antibody (for example, CDR-H1 and CDR-H2) can be combined with four CDRs from a second antibody (CDR-H3, CDR-L1, CDR-L2, and CDR-L3). In some embodiments, two or fewer residues in one or more of the CDRs can be replaced to obtain a variant thereof. In some embodiments, two or fewer residues can be replaced in 1, 2, 3, 4, 5, or 6 of the CDRs.

In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H) domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 23. In some embodiments, a V_H sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 23. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 23, including post-translational modifications of that sequence.

In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 25; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 26; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 27.

In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 24. In some embodiments, a V_L sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 24. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID NO: 24, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 28; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 29; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 30.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 23 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 24. In some embodiments,

a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 23. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 24. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 23 and the V_L domain sequence of SEQ ID NO: 24, including post-translational modifications of one or both sequence.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 23 and SEQ ID NO: 24, respectively, including post-translational modifications of those sequences.

In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 21 and a light chain comprising the amino acid sequence of SEQ ID NO: 22.

In some aspects, an anti-LILRB2 antibody comprises at least one, two, three, four, five, or six CDRs selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 35; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 36; (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 37; (d) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 38; (e) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 39; and (f) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 40.

In some embodiments, an anti-LILRB2 antibody is provided that competes with an anti-LILRB2 antibody described herein. In some embodiments, an antibody that competes for binding (i.e., cross-competes) with any of the antibodies provided herein can be made and/or used.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three heavy chain CDR sequences selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 35; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 36; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 37.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three light chain CDR sequences selected from (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 38; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 39; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 40.

In some embodiments, any of the six CDRs provided herein can be combined as subparts with any of the other CDRs provided herein, for a total of six CDRs in a construct. Thus, in some embodiments, two CDRs from a first antibody (for example, CDR-H1 and CDR-H2) can be combined with four CDRs from a second antibody (CDR-H3, CDR-L1, CDR-L2, and CDR-L3). In some embodiments, two or fewer residues in one or more of the CDRs can be replaced to obtain a variant thereof. In some embodiments, two or fewer residues can be replaced in 1, 2, 3, 4, 5, or 6 of the CDRs.

In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H) domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 33. In some embodiments, a V_H sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 33. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 33, including post-translational modifications of that sequence.

In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 35; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 36; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 37.

In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 34. In some embodiments, a V_L sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 34. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID NO: 34, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 38; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 39; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 40.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 33 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 34. In some embodiments, a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 33. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 34. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 33 and the V_L domain sequence of SEQ ID NO: 34, including post-translational modifications of one or both sequence.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 33 and SEQ ID NO: 34, respectively, including post-translational modifications of those sequences.

5 In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 31 and a light chain comprising the amino acid sequence of SEQ ID NO: 32.

In some aspects, an anti-LILRB2 antibody comprises at least one, two, three, four, five, or six CDRs selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 45; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 46; (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 47; (d) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 48; (e) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 49; and (f) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 50.

10 In some embodiments, an anti-LILRB2 antibody is provided that competes with an anti-LILRB2 antibody described herein. In some embodiments, an antibody that competes for binding (i.e., cross-competes) with any of the antibodies provided herein can be made and/or used.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three heavy chain CDR sequences selected from (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 45; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 46; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 47.

In some embodiments, the anti-LILRB2 antibody comprises at least one, at least two, or all three light chain CDR sequences selected from (a) CDR-L1 comprising the amino acid sequence of SEQ ID NO: 48; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 49; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 50.

25 In some embodiments, any of the six CDRs provided herein can be combined as subparts with any of the other CDRs provided herein, for a total of six CDRs in a construct. Thus, in some embodiments, two CDRs from a first antibody (for example, CDR-H1 and CDR-H2) can be combined with four CDRs from a second antibody (CDR-H3, CDR-L1, CDR-L2, and CDR-L3). In some embodiments, two or fewer residues in one or more of the CDRs can be replaced to obtain a variant thereof. In some embodiments, two or fewer residues can be replaced in 1, 2, 3, 4, 5, or 6 of the CDRs.

30 In particular embodiments, an anti-LILRB2 antibody comprises a variable heavy chain (V_H) domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 43. In some embodiments, a V_H sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 43. In some embodiments, substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H sequence of SEQ ID NO: 43, including post-translational modifications of that sequence.

In some embodiments, the V_H comprises: (a) CDR-H1 comprising the amino acid sequence of SEQ ID NO: 45; (b) CDR-H2 comprising the amino acid sequence of SEQ ID NO: 46; and (c) CDR-H3 comprising the amino acid sequence of SEQ ID NO: 47.

5 In some embodiments, an anti-LILRB2 antibody is provided, wherein the antibody comprises a variable light chain (V_L) domain having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 44. In some embodiments, a V_L sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In
10 some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 44. In some embodiments, the substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_L sequence of SEQ ID NO: 44, including post-translational modifications of that sequence.

In some embodiments, the V_L comprises: (a) CDR-L1 comprising the amino acid sequence of
15 SEQ ID NO: 48; (b) CDR-L2 comprising the amino acid sequence of SEQ ID NO: 49; and (c) CDR-L3 comprising the amino acid sequence of SEQ ID NO: 50.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 43 and a V_L having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%,
20 99%, or 100% sequence identity to the amino acid sequence of SEQ ID NO: 44. In some embodiments, a V_H domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%, 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, and a V_L domain sequence having at least 90%, 91%, 92%, 93%, 94%, 95%, 96%,
25 97%, 98%, or 99% identity contains substitutions (for example, conservative substitutions), insertions, or deletions relative to the reference sequence, but an anti-LILRB2 antibody comprising that sequence retains the ability to bind to LILRB2. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 43. In some embodiments, a total of 1 to 10 amino acids have been substituted, inserted, and/or deleted in SEQ ID NO: 44. In some embodiments,
30 substitutions, insertions, or deletions occur in regions outside the CDRs (that is, in the FRs). Optionally, the anti-LILRB2 antibody comprises the V_H domain sequence in SEQ ID NO: 43 and the V_L domain sequence of SEQ ID NO: 44, including post-translational modifications of one or both sequence.

In some embodiments, an anti-LILRB2 antibody comprises a V_H domain as in any of the embodiments provided herein, and a V_L domain as in any of the embodiments provided herein. In some
35 embodiments, the antibody comprises the V_H and V_L domain sequences of SEQ ID NO: 43 and SEQ ID NO: 44, respectively, including post-translational modifications of those sequences.

In some embodiments, an anti-LILRB2 antibody comprises a heavy chain comprising the amino acid sequence of SEQ ID NO: 41 and a light chain comprising the amino acid sequence of SEQ ID NO: 42.

40 In some embodiments, the anti-LILRB2 antibody comprises the six CDRs as described in any of the embodiments above and specifically binds to LILRB2 (e.g., human LILRB2). In some embodiments, the anti-LILRB2 antibody comprises the six CDRs of any of the embodiments described above, specifically binds to LILRB2, and blocks binding of HLA-G and/or HLA-A2 to LILRB2 (e.g., human

LILRB2). In some embodiments, the anti-LILRB2 antibody comprises the six CDRs as described in any of the embodiments above, specifically binds to LILRB2 (e.g., human LILRB2), and causes conversion of M2-like macrophages to M1-like macrophages.

5 In some embodiments, an anti-LILRB2 antibody comprises a variable heavy chain region and a variable light chain region. In some embodiments, an anti-LILRB2 antibody comprises at least one heavy chain comprising a variable heavy chain region and at least a portion of a heavy chain constant region, and at least one light chain comprising a variable light chain region and at least a portion of a light chain constant region. In some embodiments, an anti-LILRB2 antibody comprises two heavy chains, wherein each heavy chain comprises a variable heavy chain region and at least a portion of a constant heavy chain region, and two light chains, wherein each light chain comprises a variable light chain region and at least a portion of a constant light chain region. As used herein, a single-chain Fv (scFv), or any other antibody that comprises, for example, a single polypeptide chain comprising all six CDRs (three heavy chain CDRs and three light chain CDRs) is considered to have a heavy chain and a light chain. In some embodiments, the heavy chain is the region of the anti-LILRB2 antibody that comprises the three heavy chain CDRs. In some embodiments, the light chain is the region of the anti-LILRB2 antibody that comprises the three light chain CDRs.

In some embodiments, antibodies which compete with the anti-LILRB2 antibodies provided herein for binding to LILRB2 are provided. In some embodiments, antibodies cross-compete with the anti-LILRB2 antibodies provided herein for binding to an epitope on LILRB2.

20 In some embodiments, competition assays may be used to identify a monoclonal antibody that competes with an anti-LILRB2 antibody described herein for binding to LILRB2. Competition assays can be used to determine whether two antibodies bind the same epitope by recognizing identical or sterically overlapping epitopes or one antibody competitively inhibits binding of another antibody to the antigen. In some embodiments, such a competing antibody binds to the same epitope that is bound by an antibody described herein. Exemplary competition assays include, but are not limited to, routine assays such as those provided in Harlow and Lane (1988) *Antibodies: A Laboratory Manual* ch.14 (Cold Spring Harbor Laboratory, Cold Spring Harbor, N.Y.). Detailed exemplary methods for mapping an epitope to which an antibody binds are provided in Morris (1996) "Epitope Mapping Protocols," in *Methods in Molecular Biology* vol. 66 (Humana Press, Totowa, N.J.). In some embodiments, two antibodies are said to bind to the same epitope if each blocks binding of the other by 50% or more. In some embodiments, the antibody that competes with an anti-LILRB2 antibody described herein is a chimeric, humanized or human antibody. In some embodiments, an antibody that competes with a chimeric, humanized, or human anti-LILRB2 antibody as described herein is provided.

35 In some embodiments, antibodies that bind to any one or more of the epitopes of the antibodies provided herein are provided. In some embodiments, antibodies that bind and overlap an epitope to which the present antibodies bind to are provided. In some embodiments, an antibody is provided that competes with at least one of the antibodies provided herein. In some embodiments, an antibody is provided that competes with at least two of the antibodies provided herein. In some embodiments, an antibody is provided that competes with at least three of the antibodies provided herein. In some embodiments, the antibody binds to an overlapping epitope as an antibody described in the examples herein. In some embodiments, the entire epitope is bound and/or obstructed by the competing antibody. In some embodiments, a part of the epitope is bound and/or obstructed by the competing antibody. In

some embodiments, the competing antibody's paratope binds to at least a part of the epitope of an antibody provided herein. In some embodiments, the competing antibody's paratope binds the target, and a different section of the competing antibody's structure obstruct at least a part of the epitope of an antibody provided herein.

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Exemplary chimeric antibodies

In some embodiments, an antibody provided herein is a chimeric antibody. Certain chimeric antibodies are described, for example, in U.S. Patent No. 4,816,567; and Morrison et al., 1984, *Proc. Natl. Acad. Sci. USA*, 81:6851-6855. In one example, a chimeric antibody comprises a non-human variable region (for example, a variable region derived from a mouse, rat, hamster, rabbit, or non-human primate, such as a monkey) and a human constant region. In a further example, a chimeric antibody is a "class switched" antibody in which the class or subclass has been changed from that of the parent antibody. Chimeric antibodies include antigen-binding fragments thereof.

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Nonlimiting exemplary chimeric antibodies include chimeric antibodies comprising the heavy and/or light chain variable regions of any of the anti-LILRB2 antibodies described herein. Nonlimiting exemplary chimeric antibodies include chimeric antibodies comprising a CDR-H1, CDR-H2, and CDR-H3, and/or a CDR-L1, CDR-L2, and CDR-L3 of any of the anti-LILRB2 antibodies described herein. In some embodiments, the chimeric anti-LILRB2 antibody comprises the variable regions described above and binds to LILRB2. In some embodiments, the chimeric anti-LILRB2 antibody comprises the variable regions described above, binds to LILRB2, and causes conversion of M2-like macrophages to M1-like macrophages.

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In some embodiments, a chimeric anti-LILRB2 antibody comprises a heavy chain comprising a variable region sequence that is at least 90%, at least 91%, at least 92%, at least 93%, at least 94%, at least 95%, at least 96%, at least 97%, at least 98%, or at least 99% identical to a sequence selected from SEQ ID NOs: 3, 13, 23, 33, 43, 53, 63, 73, 83, 93, 103, and 113 wherein the antibody binds LILRB2. In some embodiments, a chimeric anti-LILRB2 antibody comprises a light chain comprising a variable region sequence that is at least 90%, at least 91%, at least 92%, at least 93%, at least 94%, at least 95%, at least 96%, at least 97%, at least 98%, or at least 99% identical to a sequence selected from SEQ ID NOs: 4, 14, 24, 34, 44, 54, 64, 74, 84, 94, 104, and 114 wherein the antibody binds LILRB2. In some embodiments, a chimeric anti-LILRB2 antibody comprises a heavy chain comprising a variable region sequence that is at least 90%, at least 91%, at least 92%, at least 93%, at least 94%, at least 95%, at least 96%, at least 97%, at least 98%, or at least 99% identical to a sequence selected from SEQ ID NOs: 3, 13, 23, 33, 43, 53, 63, 73, 83, 93, 103, and 113; and a light chain comprising a variable region sequence that is at least 90%, at least 91%, at least 92%, at least 93%, at least 94%, at least 95%, at least 96%, at least 97%, at least 98%, or at least 99% identical to a sequence selected from SEQ ID NOs: 4, 14, 24, 34, 44, 54, 64, 74, 84, 94, 104, and 114; wherein the antibody binds LILRB2.

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Exemplary chimeric anti-LILRB2 antibodies also include chimeric antibodies that compete for binding to LILRB2 with an antibody or fragment thereof described herein. Thus, in some embodiments, a chimeric anti-LILRB2 antibody is provided that competes for binding to LILRB2 with any of the LILRB2 antibodies described herein, or fragment thereof. In some embodiments, the antibody competes for binding to LILRB2 and causes conversion of M2-like macrophages to M1-like macrophages.

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In some embodiments, a chimeric antibody described herein comprises one or more human constant regions. In some embodiments, the human heavy chain constant region is of an isotype selected from IgA, IgG, and IgD. In some embodiments, the human light chain constant region is of an isotype selected from κ and λ . In some embodiments, a chimeric antibody described herein comprises a human IgG constant region. In some embodiments, a chimeric antibody described herein comprises a human IgG4 heavy chain constant region. In some embodiments, a chimeric antibody described herein comprises a human IgG4 constant region and a human κ light chain.

As noted above, whether or not effector function is desirable may depend on the particular method of treatment intended for an antibody. Thus, in some embodiments, when effector function is desirable, a chimeric anti-LILRB2 antibody comprising a human IgG1 heavy chain constant region or a human IgG3 heavy chain constant region is selected. In some embodiments, when effector function is not desirable, a chimeric anti-LILRB2 antibody comprising a human IgG4 or IgG2 heavy chain constant region is selected.

Exemplary humanized antibodies

In some embodiments, humanized antibodies that bind LILRB2 are provided. Humanized antibodies are useful as therapeutic molecules because humanized antibodies reduce or eliminate the human immune response as compared to non-human antibodies, which can result in an immune response to an antibody therapeutic (such as the human anti-mouse antibody (HAMA) response), and decreased effectiveness of the therapeutic.

In some embodiments, a chimeric antibody is a humanized antibody. Typically, a non-human antibody is humanized to reduce immunogenicity to humans, while retaining the specificity and affinity of the parental non-human antibody. Generally, a humanized antibody comprises one or more variable domains in which CDRs, (or portions thereof) are derived from a non-human antibody, and FRs (or portions thereof) are derived from human antibody sequences. A humanized antibody optionally will also comprise at least a portion of a human constant region. In some embodiments, some FR residues in a humanized antibody are substituted with corresponding residues from a non-human antibody (for example, the antibody from which the CDR residues are derived), for example, to restore or improve antibody specificity or affinity.

Humanized antibodies and methods of making them are reviewed, for example, in Almagro and Fransson, 2008, *Front. Biosci.*, 13: 1619-1633, and are further described, for example, in Riechmann et al., 1988, *Nature*, 332:323-329; Queen et al., 1989, *Proc. Natl Acad. Sci. USA*, 86: 10029-10033; U.S. Patent Nos. 5, 821,337, 7,527,791, 6,982,321, and 7,087,409; Kashmiri et al., 2005, *Methods*, 36:25-34; Padlan, 1991, *Mol. Immunol.*, 28:489-498 (describing "resurfacing"); Dall'Acqua et al., 2005, *Methods*, 36:43-60 (describing "FR shuffling"); and Osbourn et al., 2005, *Methods*, 36:61-68 and Klimka et al., 2000, *Br. J. Cancer*, 83:252-260 (describing the "guided selection" approach to FR shuffling).

Human framework regions that can be used for humanization include but are not limited to: framework regions selected using the "best-fit" method (see, for example, Sims et al., 1993, *J. Immunol.* 151 :2296); framework regions derived from the consensus sequence of human antibodies of a particular subgroup of light or heavy chain variable regions (see, for example, Carter et al., 1992, *Proc. Natl. Acad. Sci. USA*, 89:4285; and Presta et al., 1993, *J. Immunol.*, 151:2623); human mature (somatically mutated) framework regions or human germline framework regions (see, for example, Almagro and Fransson,

2008, *Front. Biosci.*, 13:1619-1633); and framework regions derived from screening FR libraries (see, for example, Baca et al., 1997, *J. Biol. Chem.*, 272: 10678-10684 and Rosok et al., 1996, *J. Biol. Chem.*, 271:22611-22618).

Nonlimiting exemplary humanized antibodies include antibodies comprising a V_H domain selected from SEQ ID NOs: 53, 63, 73, 83, 93, 103, and 113 and/or a V_L domain selected from SEQ ID NOs: 54, 64, 74, 84, 94, 104, and 114, or any one, two, three, four, five, or six CDRs thereof. In some embodiments, the humanized anti-LILRB2 antibody comprises the CDRs described above and binds to LILRB2. In some embodiments, the humanized anti-LILRB2 antibody comprises the CDRs described above, binds to LILRB2 and causes conversion of M2-like macrophages to M1-like macrophages.

In some embodiments, a humanized anti-LILRB2 antibody comprises a heavy chain comprising a variable region sequence that is at least 90%, at least 91%, at least 92%, at least 93%, at least 94%, at least 95%, at least 96%, at least 97%, at least 98%, or at least 99% identical to a sequence selected from SEQ ID NOs: 53, 63, 73, 83, 93, 103, and 113 and wherein the antibody binds LILRB2. In some embodiments, a humanized anti-LILRB2 antibody comprises a light chain comprising a variable region sequence that is at least 90%, at least 91%, at least 92%, at least 93%, at least 94%, at least 95%, at least 96%, at least 97%, at least 98%, or at least 99% identical to a sequence selected from SEQ ID NOs: 54, 64, 74, 84, 94, 104, and 114, wherein the antibody binds LILRB2. In some embodiments, a humanized anti-LILRB2 antibody comprises a heavy chain comprising a variable region sequence that is at least 90%, at least 91%, at least 92%, at least 93%, at least 94%, at least 95%, at least 96%, at least 97%, at least 98%, or at least 99% identical to a sequence selected from SEQ ID NOs: 53, 63, 73, 83, 93, and 113 and a light chain comprising a variable region sequence that is at least 90%, at least 91%, at least 92%, at least 93%, at least 94%, at least 95%, at least 96%, at least 97%, at least 98%, or at least 99% identical to a sequence selected from SEQ ID NOs: 54, 64, 74, 84, 94, 104, and 114 wherein the antibody binds LILRB2.

In some embodiments, any one or more of the CDR sequences provided herein are maintained, while the remain heavy and/or light chain region (that is, FR1, FR2, FR3, and FR4) is at least 90%, at least 91%, at least 92%, at least 93%, at least 94%, at least 95%, at least 96%, at least 97%, at least 98%, or at least 99% identical to a sequence selected from SEQ ID NOs: 53, 54, 63, 64, 73, 74, 83, 84, 93, 94, 103, 104, 113, and 114.

In some embodiments, a humanized anti-LILRB2 antibody comprises at least one of the CDRs discussed herein. That is, in some embodiments, a humanized anti-LILRB2 antibody comprises at least one CDR selected from a CDR-H1 discussed herein, a CDR-H2 discussed herein, a CDR-H3 discussed herein, a CDR-L1 discussed herein, a CDR-L2 discussed herein, and a CDR-L3 discussed herein. Further, in some embodiments, a humanized anti-LILRB2 antibody comprises at least one mutated CDR based on a CDR discussed herein, wherein the mutated CDR comprises 1, 2, 3, or 4 amino acid substitutions relative to the CDR discussed herein. In some embodiments, one or more of the amino acid substitutions are conservative amino acid substitutions. One skilled in the art can select one or more suitable conservative amino acid substitutions for a particular CDR sequence, wherein the suitable conservative amino acid substitutions are not predicted to significantly alter the binding properties of the antibody comprising the mutated CDR.

Exemplary humanized anti-LILRB2 antibodies also include antibodies that compete for binding to LILRB2 with an antibody or fragment thereof described herein. In some embodiments, a humanized anti-

LILRB2 antibody is provided that competes for binding to LILRB2 with any anti-LILRB2 antibody described herein, or fragment thereof, and causes conversion of M2-like macrophages to M1-like macrophages.

5 *Exemplary human antibodies*

In some embodiments, an anti-LILRB2 antibody provided herein is a human antibody. Human antibodies can be produced using various techniques known in the art. Human antibodies are described generally in van Dijk and van de Winkel, 2001, *Curr. Opin. Pharmacol.*, 5:368-374 and Lonberg, 2008, *Curr. Opin. Immunol.*, 20:450-459. In some embodiments, the human antibody is not a naturally
10 occurring antibody. In some embodiments, the human antibody is a monoclonal antibody; thus, in some embodiments, each of the human antibodies in a set can bind to the same epitope on the antigen.

Human antibodies can be prepared by administering an immunogen to a transgenic animal that has been modified to produce intact human antibodies or intact antibodies with human variable regions in response to antigenic challenge. Such animals typically contain all or a portion of the human
15 immunoglobulin loci, which replace the endogenous immunoglobulin loci, or which are present extrachromosomally or integrated randomly into the animal's chromosomes. In such transgenic mice, the endogenous immunoglobulin loci have generally been inactivated. For review of methods for obtaining human antibodies from transgenic animals, see Lonberg, 2005, *Nat. Biotech.*, 23: 1117-1125. See also, for example, U.S. Patent Nos. 6,075,181 and 6,150,584 describing XENOMOUSE™ technology; U.S.
20 Patent No. 5,770,429 describing HUMAB® technology; U.S. Patent No. 7,041,870 describing K-M MOUSE® technology, and U.S. Patent Application Publication No. US 2007/0061900, describing VELOCIMOUSE® technology). Human variable regions from intact antibodies generated by such animals may be further modified, for example, by combining with a different human constant region.

Human antibodies can also be made by hybridoma-based methods. Human myeloma and
25 mouse-human heteromyeloma cell lines for the production of human monoclonal antibodies have been described. See, for example, Kozbor, 1984, *J. Immunol.*, 133: 3001; Brodeur et al., *Monoclonal Antibody Production Techniques and Applications*, pp. 51-63 (Marcel Dekker, Inc., New York, 1987); and Boerner et al., 1991, *J. Immunol.*, 147:86). Human antibodies generated via human B-cell hybridoma technology are also described in Li et al., 2006, *Proc. Natl. Acad. Sci. USA*, 103:3557-3562. Additional methods
30 include those described, for example, in U.S. Patent No. 7,189,826 (describing production of monoclonal human IgM antibodies from hybridoma cell lines) and Ni, 2006, *Xiandai Mianyixue*, 26(4):265-268 (describing human-human hybridomas). Human hybridoma technology (Trioma technology) is also described in Vollmers and Brandlein, 2005, *Histology and Histopathology*, 20(3):927-937 and Vollmers and Brandlein, 2005, *Methods and Findings in Experimental and Clinical Pharmacology*, 27(3): 185-191.

35 Human antibodies can also be generated by isolating Fv clone variable domain sequences selected from human-derived phage display libraries. Such variable domain sequences may then be combined with a desired human constant domain. Techniques for selecting human antibodies from antibody libraries are described below.

Antibodies may be isolated by screening combinatorial libraries for antibodies with the desired
40 activity or activities. For example, a variety of methods are known in the art for generating phage display libraries and screening such libraries for antibodies possessing the desired binding characteristics. Such methods are reviewed, for example, in Hoogenboom et al. in *Methods in Molecular Biology* 178: 1-37

(O'Brien et al., ed., Human Press, Totowa, NJ, 2001) and further described, for example, in the McCafferty et al., 1990, *Nature* 348:552-554; Clackson et al., 1991, *Nature*, 352: 624-628; Marks et al., 1992, *J. Mol. Biol.*, 222: 581-597; Marks and Bradbury, in *Methods in Molecular Biology* 248: 161-175 (Lo, ed., Human Press, Totowa, NJ, 2003); Sidhu et al., 2004 *J. Mol. Biol.*, 338(2): 299-310; Lee et al.,
 5 2004, *J. Mol. Biol.* 340(5): 1073-1093; Fellouse, 2004, *Proc. Natl. Acad. Sci. USA*, 101(34): 12467-12472; and Lee et al., 2004, *J. Immunol. Methods*, 284(1-2): 119-132 and PCT publication WO 99/10494.

In certain phage display methods, repertoires of V_H and V_L genes are separately cloned by polymerase chain reaction (PCR) and recombined randomly in phage libraries, which can then be screened for antigen-binding phage as described in Winter et al., 1994, *Ann. Rev. Immunol.*, 12:433-455.
 10 Phage typically display antibody fragments, either as single-chain Fv (scFv) fragments or as Fab fragments. Libraries from immunized sources provide high-affinity antibodies to the immunogen without the requirement of constructing hybridomas. Alternatively, the naive repertoire can be cloned (for example, from human) to provide a single source of antibodies to a wide range of non-self and also self-antigens without any immunization as described by Griffiths et al., 1993, *EMBO J*, 12:725-734. Finally,
 15 naive libraries can also be made synthetically by cloning unrearranged V-gene segments from stem cells, and using PCR primers containing random sequence to encode the highly variable CDR3 regions and to accomplish rearrangement in vitro, as described by Hoogenboom and Winter 1992, *J. Mol. Biol.*, 227:381-388. Patent publications describing human antibody phage libraries include, for example: U.S. Patent No. 5,750,373, and U.S. Patent Publication Nos. 2005/0079574, 2005/0119455, 2005/0266000,
 20 2007/0117126, 2007/0160598, 2007/0237764, 2007/0292936, and 2009/0002360.

In some embodiments, a chimeric human anti-LILRB2 antibody is provided, where the antibody comprises the variable region from a human antibody that binds LILRB2 and the constant region from a different human antibody. In some embodiments, a chimeric human anti-LILRB2 antibody, where the antibody comprises the CDRs from a human antibody that binds LILRB2 and a framework from a different
 25 human antibody is provided. In some embodiments, the antibody is not a naturally occurring human antibody.

In some embodiments, a human anti-LILRB2 antibody comprises one or more human constant regions. In some embodiments, the human heavy chain constant region is of an isotype selected from IgA, IgG, and IgD. In some embodiments, the human light chain constant region is of an isotype selected
 30 from κ and λ . In some embodiments, a human antibody described herein comprises a human IgG constant region. In some embodiments, a human antibody described herein comprises a human IgG4 heavy chain constant region. In some embodiments, a human antibody described herein comprises a human IgG4 constant region and a human κ light chain.

In some embodiments, when effector function is desirable, a human anti-LILRB2 antibody
 35 comprising a human IgG1 heavy chain constant region or a human IgG3 heavy chain constant region is selected. In some embodiments, when effector function is not desirable, a human anti-LILRB2 antibody comprising a human IgG4 or IgG2 heavy chain constant region is selected.

As noted herein, the term "human antibody" denotes the genus of possible sequences for the antibody construct, rather than a source of the antibody.

Exemplary antibody constant regions

In some embodiments, an antibody described herein comprises one or more human constant regions. In some embodiments, the human heavy chain constant region is of an isotype selected from IgA, IgG, and IgD. In some embodiments, the human light chain constant region is of an isotype selected from κ and λ . In some embodiments, an antibody described herein comprises a human IgG constant region. In some embodiments, an antibody described herein comprises a human IgG4 heavy chain constant region. In some embodiments, an antibody described herein comprises a human IgG4 constant region and a human κ light chain.

Throughout the present specification and claims unless explicitly stated or known to one skilled in the art, the numbering of the residues in an immunoglobulin heavy chain is that of the EU index as in Kabat *et al.*, *Sequences of Proteins of Immunological Interest*, 5th Ed. Public Health Service, National Institutes of Health, Bethesda, Md. (1991), expressly incorporated herein by reference. The "EU index as in Kabat" refers to the residue numbering of the human IgG1 EU antibody.

As noted above, whether or not effector function is desirable may depend on the particular method of treatment intended for an antibody. Thus, in some embodiments, when effector function is desirable, an anti-LILRB2 antibody comprising a human IgG1 heavy chain constant region or a human IgG3 heavy chain constant region is selected. In some embodiments, when effector function is not desirable, an anti-LILRB2 antibody comprising a human IgG4 or IgG2 heavy chain constant region is selected.

In some embodiments, an antibody comprises a variant Fc region has at least one amino acid substitution compared to the Fc region of a wild-type IgG or a wild-type antibody. In some embodiments, the variant Fc region has two or more amino acid substitutions in the Fc region of the wild-type antibody. In some embodiments, the variant Fc region has three or more amino acid substitutions in the Fc region of the wild-type antibody. In some embodiments, the variant Fc region has at least one, two or three or more Fc region amino acid substitutions described herein. In some embodiments, the variant Fc region herein will possess at least about 80% homology with a native sequence Fc region and/or with an Fc region of a parent polypeptide. In some embodiments, the variant Fc region herein will possess at least about 90% homology with a native sequence Fc region and/or with an Fc region of a parent polypeptide. In some embodiments, the variant Fc region herein will possess at least about 95% homology with a native sequence Fc region and/or with an Fc region of a parent polypeptide.

In some embodiments, an antibody provided herein is altered to increase or decrease the extent to which the antibody is glycosylated. Addition or deletion of glycosylation sites to an antibody may be conveniently accomplished by altering the amino acid sequence such that one or more glycosylation sites is created or removed.

Where the antibody comprises an Fc region, the carbohydrate attached thereto may be altered. Native antibodies produced by mammalian cells typically comprise a branched, biantennary oligosaccharide that is generally attached by an N-linkage to Asn297 of the CH2 domain of the Fc region. See, for example, Wright *et al.*, 1997, *TIBTECH*, 15:26-32. The oligosaccharide may include various carbohydrates, for example, mannose, N-acetyl glucosamine (GlcNAc), galactose, and sialic acid, as well as a fucose attached to a GlcNAc in the "stem" of the biantennary oligosaccharide structure. In some

embodiments, modifications of the oligosaccharide in an antibody may be made in order to create antibody variants with certain improved properties.

In some embodiments, antibody variants are provided having a carbohydrate structure that lacks fucose attached (directly or indirectly) to an Fc region. For example, the amount of fucose in such antibody may be from 1% to 80%, from 1% to 65%, from 5% to 65% or from 20% to 40%. The amount of fucose is determined by calculating the average amount of fucose within the sugar chain at Asn297, relative to the sum of all glycostructures attached to Asn 297 (for example, complex, hybrid and high mannose structures) as measured by MALDI-TOF mass spectrometry, as described in WO 2008/077546, for example. Asn297 refers to the asparagine residue located at about position 297 in the Fc region (EU numbering of Fc region residues); however, Asn297 may also be located about ± 3 amino acids upstream or downstream of position 297, that is, between positions 294 and 300, due to minor sequence variations in antibodies. Such fucosylation variants may have improved ADCC function. See, for example, U.S. Patent Publication Nos. U.S. 2003/0157108 (Presta, L.); U.S. 2004/0093621 (Kyowa Hakko Kogyo Co., Ltd). Examples of publications related to "defucosylated" or "fucose-deficient" antibody variants include: U.S. 2003/0157108; WO 2000/61739; WO 2001/29246; U.S. 2003/0115614; U.S. 2002/0164328; U.S. 2004/0093621; U.S. 2004/0132140; U.S. 2004/0110704; U.S. 2004/0110282; U.S. 2004/0109865; WO 2003/085119; WO 2003/084570; WO 2005/035586; WO 2005/035778; WO2005/053742; WO2002/031140; Okazaki *et al. J. Mol. Biol.* 336:1239-1249 (2004); Yamane-Ohnuki *et al.*, 2004, *Biotech. Bioeng.* 87: 614. Examples of cell lines capable of producing defucosylated antibodies include Lec13 CHO cells deficient in protein fucosylation (Ripka *et al.*, 1986, *Arch. Biochem. Biophys.* 249: 533-545; U.S. Patent Application No. U.S. 2003/0157108 A1 (Presta, L); and WO 2004/056312 A1, (Adams *et al.*, especially at Example 11), and knockout cell lines, such as alpha-1,6-fucosyltransferase gene, FUT8, knockout CHO cells (see, for example, Yamane-Ohnuki *et al.*, 2004, *Biotech. Bioeng.* 87: 614; Kanda, Y. *et al.*, 2006, *Biotechnol. Bioeng.*, 94(4):680-688; and WO 2003/085107).

Antibody variants are further provided with bisected oligosaccharides, for example, in which a biantennary oligosaccharide attached to the Fc region of the antibody is bisected by GlcNAc. Such antibody variants may have reduced fucosylation and/or improved ADCC function. Examples of such antibody variants are described, for example, in WO 2003/011878 (Jean-Mairet *et al.*); U.S. Patent No. U.S. 6,602,684 (Umana *et al.*); and U.S. 2005/0123546 (Umana *et al.*). Antibody variants with at least one galactose residue in the oligosaccharide attached to the Fc region are also provided. Such antibody variants may have improved CDC function. Such antibody variants are described, for example, in WO 1997/30087 (Patel *et al.*); WO 1998/58964 (Raju, S.); and WO 1999/22764 (Raju, S.).

Antibody variants are also provided with amino-terminal leader extensions. For example, one or more amino acid residues of the amino-terminal leader sequence are present at the amino-terminus of any one or more heavy or light chains of an antibody. An exemplary amino-terminal leader extension comprises or consists of three amino acid residues, VHS, present on one or both light chains of an antibody variant.

The *in vivo* or serum half-life of human FcRn high affinity binding polypeptides can be assayed, for example, in transgenic mice, in humans, or in non-human primates to which the polypeptides with a variant Fc region are administered. See also, for example, Petkova *et al.*, 2006, *International Immunology* 18(12):1759-1769.

In some embodiments, the antibody variant mediates ADCC in the presence of human effector cells more effectively than a parent antibody. In some embodiments, the antibody variant is substantially more effective at mediating ADCC in vitro, when the amounts of polypeptide variant and parent antibody used in the assay are essentially the same. In some embodiments, the antibody variant is substantially more effective at mediating ADCC in vivo, when the amounts of polypeptide variant and parent antibody used in the assay are essentially the same. Generally, such variants will be identified using the in vitro ADCC assay as herein disclosed, but other assays or methods for determining ADCC activity, for example in an animal model etc., are contemplated.

10 *Exemplary antibody conjugates*

In some embodiments, an anti-LILRB2 antibody is conjugated to another molecule. In some embodiments, the additional molecule can be a detectable marker, such as a label. In some embodiments, the additional molecule can be a therapeutic molecule, such as a cytotoxic agent. In some embodiments, a label and/or a cytotoxic agent can be conjugated to the antibody. As used herein, a label is a moiety that facilitates detection of the antibody and/or facilitates detection of a molecule to which the antibody binds. Nonlimiting exemplary labels include, but are not limited to, radioisotopes, fluorescent groups, enzymatic groups, chemiluminescent groups, biotin, epitope tags, metal-binding tags, etc. One skilled in the art can select a suitable label according to the specific application.

As used herein, a cytotoxic agent is a moiety that reduces the proliferative capacity of one or more cells. A cell has reduced proliferative capacity when the cell becomes less able to proliferate, for example, because the cell undergoes apoptosis or otherwise dies, the cell fails to proceed through the cell cycle and/or fails to divide, the cell differentiates, etc. Nonlimiting exemplary cytotoxic agents include, but are not limited to, radioisotopes, toxins, and chemotherapeutic agents. One skilled in the art can select a suitable cytotoxic according to the intended application. In some embodiments, the cytotoxic agent is at least one of an anti-metabolite, an alkylating agent, an antibiotic, a growth factor, a cytokine, an anti-angiogenic agent, an anti-mitotic agent, an anthracycline, toxin, or an apoptotic agent.

In some embodiments, a label and/or a cytotoxic agent is conjugated to an antibody using chemical methods in vitro. Nonlimiting exemplary chemical methods of conjugation are known in the art, and include services, methods and/or reagents commercially available from, for example, Thermo Scientific Life Science Research Produces (formerly Pierce; Rockford, Ill.), Prozyme (Hayward, Calif.), SACRI Antibody Services (Calgary, Canada), AbD Serotec (Raleigh, N.C.), etc. In some embodiments, when a label and/or cytotoxic agent is a polypeptide, the label and/or cytotoxic agent can be expressed from the same expression vector with at least one antibody chain to produce a polypeptide comprising the label and/or cytotoxic agent fused to an antibody chain. One skilled in the art can select a suitable method for conjugating a label and/or cytotoxic agent to an antibody according to the intended application.

In some embodiments, conjugation can be covalent. In some embodiments, conjugation can be non-covalent. In some embodiments, conjugation can be via a specific binding interaction, for example, through the binding of a secondary antibody.

Exemplary leader sequences

In order for some secreted proteins to express and secrete in large quantities, a leader sequence from a heterologous protein may be desirable. In some embodiments, employing heterologous leader sequences can be advantageous in that a resulting mature polypeptide can remain unaltered as the leader sequence is removed in the ER during the secretion process. The addition of a heterologous leader sequence can be useful to express and secrete some proteins.

Certain exemplary leader sequence sequences are described, for example, in the online Leader sequence Database maintained by the Department of Biochemistry, National University of Singapore.

See Choo et al., 2005, *BMC Bioinformatics*, 6: 249; and PCT Publication No. WO 2006/081430.

III. Antibody Activity

Provided herein are anti-LILRB2 antibodies that provide specific functional characteristics. In particular aspects of the invention, anti-LILRB2 antibodies promote immunogenicity (e.g., as exhibited by M1-like macrophages) to respond to a pathology, e.g., cancer. Additionally or alternatively, anti-LILRB2 antibodies of the invention can inhibit an immunoregulatory (e.g., immunosuppressive) response, e.g., as exhibited by M2-like macrophages.

Blocking of HLA-A2 can be a model for disrupting the binding between LILRB2 and classical MHC class I molecules. Thus, in some embodiments of the invention, anti-LILRB2 antibodies block the binding of HLA-G or HLA-A2 to LILRB2 (e.g., human LILRB2). Blocking can be detected and/or quantified by any suitable means known in the art or described herein. For example, blocking of HLA-G or HLA-A2 can be detected and/or quantified using a tetramer blocking assay (e.g., using human monocytes), as described, e.g., in Example 10.

In some embodiments, an anti-LILRB2 antibody that blocks the binding of HLA-G to LILRB2 binds the same epitope (i.e., wholly or partially) of LILRB2 as HLA-G. In some embodiments, an anti-LILRB2 antibody that blocks the binding of HLA-G to LILRB2 binds at least one, at least two, at least three, at least four, at least five, at least six, at least seven, or at least eight residues of the LILRB2 epitope bound by HLA-G. In some embodiments, an anti-LILRB2 antibody blocks at least 50% (e.g., from 50-100%, from 55-95%, from 60-90%, from 65-85%, or from 70-80%, e.g., from 50-60%, from 60-70%, from 70-80%, from 80-90%, or from 90-100%, e.g., about 50%, about 55%, about 60%, about 65%, about 70%, about 75%, about 80%, about 85%, about 90%, about 95%, or about 100%) of HLA-G tetramer in a tetramer binding assay. In some embodiments, an anti-LILRB2 antibody blocks HLA-G tetramer at an EC₅₀ of less than 1.0 nM (e.g., less than 0.9 nM, less than 0.8 nM, less than 0.7 nM, less than 0.6 nM, less than 0.5 nM, less than 0.4 nM, less than 0.3 nM, less than 0.2 nM, less than 0.15 nM, less than 0.14 nM, less than 0.13 nM, less than 0.12 nM, less than 0.11 nM, less than 0.1 nM, less than 0.09 nM, or less than 0.08 nM) in a tetramer binding assay.

In some embodiments, an anti-LILRB2 antibody that blocks the binding of HLA-A2 to LILRB2 binds the same epitope (i.e., wholly or partially) of LILRB2 as HLA-A2. In some embodiments, an anti-LILRB2 antibody that blocks the binding of HLA-A2 to LILRB2 binds at least one, at least two, at least three, at least four, at least five, at least six, at least seven, or at least eight residues of the LILRB2 epitope bound by HLA-A2. In some embodiments, an anti-LILRB2 antibody blocks at least 50% (e.g., from 50-100%, from 55-95%, from 60-90%, from 65-85%, or from 70-80%, e.g., from 50-60%, from 60-

70%, from 70-80%, from 80-90%, or from 90-100%, e.g., about 50%, about 55%, about 60%, about 65%, about 70%, about 75%, about 80%, about 85%, about 90%, about 95%, or about 100%) of HLA-A2 tetramer in a tetramer binding assay. In some embodiments, an anti-LILRB2 antibody blocks HLA-A2 tetramer at an EC₅₀ of less than 1.0 nM (e.g., less than 0.9 nM, less than 0.8 nM, less than 0.7 nM, less than 0.6 nM, less than 0.5 nM, less than 0.4 nM, less than 0.3 nM, less than 0.2 nM, less than 0.15 nM, less than 0.14 nM, less than 0.13 nM, less than 0.12 nM, less than 0.11 nM, less than 0.1 nM, less than 0.09 nM, or less than 0.08 nM) in a tetramer binding assay.

In some embodiments, anti-LILRB2 antibodies provided herein are capable of converting an M2-like macrophage population to an M1-like macrophage population. Conversion of an M2-like macrophage to an M1-like macrophage can be detected or quantified using any suitable method known in the art or described herein, e.g., a human monocyte-derive macrophage assay as described in Example 6 or a histoculture assay as described in Example 13.

In some embodiments, the conversion of an M2-like macrophage to an M1-like macrophage is indicated by an increased expression of one or more genes selected from the group consisting of CXCL9, CXCL11, IRF1, TAP1, IL6R, and IL15, e.g., an increase of expression of at least 1% (e.g., at least 2%, at least 3%, at least 4%, at least 5%, at least 10%, at least 15%, at least 20%, at least 25%, at least 30%, at least 40%, at least 50%, at least 60%, at least 70%, at least 80%, at least 90%, at least 1-fold, at least 2-fold, at least 3-fold, at least 4-fold, at least 5-fold, at least 10-fold, at least 20-fold, at least 30-fold, at least 40-fold, at least 50-fold, at least 100-fold, or more) of any one or more genes selected from the group consisting of CXCL9, CXCL11, IRF1, TAP1, IL6R, and IL15. In some embodiments, the conversion of an M2-like macrophage to an M1-like macrophage is indicated by a decreased expression of one or more genes selected from the group consisting of CCL2, PTPN22, KLRC3, IL10, IL18R1, G6PD, CD68, and BAT3, e.g., a decrease of expression of at least 1% (e.g., at least 2%, at least 3%, at least 4%, at least 5%, at least 10%, at least 15%, at least 20%, at least 25%, at least 30%, at least 40%, at least 50%, at least 60%, at least 70%, at least 80%, at least 90%, or 100%) of any one or more genes selected from the group consisting of CCL2, PTPN22, KLRC3, IL10, IL18R1, G6PD, CD68, and BAT3.

In some embodiments, the conversion of an M2-like macrophage to an M1-like macrophage is indicated by an increased expression of one, two, or all three cytokines selected from the group consisting of TNF α , IL-1 β , IL-6, CCL3, EGR2, TRAF1, IL1A, IRAK2, TNF α , IL7R, CCL2, IL8, CCL4, CXCL1, BCL2, EGR1, IL1RN, TNFSF15, DUSP4, ICAM1, TNFAIP3, TNFRSF9, CD83, TNFAIP6, CCL20, NFKB1, TNFRSF4, CXCL2, PTGS2, NFKBIA, NFKB2, CLEC4E, NFKBIZ, CCL5, CCL7, CLEC5A, CEBPB, TLR2, SRC, RELB, PLAUR, SOCS3, GBP1, CCL18, CSF1, CD40, NT5E, CCL23, CCL8, GBP5, ITGAX, C3, TNFSF15, ICAM5, DPP4, ZEB1, SPP1, IL23A, CD123, and IL6, e.g., an increase of expression of at least 1% (e.g., at least 2%, at least 3%, at least 4%, at least 5%, at least 10%, at least 15%, at least 20%, at least 25%, at least 30%, at least 40%, at least 50%, at least 60%, at least 70%, at least 80%, at least 90%, at least 1-fold, at least 1.5-fold, at least 2-fold, at least 3-fold, at least 4-fold, at least 5-fold, at least 10-fold, at least 20-fold, at least 30-fold, at least 40-fold, at least 50-fold, at least 100-fold, or more) of any one or more genes selected from the group consisting of TNF α , IL-1 β , IL-6, CCL3, EGR2, TRAF1, IL1A, IRAK2, TNF, IL7R, CCL2, IL8, CCL4, CXCL1, BCL2, EGR1, IL1RN, TNFSF15, DUSP4, ICAM1, TNFAIP3, TNFRSF9, CD83, TNFAIP6, CCL20, NFKB1, TNFRSF4, CXCL2, PTGS2, NFKBIA, NFKB2, CLEC4E, NFKBIZ, CCL5, CCL7, CLEC5A, CEBPB, TLR2, SRC, RELB, PLAUR, SOCS3, GBP1, CCL18, CSF1, CD40, NT5E, CCL23, CCL8, GBP5, ITGAX, C3, TNFSF15,

ICAM5, DPP4, ZEB1, SPP1, IL23A, CD123, and IL6. In some embodiments, the conversion of an M2-like macrophage to an M1-like macrophage is indicated by a decreased expression of IL-10, CCL2, TGFB2, CXCL13, IL21R, CD36, CR1, C1QB, and TGFB1, e.g., a decrease of expression of at least 1% (e.g., at least 2%, at least 3%, at least 4%, at least 5%, at least 10%, at least 15%, at least 20%, at least 25%, at least 30%, at least 40%, at least 50%, at least 60%, at least 70%, at least 80%, at least 90%, or 100%) of any one or more genes selected from the group consisting of IL-10, CCL2, TGFB2, CXCL13, IL21R, CD36, CR1, C1QB, and TGFB1.

In some embodiments, the anti-LILRB2 antibody provided herein binds to human LILRB2 with a greater affinity than to any one or more of human LILRB1, human LILRB3, human LILRB4, human LILRB5, human LILRA1, human LILRA2, human LILRA3, human LILRA4, human LILRA5, or human LILRA6. In some embodiments, the anti-LILRB2 antibody of the invention binds to human LILRB2 with at least 2-fold greater affinity (e.g., at least 3-fold, at least 4-fold, at least 5-fold, at least 10-fold, at least 20-fold, at least 30-fold, at least 40-fold, at least 50-fold, at least 100-fold, or more) greater affinity relative to any one or more of human LILRB1, human LILRB3, human LILRB4, human LILRB5, human LILRA1, human LILRA2, human LILRA3, human LILRA4, human LILRA5, or human LILRA6. In some embodiments, binding of the anti-LILRB2 antibody provided herein to any one or more of human LILRB1, human LILRB3, human LILRB4, human LILRB5, human LILRA1, human LILRA2, human LILRA3, human LILRA4, human LILRA5, or human LILRA6 is undetectable, e.g., bio-layer interferometry (e.g., less than 0.08 nm by OCTET®). In some embodiments, the K_D of the anti-LILRB2 antibody provided herein to any one or more of LILRB1, human LILRB3, human LILRB4, human LILRB5, human LILRA1, human LILRA2, human LILRA3, human LILRA4, human LILRA5, or human LILRA6 is greater than 10 nM (e.g., greater than 15 nM, greater than 20 nM, greater than 25 nM, greater than 30 nM, greater than 35 nM, greater than 40 nM, greater than 45 nM, greater than 50 nM, greater than 60 nM, greater than 70 nM, greater than 80 nM, greater than 90 nM, greater than 100 nM, greater than 500 nM, greater than 1 μ M, greater than 10 μ M, or greater than 100 μ M).

IV. Antibody Expression and Production

Nucleic Acid Molecules Encoding Anti-LILRB2 Antibodies

Nucleic acid molecules comprising polynucleotides that encode one or more chains of an anti-LILRB2 antibody are provided herein. In some embodiments, a nucleic acid molecule comprises a polynucleotide that encodes a heavy chain or a light chain of an anti-LILRB2 antibody. In some embodiments, a nucleic acid molecule comprises both a polynucleotide that encodes a heavy chain and a polynucleotide that encodes a light chain, of an anti-LILRB2 antibody. In some embodiments, a first nucleic acid molecule comprises a first polynucleotide that encodes a heavy chain and a second nucleic acid molecule comprises a second polynucleotide that encodes a light chain.

In some embodiments, the heavy chain and the light chain are expressed from one nucleic acid molecule, or from two separate nucleic acid molecules, as two separate polypeptides. In some embodiments, such as when an antibody is an scFv, a single polynucleotide encodes a single polypeptide comprising both a heavy chain and a light chain linked together.

In some embodiments, a polynucleotide encoding a heavy chain or light chain of an anti-LILRB2 antibody comprises a nucleotide sequence that encodes at least one of the CDRs provided herein. In some embodiments, a polynucleotide encoding a heavy chain or light chain of an anti-LILRB2 antibody

comprises a nucleotide sequence that encodes at least 3 of the CDRs provided herein. In some embodiments, a polynucleotide encoding a heavy chain or light chain of an anti-LILRB2 antibody comprises a nucleotide sequence that encodes at least 6 of the CDRs provided herein. In some embodiments, a polynucleotide encoding a heavy chain or light chain of an anti-LILRB2 antibody
5 comprises a nucleotide sequence that encodes a leader sequence, which, when translated, is located at the N terminus of the heavy chain or light chain. As discussed above, the leader sequence may be the native heavy or light chain leader sequence, or may be another heterologous leader sequence.

In some embodiments, the nucleic acid is one that encodes for any of the amino acid sequences for the antibodies in the Sequence Table herein. In some embodiments, the nucleic acid is one that is at
10 least 80% identical to a nucleic acid encoding any of the amino acid sequences for the antibodies in the Sequence Table herein, for example, at least 80, 85, 90, 91, 92, 93, 94, 95, 96, 97, 98, or 99% identical. In some embodiments, the nucleic acid is one that hybridizes to any one or more of the nucleic acid sequences provided herein. In some of the embodiments, the hybridization is under moderate conditions. In some embodiments, the hybridization is under highly stringent conditions, such as: at least about 6X
15 SSC and 1% SDS at 65°C, with a first wash for 10 minutes at about 42°C with about 20% (v/v) formamide in 0.1X SSC, and with a subsequent wash with 0.2 X SSC and 0.1% SDS at 65°C.

Nucleic acid molecules can be constructed using recombinant DNA techniques conventional in the art. In some embodiments, a nucleic acid molecule is an expression vector that is suitable for expression in a selected host cell.

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Vectors

Vectors comprising polynucleotides that encode anti-LILRB2 heavy chains and/or anti-LILRB2 light chains are provided. Vectors comprising polynucleotides that encode anti-LILRB2 heavy chains and/or anti-LILRB2 light chains are also provided. Such vectors include, but are not limited to, DNA
25 vectors, phage vectors, viral vectors, retroviral vectors, etc. In some embodiments, a vector comprises a first polynucleotide sequence encoding a heavy chain and a second polynucleotide sequence encoding a light chain. In some embodiments, the heavy chain and light chain are expressed from the vector as two separate polypeptides. In some embodiments, the heavy chain and light chain are expressed as part of a single polypeptide, such as, for example, when the antibody is an scFv.

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In some embodiments, a first vector comprises a polynucleotide that encodes a heavy chain and a second vector comprises a polynucleotide that encodes a light chain. In some embodiments, the first vector and second vector are transfected into host cells in similar amounts (such as similar molar amounts or similar mass amounts). In some embodiments, a mole- or mass-ratio of between 5:1 and 1:5 of the first vector and the second vector is transfected into host cells. In some embodiments, a mass ratio
35 of between 1:1 and 1:5 for the vector encoding the heavy chain and the vector encoding the light chain is used. In some embodiments, a mass ratio of 1:2 for the vector encoding the heavy chain and the vector encoding the light chain is used.

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In some embodiments, a vector is selected that is optimized for expression of polypeptides in CHO or CHO-derived cells, or in NSO cells. Exemplary such vectors are described, for example, in Running Deer et al., 2004, *Biotechnol. Prog.* 20:880-889.

Host Cells

In some embodiments, anti-LILRB2 antibody heavy chains and/or anti-LILRB2 antibody light chains may be expressed in prokaryotic cells, such as bacterial cells; or in eukaryotic cells, such as fungal cells (such as yeast), plant cells, insect cells, and mammalian cells. Such expression may be carried out, for example, according to procedures known in the art. Exemplary eukaryotic cells that may be used to express polypeptides include, but are not limited to, COS cells, including COS 7 cells; 293 cells, including 293-6E cells; CHO cells, including CHO-S, DG44, Lec13 CHO cells, and FUT8 CHO cells; PER.C6® cells (CruCell); and NSO cells. In some embodiments, anti-LILRB2 antibody heavy chains and/or anti-LILRB2 antibody light chains may be expressed in yeast. See, for example, U.S. Publication No. U.S. 2006/0270045 A1. In some embodiments, a particular eukaryotic host cell is selected based on its ability to make desired post-translational modifications to the anti-LILRB2 antibody heavy chains and/or anti-LILRB2 antibody light chains. For example, in some embodiments, CHO cells produce polypeptides that have a higher level of sialylation than the same polypeptide produced in 293 cells.

Introduction of one or more nucleic acids into a desired host cell may be accomplished by any method, including but not limited to, calcium phosphate transfection, DEAE-dextran mediated transfection, cationic lipid-mediated transfection, electroporation, transduction, infection, etc. Nonlimiting exemplary methods are described, for example, in Sambrook et al., *Molecular Cloning, A Laboratory Manual*, 3rd ed. Cold Spring Harbor Laboratory Press (2001). Nucleic acids may be transiently or stably transfected in the desired host cells, according to any suitable method.

Host cells comprising any of the polynucleotides or vectors described herein are also provided. In some embodiments, a host cell comprising an anti-LILRB2 antibody is provided. Any host cells capable of over-expressing heterologous DNAs can be used for the purpose of isolating the genes encoding the antibody, polypeptide or protein of interest. Non-limiting examples of mammalian host cells include but not limited to COS, HeLa, and CHO cells. See also PCT Publication No. WO 87/04462. Suitable non-mammalian host cells include prokaryotes (such as *E. coli* or *B. subtilis*) and yeast (such as *S. cerevisiae*, *S. pombe*; or *K. lactis*).

Purification of Antibodies

Anti-LILRB2 antibodies can be purified by any suitable method. Such methods include, but are not limited to, the use of affinity matrices or hydrophobic interaction chromatography. Suitable affinity ligands include the ROR1 ECD and ligands that bind antibody constant regions. For example, a Protein A, Protein G, Protein A/G, or an antibody affinity column may be used to bind the constant region and to purify an anti-LILRB2 antibody. Hydrophobic interactive chromatography, for example, a butyl or phenyl column, may also be suitable for purifying some polypeptides such as antibodies. Ion exchange chromatography (for example anion exchange chromatography and/or cation exchange chromatography) may also be suitable for purifying some polypeptides such as antibodies. Mixed-mode chromatography (for example reversed phase/anion exchange, reversed phase/cation exchange, hydrophilic interaction/anion exchange, hydrophilic interaction/cation exchange, etc.) may also be suitable for purifying some polypeptides such as antibodies. Many methods of purifying polypeptides are known in the art.

Cell-Free Production of Antibodies

In some embodiments, an anti-LILRB2 antibody is produced in a cell-free system. Nonlimiting exemplary cell-free systems are described, for example, in Sitaraman et al., 2009, *Methods Mol. Biol.* 498: 229-44; Spirin, 2004, *Trends Biotechnol.* 22: 538-45; Endo et al., 2003, *Biotechnol. Adv.* 21: 695-713.

Compositions

In some embodiments, antibodies prepared by the methods described above are provided. In some embodiments, the antibody is prepared in a host cell. In some embodiments, the antibody is prepared in a cell-free system. In some embodiments, the antibody is purified. In some embodiments, the antibody prepared in a host cell or a cell-free system is a chimeric antibody. In some embodiments, the antibody prepared in a host cell or a cell-free system is a humanized antibody. In some embodiments, the antibody prepared in a host cell or a cell-free system is a human antibody. In some embodiments, a cell culture media comprising an anti-LILRB2 antibody is provided. In some embodiments, a host cell culture fluid comprising an anti-LILRB2 antibody is provided.

In some embodiments, compositions comprising antibodies prepared by the methods described above are provided. In some embodiments, the composition comprises an antibody prepared in a host cell. In some embodiments, the composition comprises an antibody prepared in a cell-free system. In some embodiments, the composition comprises a purified antibody. In some embodiments, the composition comprises a chimeric antibody prepared in a host cell or a cell-free system. In some embodiments, the composition comprises a humanized antibody prepared in a host cell or a cell-free system. In some embodiments, the composition comprises a human antibody prepared in a host cell or a cell-free system.

In some embodiments, a composition comprising anti-LILRB2 antibody at a concentration of more than about any one of 10 mg/mL, 20 mg/mL, 30 mg/mL, 40 mg/mL, 50 mg/mL, 60 mg/mL, 70 mg/mL, 80 mg/mL, 90 mg/mL, 100 mg/mL, 125 mg/mL, 150 mg/mL, 175 mg/mL, 200 mg/mL, 225 mg/mL, or 250 mg/mL is provided. In some embodiments, the composition comprises a chimeric antibody prepared in a host cell or a cell-free system. In some embodiments, the composition comprises a humanized antibody prepared in a host cell or a cell-free system. In some embodiments, the composition comprises a human antibody prepared in a host cell or a cell-free system.

V. Therapeutic Compositions and Methods*Methods of treating diseases using anti-LILRB2 antibodies*

Antibodies and compositions comprising antibodies are provided for use in methods of treatment for humans or animals. Methods of treating disease comprising administering anti-LILRB2 antibodies are also provided. Nonlimiting exemplary diseases that can be treated with anti-LILRB2 antibodies include, but are not limited to cancer.

In more detail, examples of diseases, such as cancer, that can be treated according to the methods of the invention include solid and hematological/lymphatic cancers and also malignant, pre-malignant, and benign growth, such as dysplasia. Examples of cancer include but are not limited to, carcinoma, lymphoma, blastoma, sarcoma, and leukemia. More particular non-limiting examples of such cancers include kidney cancer (e.g., renal cell carcinoma, e.g., papillary renal cell carcinoma), squamous

cell cancer, mesothelioma, teratoma, small-cell lung cancer, pituitary cancer, esophageal cancer, astrocytoma, soft tissue sarcoma, lung cancer (e.g., non-small cell lung cancer, adenocarcinoma of the lung, squamous carcinoma of the lung), cancer of the peritoneum, hepatocellular cancer, gastrointestinal cancer (e.g., stomach cancer), pancreatic cancer, cervical cancer, ovarian cancer, liver cancer, bladder cancer, hepatoma, breast cancer, colon cancer, colorectal cancer, rectal cancer, endometrial or uterine carcinoma, salivary gland carcinoma, liver cancer, prostate cancer, vulval cancer, thyroid cancer, thymoma, hepatic carcinoma, brain cancer, glioma, glioblastoma, endometrial cancer, testis cancer, cholangiocarcinoma, cholangiosarcoma, gallbladder carcinoma, gastric cancer, melanoma (e.g., uveal melanoma), pheochromocytoma, paraganglioma, adenoid cystic carcinoma, and various types of head and neck cancer (e.g., squamous head and neck cancer).

The anti-LILRB2 antibody can be administered as needed to subjects. Determination of the frequency of administration can be made by persons skilled in the art, such as an attending physician based on considerations of the condition being treated, age of the subject being treated, severity of the condition being treated, general state of health of the subject being treated and the like. In some embodiments, an effective dose of an anti-LILRB2 antibody is administered to a subject one or more times. In some embodiments, an effective dose of an anti-LILRB2 antibody is administered to the subject once a month, less than once a month, such as, for example, every two months or every three months. In some embodiments, an effective dose of an anti-LILRB2 antibody is administered less than once a month, such as, for example, every two weeks or every week. An effective dose of an anti-LILRB2 antibody is administered to the subject at least once. In some embodiments, the effective dose of an anti-LILRB2 antibody may be administered multiple times, including for periods of at least a month, at least six months, or at least a year.

In some embodiments, pharmaceutical compositions are administered in an amount effective for treatment of (including prophylaxis of) cancer. The therapeutically effective amount is typically dependent on the weight of the subject being treated, his or her physical or health condition, the extensiveness of the condition to be treated, or the age of the subject being treated. In general, anti-LILRB2 antibodies may be administered in an amount in the range of about 10 µg/kg body weight to about 100 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 50 µg/kg body weight to about 5 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 100 µg/kg body weight to about 10 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 100 µg/kg body weight to about 20 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 0.5 mg/kg body weight to about 20 mg/kg body weight per dose.

In some embodiments, pharmaceutical compositions are administered in an amount effective to cause conversion of M2-like macrophages to M1-like macrophages.

The therapeutically effective amount is typically dependent on the weight of the subject being treated, his or her physical or health condition, the extensiveness of the condition to be treated, or the age of the subject being treated. In general, anti-LILRB2 antibodies may be administered in an amount in the range of about 10 µg/kg body weight to about 100 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 50 µg/kg body weight to about 5 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be

administered in an amount in the range of about 100 µg/kg body weight to about 10 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 100 µg/kg body weight to about 20 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 0.5 mg/kg body weight to about 20 mg/kg body weight per dose.

Pharmaceutical compositions

In some embodiments, compositions comprising anti-LILRB2 antibodies are provided in formulations with a wide variety of pharmaceutically acceptable carriers (see, for example, Gennaro, Remington: The Science and Practice of Pharmacy with Facts and Comparisons: Drugfacts Plus, 20th ed. (2003); Ansel et al., Pharmaceutical Dosage Forms and Drug Delivery Systems, 7th ed., Lippencott Williams and Wilkins (2004); Kibbe et al., Handbook of Pharmaceutical Excipients, 3rd ed., Pharmaceutical Press (2000)). Various pharmaceutically acceptable carriers, which include vehicles, adjuvants, and diluents, are available. Moreover, various pharmaceutically acceptable auxiliary substances, such as pH adjusting and buffering agents, tonicity adjusting agents, stabilizers, wetting agents and the like, are also available. Non-limiting exemplary carriers include saline, buffered saline, dextrose, water, glycerol, ethanol, and combinations thereof.

In some embodiments, a pharmaceutical composition comprising an anti-LILRB2 antibody is provided. In some embodiments, the pharmaceutical composition comprises a chimeric antibody. In some embodiments, the pharmaceutical composition comprises a humanized antibody. In some embodiments, the pharmaceutical composition comprises an antibody prepared in a host cell or cell-free system as described herein. In some embodiments, the pharmaceutical composition comprises pharmaceutically acceptable carrier.

In some embodiments, pharmaceutical compositions are administered in an amount effective for treatment of (including prophylaxis of) cancer. The therapeutically effective amount is typically dependent on the weight of the subject being treated, his or her physical or health condition, the extensiveness of the condition to be treated, or the age of the subject being treated. In general, anti-LILRB2 antibodies may be administered in an amount in the range of about 0.05 mg/kg body weight to about 100 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 10 µg/kg body weight to about 100 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 50 µg/kg body weight to about 5 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 100 µg/kg body weight to about 10 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 100 µg/kg body weight to about 20 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 0.5 mg/kg body weight to about 20 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 0.5 mg/kg body weight to about 10 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 0.05 mg/kg body weight to about 20 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be administered in an amount in the range of about 0.05 mg/kg body weight to about 10 mg/kg body weight per dose. In some embodiments, anti-LILRB2 antibodies may be

administered in an amount in the range of about 5 mg/kg body weight or lower, for example less than 4, less than 3, less than 2, or less than 1 mg/kg of the antibody.

In some embodiments, anti-LILRB2 antibodies can be present in an amount in the range of about 50 µg/kg body weight to about 5 mg/kg body weight per dose. For example, in some embodiments, a dose for a 20 kg person can be within a range of about 1 mg to about 100 mg. In some embodiments, the dose can be within a range of 2 mg to 200 mg of the anti-LILRB2 antibody. In some embodiments, the dose can be within a range of 10 mg to 400 mg of the anti-LILRB2 antibody.

Routes of administration

In some embodiments, anti-LILRB2 antibodies can be administered in vivo by various routes, including, but not limited to, intravenous, intra-arterial, parenteral, intratumoral, intraperitoneal or subcutaneous. The appropriate formulation and route of administration may be selected according to the intended application.

Combination therapy

Anti-LILRB2 antibodies can be administered alone or with other modes of treatment, e.g., with an additional therapeutic agent. They can be provided before, substantially contemporaneous with, or after other modes of treatment, for example, surgery, chemotherapy, radiation therapy, or the administration of a biologic, such as another therapeutic antibody. In some embodiments, an anti-LILRB2 antibody is administered in conjunction with another anti-cancer agent.

In some embodiments, an anti-LILRB2 antibody provided herein is administered with a PD-1 therapy. Exemplary PD-1 therapies include, but are not limited to, nivolumab (BMS-936558, MDX-1106, ONO-4538); pidilizumab, lambrolizumab/pembrolizumab (KEYTRUDA, MK-3475); durvalumab; RG-7446; avelumab (MSB-0010718C); AMP-224; BMS-936559 (an anti-PD-L1 antibody); AMP-514; MDX-1105; ANB-011; anti-LAG-3/PD-1; anti-PD-1 Ab (CoStim); anti-PD-1 Ab (Kadmon Pharm.); anti-PD-1 Ab (Immunovo); anti-TIM-3/PD-1 Ab (AnaptysBio); anti-PD-L1 Ab (CoStim/Novartis); MEDI-4736 (an anti-PD-L1 antibody, Medimmune/AstraZeneca); RG7446/MPDL3280A (an anti-PD-L1 antibody, Genentech/Roche); KD-033, PD-1 antagonist (Agenus); STI-A1010; STI-A1110; TSR-042; and other antibodies and other agents that are directed against programmed death-1 (PD-1) or programmed death ligand 1 (PD-L1) (e.g., JTX-4014, US 2018/0118829).

In some embodiments, a subject is selected for treatment with an anti-LILRB2 antibody provided herein and a PD-1 therapy if the subject's tumor is PD-L1^{HIGH}. Determining the level of PD-L1 may be determined, for example, using IHC. In some embodiments, a subject is first treated with a PD-1 therapy, and is later treated with an anti-LILRB2 antibody provided herein, with or without continuing the PD-1 therapy. Thus, methods provided herein include treatment of a subject with an anti-LILRB2 antibody, wherein the subject has previously been treated with a PD-1 therapy.

In some embodiments, an anti-LILRB2 antibody provided herein is administered to patients who show the presence of macrophages in one or more tumors. The presence of macrophages can be determined by, e.g., mRNA signature or IHC.

In some embodiments, an anti-LILRB2 antibody provided herein is administered with one or more therapies selected from: an anti-CD47 antibody (e.g., CC90002 (Celgene) or Hu5F9-G4 (Forty Seven, Inc.)); an anti-SIRP alpha antibody (e.g., OSE-172 (OSE Immunotherapeutics)); pegylated IL-2 (e.g.,

NKTR-214 (Nektar Therapeutics)); an anti-VEGF antibody (e.g., bevacizumab (AVASTIN®)); TTI-621 or TTI-624 (Trillium Therapeutics SIRPa-Fc); ALX148 (Alexo, SIRPa-Fc), and an IDO inhibitor (e.g., epacadostat (Incyte)).

5 In some embodiments, a subject is selected for treatment with an anti-LILRB2 antibody provided herein and an ICOS therapy (e.g., JTX-2011, e.g., as described in U.S. Patent Publication No. 2016/0304610, incorporated herein by reference in its entirety). In some embodiments, a subject is first treated with an ICOS therapy, and is later treated with an anti-LILRB2 antibody provided herein, with or without continuing the ICOS therapy. Thus, methods provided herein include treatment of a subject with an anti-LILRB2 antibody, wherein the subject has previously been treated with an ICOS therapy.

10 In some embodiments, the anti-LILRB2 antibody provided herein is administered with an agonist anti-OX40 antibody (such as Medi6469, MedImmune; MOXR0916/RG7888, Roche). In some embodiments, the anti-LILRB2 antibody provided herein is administered with an anti-CTLA4 antibody (such as ipilimumab, YERVOY®, BMS-734016; MDX-101).

15 In some embodiments, an additional therapeutic agent is a chemotherapeutic agent. Exemplary chemotherapeutic agents that may be combined with the anti-LILRB2 antibodies provided herein include, but are not limited to, capecitabine, cyclophosphamide, dacarbazine, temozolomide, cyclophosphamide, docetaxel, doxorubicin, daunorubicin, cisplatin, carboplatin, epirubicin, eribulin, 5-FU, gemcitabine, irinotecan, ixabepilone, methotrexate, mitoxantrone, oxaliplatin, paclitaxel, nab-paclitaxel, ABRAXANE® (protein-bound paclitaxel), pemetrexed, vinorelbine, and vincristine. In some embodiments, an anti-LILRB2 antibody provided herein is administered with at least one kinase inhibitor. Nonlimiting exemplary

20 kinase inhibitors include erlotinib, afatinib, gefitinib, crizotinib, dabrafenib, trametinib, vemurafenib, and cobimetanib.

In some embodiments, the additional therapeutic agent is an IDO inhibitor. Nonlimiting exemplary IDO inhibitors are described, e.g., in US 2016/0060237; and US 2015/0352206. Nonlimiting

25 exemplary IDO inhibitors include Indoximod (New Link Genetics), INCB024360 (Incyte Corp), 1-methyl-D-tryptophan (New Link Genetics), and GDC-0919 (Genentech).

In some embodiments, an anti-LILRB2 antibody provided herein is administered in combination with an immune-modifying drug (IMiD). Nonlimiting exemplary IMiDs include thalidomide, lenalidomide, and pomalidomide.

30 In some embodiments, the anti-LILRB2 antibody is administered with a second therapeutic method for treatment. Thus, the administration of an antibody provided herein can be in combination with another system of treatment.

In some embodiments, an additional therapeutic agent is a cancer vaccine. Cancer vaccines have been investigated as a potential approach for antigen transfer and activation of dendritic cells. In

35 particular, vaccination in combination with immunologic checkpoints or agonists for co-stimulatory pathways have shown evidence of overcoming tolerance and generating increased anti-tumor response. A range of cancer vaccines have been tested that employ different approaches to promoting an immune response against the tumor (see, e.g., Emens, 2008, *Expert Opin. Emerg. Drugs*, 13(2): 295–308). Approaches have been designed to enhance the response of B cells, T cells, or professional antigen-

40 presenting cells against tumors. Exemplary types of cancer vaccines include, but are not limited to, peptide-based vaccines that employ targeting distinct tumor antigens, which may be delivered as peptides/proteins or as genetically-engineered DNA vectors, viruses, bacteria, or the like; and cell biology

approaches, for example, for cancer vaccine development against less well-defined targets, including, but not limited to, vaccines developed from patient-derived dendritic cells, autologous tumor cells or tumor cell lysates, allogeneic tumor cells, and the like.

Nonlimiting exemplary cancer vaccines include Sipuleucel-T, which is derived from autologous peripheral-blood mononuclear cells (PBMCs) that include antigen-presenting cells (see, e.g., Kantoff PW et al., 2010, *N Engl J Med* 363:411-22). In Sipuleucel-T generation, the patient's PBMCs are activated ex vivo with PA2024, a recombinant fusion protein of prostatic acid phosphatase (a prostate antigen) and granulocyte-macrophage colony-stimulating factor (an immune-cell activator). Another approach to a candidate cancer vaccine is to generate an immune response against specific peptides mutated in tumor tissue, such as melanoma (see, e.g., Carreno et al., 2015, *Science* 348:6236). Such mutated peptides may, in some embodiments, be referred to as neoantigens. As a nonlimiting example of the use of neoantigens in tumor vaccines, neoantigens in the tumor predicted to bind the major histocompatibility complex protein HLA-A*02:01 are identified for individual patients with a cancer, such as melanoma. Dendritic cells from the patient are matured ex vivo, then incubated with neoantigens. The activated dendritic cells are then administered to the patient. In some embodiments, following administration of the cancer vaccine, robust T-cell immunity against the neoantigen is detectable.

In some such embodiments, the cancer vaccine is developed using a neoantigen. In some embodiments, the cancer vaccine is a DNA vaccine, such as a mammaglobin-A DNA vaccine (see, e.g., Gillanders et al., 2014, *Clin. Canc. Res.*, 20: 5964-75). In some embodiments, the cancer vaccine is an engineered virus comprising a cancer antigen, such as PROSTVAC (rilimogene galvacirepvec/rilimogene glafolivec). In some embodiments, the cancer vaccine comprises engineered tumor cells, such as GVAX, which is a granulocyte-macrophage colony-stimulating factor (GM-CSF) gene-transfected tumor cell vaccine (see, e.g., Nemunaitis, 2005, *Expert Rev Vaccines*, 4: 259-74).

In some embodiments, an anti-LILRB2 antibody described herein is administered before, concurrently, or after a cancer vaccine. In some embodiments, cancer vaccines developed using neoantigens are used in combination with the anti-LILRB2 antibodies described herein. In some such embodiments, the combination is used to treat a cancer with a high mutational burden, such as melanoma, lung, bladder, or colorectal cancer.

In some embodiments, an anti-LILRB2 antibody provided herein is administered in combination with a chimeric antigen receptor T cell therapy (CAR-T therapy). The CAR-T cell may be genetically modified to express a receptor that recognizes an antigen expressed by tumor cell. The antigen may be an antigen specifically expressed by the tumor or an antigen expressed by both cancerous cells and healthy tissue. In some embodiments, the CAR-T cell is an anti-BCMA CAR-T cell. In some embodiments, CAR-T therapy is adoptive CAR-T therapy, in which a patient's T cells are removed and modified to express the chimeric antigen receptor, and then returned to the patient. See, e.g., Dai et al., 2016, *J Natl Cancer Inst*, 108 (7): djv439, doi: 10.1093/jnci/djv439; Gill et al., 2015, *Blood Rev*, pii: S0268-960X(15)00080-6, doi: 10.1016/j.blre.2015.10.003; Gill et al., 2015, *Immunol. Rev*, 263(1):68-89. doi: 10.1111/imr.12243.

40 Kits/articles of manufacture

Provided herein are also kits, medicines, compositions, and unit dosage forms for use in any of the methods described herein.

Kits can include one or more containers comprising an anti-LILRB2 antibody (or unit dosage forms and/or articles of manufacture). In some embodiments, a unit dosage is provided wherein the unit dosage contains a predetermined amount of a composition comprising an anti-LILRB2 antibody, with or without one or more additional agents. In some embodiments, such a unit dosage is supplied in single-use prefilled syringe for injection. In some embodiments, the composition contained in the unit dosage can comprise saline, sucrose, or the like; a buffer, such as phosphate, or the like; and/or be formulated within a stable and effective pH range. In some embodiments, the composition can be provided as a lyophilized powder that may be reconstituted upon addition of an appropriate liquid, for example, sterile water. In some embodiments, the composition comprises one or more substances that inhibit protein aggregation, including, but not limited to, sucrose and arginine. In some embodiments, a composition comprises heparin and/or a proteoglycan.

In some embodiments, the amount of the anti-LILRB2 antibody used in the unit dose can be any of the amounts provided herein for the various methods and/or compositions described.

In some embodiments, kits further comprise instructions for use in the treatment of cancer in accordance with any of the methods described herein. The kit may further comprise a description of selection an individual suitable or treatment. Instructions supplied in the kits are typically written instructions on a label or package insert (for example, a paper sheet included in the kit), but machine-readable instructions (for example, instructions carried on a magnetic or optical storage disk) are also acceptable. In some embodiments, the kit further comprises another therapeutic agent.

The kits are in suitable packaging. Suitable packaging includes, but is not limited to, vials, bottles, jars, flexible packaging (for example, sealed Mylar or plastic bags), and the like. Kits may optionally provide additional components such as buffers and interpretative information. The present application thus also provides articles of manufacture, which include vials (such as sealed vials), bottles, jars, flexible packaging, and the like.

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EXAMPLES

The examples discussed below are intended to be purely exemplary of the invention and should not be considered to limit the invention in any way. The examples are not intended to represent that the experiments below are all or the only experiments performed. Efforts have been made to ensure accuracy with respect to numbers used (for example, amounts, temperature, etc.) but some experimental errors and deviations should be accounted for. Unless indicated otherwise, temperature is in degrees Centigrade, and pressure is at or near atmospheric.

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Example 1. HLA-G Cell Culture Experiments

The following example investigates the role of HLA-G in suppressing myeloid cell function. FIG. 1 shows a model of a LILRB2-expressing myeloid cell and an HLA-G-expressing tumor cell. A blocking anti-LILRB2 antibody is depicted between the LILRB2 expressed on the myeloid cell and the HLA-G expressed on the tumor cell. Multimeric HLA-G expressed as tetramers were used in primary human myeloid cell assays to investigate the role of HLA-G in suppressing dendritic cell function.

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Non-adherent immature dendritic cells (iDCs) were collected and washed twice in 1xDPBS (Gibco), and then were plated at 1×10^5 cells per well in a 96-well round bottom tissue culture treated plate in RPMI1640 supplemented with GLUTAMAX™ (Gibco) and 10% HI-FBS (Sigma). iDCs were

either plated in media alone, or matured in media containing PGE2, IL-1 β , and TNF α in the presence or absence of HLA-G tetramer (Fred Hutchinson Cancer Research Center) and incubated at 37°C +5% CO₂. After 24 hours, supernatants were collected for cytokine analysis via cytometric bead array (CBA) according to manufacturer's protocol (BD) and analyzed using an Accuri C6 analyzer (BD). Cells were
5 stained with antibodies specific for important antigen presentation molecules and cell expression of these markers was assessed using a FACSCelesta™ flow cytometer analyzer (BD).

DCs matured in the presence of HLA-G tetramer exhibited a decrease in expression of maturation markers CD80 and CD86 (FIGS. 2A-2F). This inhibitory effect was abolished when HLA-G tetramers were incubated with LILRB2^{low} donor dendritic cells (FIGS. 2G-2L). These results demonstrate
10 that soluble HLA-G blocks the maturation and ability for dendritic cells to develop into potent antigen presenting cells, and that HLA-G-mediated suppression is dependent on LILRB2 expressed on dendritic cells.

Example 2. Generation of antibodies

Mice and rats were immunized with human LILRB2 protein or cells overexpressing human LILRB2 with a DNA plasmid encoding for human LILRB2. All antibodies except J-16 and J-18 to J-20 are of murine origin; J-16 and J-18 to J-20 are derived from rat immunizations. Hybridoma clone supernatants were screened for specificity to human LILRB2 over other LILR family members using cell lines overexpressing full length LILR proteins. Hybridoma clones of interest were scaled up and
20 supernatant was purified for more extensive antibody screening before clones of interest were sequenced and produced recombinantly as human IgG4 chimeras. (See FIGs. 3A and 3B.)

Example 3. Chimeric antibody screening: Initial anti-LILRB2 screen set-up

Due to the high degree of sequence similarity among the eleven reported human LILR family
25 members, antibodies were screened for specificity against all family members at hybridoma clone, hybridoma scale-up, chimeric, and humanized antibody stages. Specificity was checked both on cells as well as with recombinant protein using the FORTEBIO® OCTET® at the chimeric antibody stage.

On cells, specificity was defined by antibody binding below a two-fold of isotype control cutoff. Positive control antibodies were utilized to establish expression of family members on cell surface, and
30 antibodies were also evaluated in comparison to positive control.

For soluble recombinant protein assays, recombinant LILR family proteins were expressed as 6xHis and/or human Fc1 fusion proteins. Antibodies were loaded on anti-human capture (AHC) sensors at 10 μ g/mL, and sensors were baselined in kinetics buffer. Control antibodies were similarly loaded onto sensor. If human Fc fusion proteins were used, sensors were blocked with human Fc protein and
35 baselined in kinetics buffer. Sensors were then tested for association with family member proteins at 300 nM. Binding is considered a response above 0.08 nm cutoff on the OCTET® instrument

Chimeric (hIgG4) anti-LILRB2 antibodies were selected based on specificity to cell-expressed hLILRB2 over the ten other human LILR family members, ability to block the ligand interactions to cell-expressed LILRB2, and ability to convert M2-like macrophages to M1-like macrophages having an
40 inflammatory activation status in a primary human macrophage assay. Select LILRB2-specific, ligand-blocking antibodies were additionally screened for binding to non-human primate (NHP) monocytes. An isotype control antibody was included in all screens to determine background signals. Described below

are the specific criteria and strategy performed to identify ligand-blocking, hLILRB2-specific, chimeric antibodies. Results are summarized in FIGS. 3A and 3B and described in detail below.

Antibody binning summary

- 5 A subset of antibodies against LILRB2 were binned using the OCTET® Red96 in sandwich format. Briefly, antibody #1 (indicated in column 1) was loaded onto an AHC sensor at 10 µg/mL. Tips were baselined in kinetics buffer, blocked with hFc1, baselined in kinetics buffer, then loaded with human LILRB2. Tips were again baselined in kinetics buffer and loaded with 10 µg/mL of antibody #2 (indicated in row 1). The response values shown in Table 2, below, is the binding of antibody #2 in the sandwich
- 10 format described.

Table 2. Competitive binding assay results

	J-17	J-19	J-11	J-03	J-16	J-07	J-04
J-17	-0.11	-0.10	-0.27	0.43	0.52	0.40	0.46
J-19	-0.21	-0.21	0.28	0.54	0.63	0.45	0.54
J-11	-0.39	0.71	-0.24	0.51	0.65	0.47	0.54
J-03	0.05	0.15	0.01	-0.08	-0.08	-0.07	-0.07
J-16	0.09	0.47	0.30	-0.28	-0.36	-0.26	-0.31
J-07	0.04	0.27	0.10	-0.29	-0.30	-0.28	-0.30
J-04	0.42	0.67	0.51	-0.10	-0.10	-0.10	-0.10

- 15 Antibodies identified as specific binders to LILRB2 and potent blockers of HLA-G binding to LILRB2 (J-19, J-11, and J-17) fall in close but not entirely overlapping epitope bins. J-11 and J-19 did not block binding of each other to LILRB2, but both were blocked by J-17. Antibodies that are specific to LILRB2 but do not block HLA-G, J-04, J-03, and J-07, bind in a separate bin from the three antibodies that are specific and block HLA-G, but the same bin as an antibody that blocks HLA-G binding to LILRB2
- 20 but is cross-reactive to LILRA1, J-16. Results are shown in Table 3, below.

Table 3. Antibody binning results

mAb1	J-17	J-19	J-11	J-03	J-16	J-07	J-04
Blocked mAb	J-19	J-17	J-17	J-16	J-03	J-16	J-16
Blocked mAb	J-11			J-07	J-07	J-03	J-03
Blocked mAb				J-04	J-04	J-04	J-07
bin	A/B	A	B	C	C	C	C

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Example 4. Chimeric antibody screening: Screening against cross-reactivity with LILR family members

The purpose of this screen was to identify antibodies with specific binding to hLILRB2 expressed on cells, with a counter-screen against cell-expressed hLILRB1, hLILRB3, hLILRB4, hLILRB5, hLILRA1,

hLILRA2, hLILRA3, hLILRA4, hLILRA5, and hLILRA6. 25 chimeric (hIgG4) antibodies were screened for cellular hLILRB2-specificity. Positive hits for hLILRB2 binding were identified as antibodies that bound hLILRB2-CHO-s greater than two-fold over isotype control mAb binding. Antibodies that also bound non-LILRB2 expressing cells greater than two-fold over isotype control mAb binding were designated as non-LILRB2-specific, or cross-reactive.

As shown in FIG. 4, 76% of chimeric antibodies tested were confirmed to bind cell-expressed human LILRB2. 78% of these hLILRB2-binding antibodies exhibited specific binding to hLILRB2 over the other ten hLILR family members over-expressed on CHO-s. Antibodies detected with a binding of 2-fold greater than isotype control for another LILR over-expressing cell line in addition to hLILRB2 CHO-s were found to be cross-reactive to hLILRB3, hLILRA1, hLILRA2, and/or hLILRA3. No hLILRB1, hLILRB4, hLILRA4, hLILRA5, or hLILRA6 cross-reactive antibodies were identified in this screen.

Example 5. Chimeric antibody screening: Screening for HLA-G blocking anti-LILRB2 chimeric mAbs and HLA-A2 blocking anti-LILRB2 chimeric mAbs

Antibodies were additionally screened for ability to block ligand-receptor interactions in a cell-based assay. Upon HLA-G binding LILRB2, myeloid cells are rendered immunosuppressive. Thus, identifying anti-LILRB2 antibodies that are capable of blocking HLA-G:LILRB2 interactions are predicted to be beneficial in promoting anti-tumor responses. In addition to HLA-G, another LILRB2 ligand capable of suppressing myeloid cells are classical major histocompatibility complex (MHC) class I molecules, such as HLA-A2.

In the secondary screen, 1×10^5 CHO-s cells over-expressing human LILRB2 were plated in 96-well round-bottom tissue culture-treated plate and washed twice with 1xDPBS (Gibco) and incubated with 10 μ g/mL primary antibody (anti-LILRB2 mAbs or control) prepared in 50 μ L FACS buffer (1xDPBS containing 2% HI-FBS (Sigma)+0.05% Sodium Azide). After incubation with mAbs for 30 minutes at 4° C, cells were washed twice in FACS buffer and then resuspended in 50 μ L of FACS buffer containing 5 μ g/mL APC-conjugated HLA-A2 or HLA-G tetramer (Fred Hutch). Cells were incubated protected from light for 30-60 minutes at 4° C. After incubation with tetramer, cells were washed in FACS buffer and re-suspended in fix buffer (1.5% paraformaldehyde diluted in 1xDPBS). Samples were analyzed using the Celesta flow cytometer analyzer (BD Biosciences). Data represent percent tetramer blocked by mAbs relative to tetramer alone, calculated according to the following equation:

$$\% \text{ tetramer blocked} = 100 - \left(\frac{MFI_{\text{Tetramer} + \text{mAb}}}{MFI_{\text{Tetramer}}} \times 100 \right)$$

The results of a study distinguishing HLA-G blocking antibodies from HLA-G non-blocking antibodies is shown in FIG. 5. Antibodies capable of blocking HLA-G:LILRB2 interactions on cells is identified as the percent of tetramer bound to LILRB2+ cells in the presence of antibody compared to tetramer bound to cells in the absence of antibody. Seven out of the 25 anti-LILRB2 antibodies blocked HLA-G tetramer binding to hLILRB2+ CHO-s by at least 50%. None of the isotype control antibodies blocked HLA-G from binding LILRB2+ cells.

The results of a study distinguishing HLA-A2 blocking antibodies from HLA-A2 non-blocking antibodies is shown in FIG. 6. Antibodies capable of blocking HLA-A2:LILRB2 interactions on cells is

identified as the percent of tetramer bound to LILRB2+ cells in the presence of antibody compared to tetramer bound to cells in the absence of antibody. Six out of the 25 anti-LILRB2 antibodies blocked HLA-A2 tetramer binding to hLILRB2+ CHO-s by at least 50%. None of the isotype control antibodies blocked HLA-A2 from binding LILRB2+ cells.

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Example 6. Chimeric antibody screening: Screening anti-LILRB2 chimeric mAbs for biological activity in cell culture

Human macrophage monoculture-cytokine release assay

Primary human monocytes from healthy donor peripheral blood were differentiated into macrophages in the presence of M-CSF. After seven days of differentiation, 1×10^5 human monocyte differentiated macrophages (HMDMs) were plated per well in a 96-well round-bottom tissue culture treated plate in a final volume of 200 μ L containing 100 ng/mL LPS in the absence or presence of 1 μ g/mL soluble mAbs in cell culture media (RPMI (Gibco) +10% FBS (Sigma)). After incubation for 24 hours at 37°C with 5% CO₂, supernatant was collected and cytokine bead array (CBA) was performed according to manufacturer's protocol (BD Biosciences) to measure cytokines produced in response to mAbs. Samples were analyzed using the Accuri C6 cytometer analyzer (BD Biosciences). Data represent mean of two-to-four donors.

M1/inflammatory and M2/anti-inflammatory cytokine production by primary HMDMs were detected upon treatment with soluble anti-LILRB2 mAbs, as shown in FIGS. 7A and 7B. M1/inflammatory cytokines measured included TNF α , as well as IL-6 and IL-1 β (data not shown). M2/anti-inflammatory cytokines measured included IL-10, as well as CCL-2 (data not shown). Production of cytokines is described as normalized levels relative to LPS treatment alone.

A positive correlation between M1-promoting activity (as measured by TNF α increase) and the ability for anti-LILRB2 mAbs to block HLA-G/A:LILRB2 interactions was observed (FIGS. 8A and 8B).

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Human macrophage monoculture-Nanostring assay

Primary human monocytes were differentiated into macrophages in the presence of M-CSF. After seven days of differentiation, 1×10^5 HMDMs were plated per well in a 96-well round-bottom tissue culture treated plate in a final volume of 200 μ L containing 100 ng/mL LPS in the absence or presence of 10 μ g/mL soluble anti-hLILRB2 mAbs in cell culture media (RPMI (Gibco) +10% FBS (Sigma)). Similar conditions were prepared to evaluate mAb activity in the absence of LPS. Cells were incubated at 37°C with 5% CO₂, and separate wells were plated to assess gene changes at four and 24 hours post-treatment. At each time point, supernatant was collected and RNA was extracted from the cells, quantified using Qubit, and QC'd using AATI's Fragment Analyzer. If sufficient RNA was extracted from the sample, gene expression was performed using NanoString nCounter using the Human Immunology V2 panel as well as a custom macrophage-specific spike-in. Gene expression was normalized to the expression of housekeeping genes, then noise thresholding was performed using the data from negative probes. Gene expression was transformed to the log₂ space and data from samples that were treated with LILRB2 binders were normalized to data from the palivizumab treated sample from the same donor. Data represent results from four donors.

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Log₂(gene expression) for each donor and each treatment were normalized to the log₂(gene expression) in response to palivizumab control. Tables 4 and 5 list the differentially expressed genes, in

the presence or absence of LPS, respectively, calculated using the ttest function in MATLAB. Genes that had median log2(fold change) across all donors either greater than 1 (i.e. 2 fold increase) or less than -1 (i.e., 2 fold decrease) with $p < 0.05$ in response to all anti-LILRB2 antibodies in the absence of LPS after four hours of exposure to the drugs (Table 4) and genes that were differentially expressed in response to all anti-LILRB2 antibodies in the presence of LPS after 24 hours of exposure to the drugs (Table 5). These changes were consistent across donors and are the basis for the monoculture signature scores defined in the Histoculture section.

Table 4. Monoculture anti-LILRB2 differential gene expression at four hours without LPS

CCL4	CCL2	TNFAIP6	CLEC4E	CCL18	CASP10	CIITA
IL8	IL7R	BCL2	NFKB2	GBP1	CASP2	
CCL3	DUSP4	CXCL2	CCL5	SOCS3	TLR7	
IL1B	TNFSF15	CCL20	CCL7	CSF1	MAF	
CXCL1	IL1RN	NFKB1	SRC	CD40	IFI16	
TRAF1	ICAM1	NFKBIA	CEBPB	CCL23	IL16	
IL1A	TNFAIP3	TNFRSF4	TLR2	NTSE	KLRC4	
TNF	CCL8	EGR1	CLEC5A	MBP	KLRK1	
IRAK2	CD83	NFKBIZ	RELB	TGFBR2	TLR8	
EGR2	TNFRSF9	PTGS2	PLAUR	BLNK	TNFSF10	

Table 5. Monoculture anti-LILRB2 differential gene expression at 24 hours with LPS

IL6	IL23A	C3	IL21R
NTSE	CXCL2	CCL4	CXCL13
IL1A	ZEB1	GBP5	
CD123	PTGS2	SRC	
IL8	TNFSF15	CCL2	
CCL20	TNF	TGFBI	
IL1RN	DPP4	CR1	
CXCL1	ICAM5	C1QB	
IL1B	ITGAX	CD36	
SPP1	CCL3	TRAF5	

Example 7. Chimeric antibody screening: Screening anti-LILRB2 chimeric mAbs for cross-reactivity to non-human primates

Methods

Primary cell binding

LILRB2 expression in humans is restricted to innate immune cell types including monocytes and neutrophils. Select HLA-G/A blocking, anti-LILRB2 mAbs capable of promoting the conversion of M2 to M1-like macrophages were tested for potential to bind human, cyno and rhesus monocytes in whole blood. Whole blood obtained from healthy human, cyno, and rhesus donors was obtained in sodium heparin tubes. Upon receipt, 100 μ L undiluted whole blood was incubated with Fc-receptor blocking reagent (TruStain, Biologend) according to manufacturer's protocol. After a 15-minute incubation, biotinylated mAbs were added to the blood at 25 μ g/mL and incubated at room temperature. After 20 minutes, diluted streptavidin-APC (BioLegend) and the human/NHP cross-reactive anti-CD14-BV421 clone M5E2 (BioLegend) were added and incubated for 20 minutes at room temperature. Red blood cells

were lysed and samples fixed using 1x Lyse/Fix solution (BD Biosciences) according to manufacturer's protocol. Samples were analyzed using a Celesta flow cytometer analyzer (BD Biosciences). Monocytes were identified across species as side scatter (SSC)^{hi} CD14^{hi} cells, neutrophils were identified as SSC^{hi}CD14^{lo} cell, and lymphocytes were identified as SSC^{lo} CD14^{neg} cells.

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On-cell binding to over-expressed rhesus-LILRB2

Anti-hLILRB2 mAb binding to rhesus LILRB2 (LILRBb) protein was assessed by incubating LILRBb-CHO cells with select anti-hLILRB2 mAbs for 30 minutes. After incubation, cells were washed and incubated with anti-hIgG-APC (Jackson Labs) according to manufacturer's protocol. Cell binding was assessed by flow cytometry using a Celesta flow cytometer analyzer (BD Biosciences).

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Results

All anti-LILRB2 mAbs tested in this assay preferentially bound monocytes and neutrophils over lymphocytes in human whole blood (FIGS. 9A-9C). A single anti-LILRB2 mAb exhibited cross-species reactivity to both cyno and human, with a similar preferential binding to monocytes and neutrophils over lymphocytes. Isotype control antibodies did not bind significantly to any cell types in human or NHP blood. FIGS. 10A and 10B confirm that these results translate to cells that over-expressing NHP LILRB2 (LILRBb), such that the same anti-hLILRB2 that preferentially cross-binds to NHP monocytes and neutrophils also binds specifically to rhesus LILRB2 (LILRBb) over-expressed CHO-s in a dose-dependent manner and does not cross-react to closely related family members in rhesus including LILRBa.

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Example 8. Humanization, affinity characterization, and assessment strategy for lead chimeric antibodies

Lead chimeras were humanized by grafting the CDRs of lead antibodies into human frameworks while maintaining certain amino acids to support loop structure and chain interface. A total of five heavy chain variable regions and five light chain variable regions were generated and expressed in combination to create a total of 25 humanized variants in the human IgG4 backbone. These variants were expressed as recombinant protein and filtered based on protein titer and affinity to the human LILRB2 target. Antibodies were further characterized for functional and biophysical properties to narrow down the panel and select humanized leads.

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Using a Mass-2 (Sierra Sensors) high capacity amine chip preimmobilized with AffiniPure Goat Anti-Human IgG, Fcγ Fragment Specific antibody, humanized antibodies were captured on the anti-human surface and then binding to human LILRB2-His was measured by flowing six different concentrations from 65 to 0.27 nM of the analyte over the antibody surface. The anti-LILRB2 surface was removed (10 mM Glycine, pH 2.0) and recaptured between all concentrations or buffer only cycles. The data was analyzed using the Sierra Analyzer software (version 3.1.14). All curves were double subtracted and fit to a 1:1 Langmuir Fit. Results are shown in Table 6, below.

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Table 6. Binding kinetics of antibodies

Antibody Reference	k_a [1/(M·s)]	k_d [1/s]	K_D [M]
J-19.h	5.15×10^5	1.35×10^{-3}	2.62×10^{-9}
J-11.h	3.70×10^5	9.13×10^{-4}	2.47×10^{-9}
J-17.h	1.56×10^6	4.43×10^{-4}	2.85×10^{-9}
J-19.h1	3.91×10^5	1.07×10^{-3}	2.73×10^{-9}
J-19.h2	5.21×10^5	2.38×10^{-3}	4.58×10^{-9}
J-19.h3	5.18×10^5	1.01×10^{-3}	1.96×10^{-9}
J19.h4	5.13×10^5	1.20×10^{-3}	2.33×10^{-9}

Humanized (hIgG4) anti-LILRB2 antibodies were further characterized based on specificity to cell-expressed hLILRB2 over the ten other human LILR family members, ability to block the ligand interactions to cell-expressed LILRB2, and ability to convert M2-like macrophages to an M1-like inflammatory activation status in a primary human macrophage assay. Antibodies were additionally screened for binding to non-human primate (NHP) monocytes. Humanized variants were additionally assessed for specific EC/IC₅₀'s for affinity to cell-expressed LILRB2, ligand blocking, and cytokine production in a primary human macrophage functional assay. An isotype control antibody was included in all screens to determine background signals. EC/IC₅₀'s were calculated based on transformed, non-normalized data using GraphPad Prism software. Results are summarized in FIGS. 11A and 11B and described in detail below.

Example 9. Humanized antibody characterization: LILR family cross-reactivity screening

The purpose of this assessment was to verify anti-LILRB2 antibodies maintain specificity to hLILRB2 expressed on cells post humanization, without binding other related LILR family members including hLILRB1, hLILRB3, hLILRB4, hLILRB5, hLILRA1, hLILRA2, hLILRA3, hLILRA4, hLILRA5, and hLILRA6. Positive hits for hLILRB2 binding were identified as antibodies that bound greater than or equal to a three-fold over isotype control antibody binding. None of the variants tested exceed three-fold greater non-specific binding relative to isotype. Additionally, EC₅₀ cell-based affinity measurements were determined.

Methods

To test for specificity to hLILRB2 and not towards any of the ten LILR family members, a multiplexed cell-based barcoding approach was used by staining cells with Far Red and/or Violet Cell Trace dyes (Thermo Scientific) according to manufacturer's protocol or left unstained. In brief, cells were washed twice with 1xDPBS and then incubated with diluted dye in 1xDPBS for 20 minutes at 37°C, mixing gently every 5-10 minutes. Dye labeling was quenched by adding equal volume of 100% HI-FBS (Sigma) to the cells. Note that LILRB1, LILRB2, LILRB3, LILRB4, and LILRB5 cell lines are also GFP-positive, while LILRA1, LILRA2, LILRA3, LILRA4, LILRA5, and LILRA6 cell lines are GFP-negative. The cells were then washed twice in 1xDPBS and then all 11 cell lines were combined per well in a 96-well round bottom tissue-culture treated plate. At least 25×10^3 cells of each cell-line were plated per well. Cells were then re-suspended in primary antibody (anti-LILRB2 mAbs or control) prepared in FACS buffer (1xDPBS containing 2% HI-FBS (Sigma) +0.05% Sodium Azide). After incubation at 4°C for 30 minutes, cells were washed twice with 1xDPBS and re-suspended in anti-human IgG-PE (BioLegend) diluted

1:200 in FACS buffer. Following a 30 minute incubation at 4°C, protected from light, cells were washed in 1xDPBS and re-suspended in fix buffer (1.5% paraformaldehyde diluted in 1xDPBS). Samples were analyzed using the Celesta flow cytometer analyzer (BD Biosciences). Geometric mean fluorescence intensity (gMFI) of PE was determined for each antibody across each cell line. Background MFI was detected with isotype control and relative binding of antibodies tested was measured as a fold over isotype.

Results

Of the anti-hLILRB2 humanized antibodies tested for binding and specificity to hLILRB2, all of the antibodies bound highly to hLILRB2 and did not cross-bind any of the ten additional hLILR family members in a cell-based binding assay (FIG. 12). The EC₅₀ of each antibody to LILRB2-expressing CHO-s was within the sub-nanomolar range (FIG. 13).

Example 10. Humanized antibody characterization: Blocking of HLA-G and HLA-A2 to hLILRB2+ cells

The potency of select humanized variants in blocking the interaction of HLA-G and HLA-A2 with primary human macrophage-expressed hLILRB2 were assessed. Primary human monocytes were differentiated into macrophages in the presence of M-CSF. After seven days of differentiation, 1×10^5 HMDMs were plated in 96-well round-bottom tissue culture-treated plate and washed twice with 1xDPBS (Gibco) and then incubated with 50 μ L primary antibody (anti-LILRB2 mAbs or control) prepared in FACS buffer (1xDPBS containing 2% HI-FBS (Sigma)+0.05% Sodium Azide). After incubation with mAbs for 30 minutes at 4°C, cells were washed twice in FACS buffer and then resuspended in 50 μ L of FACS buffer containing 5 μ g/mL APC-conjugated HLA-G or HLA-A2 tetramer (Fred Hutch). Cells were incubated protected from light for 30-60 minutes at 4°C. After incubation with tetramer, cells were washed in FACS buffer and re-suspended in fix buffer (1.5% paraformaldehyde diluted in 1xDPBS). Samples were analyzed using the Celesta flow cytometer analyzer (BD Biosciences).

As shown in FIG. 14, all anti-hLILRB2 humanized antibodies tested blocked HLA-G interaction to cell-expressed hLILRB2 with an EC₅₀'s in the nanomolar range. EC₅₀ values for each of the variants tested are shown in FIG. 11B. Control antibodies including isotype controls and non-ligand blocking anti-hLILRB2 chimeric antibodies did not display any activity in this assay.

As shown in FIG. 15, all anti-hLILRB2 humanized antibodies tested blocked HLA-A2 interaction to cell-expressed hLILRB2 with an EC₅₀'s in the nanomolar range. EC₅₀ values for each of the variants tested are shown in FIG. 11B.

Example 11. Humanized antibody characterization: Biological activity of humanized anti-LILRB2 mAbs in cell culture

Tumor associated macrophages (TAMs) display a functional activation status consistent with an M2-like, immunosuppressive macrophage. Without wishing to be bound by theory, antagonizing the inhibitory receptor, LILRB2, on macrophages is hypothesized to prevent the induction of immunosuppressive macrophages and promote hyper-inflammatory responses. To characterize the functional activity of anti-LILRB2 antibodies, EC/IC₅₀'s were determined as a potency measurement of anti-LILRB2 mAbs capable of converting M2 into M1-like macrophages in a human monocyte-derived

macrophage (HMDM) cytokine release assay. Antibodies with sub-nM activity (EC_{50}) in this assay were designated as M1-promoting mAbs.

Methods

5 After seven days of differentiation, 1×10^5 HMDMs were plated per well in a 96-well round-bottom tissue culture treated plate in a final volume of 200 μ L containing 100 ng/mL LPS in the absence or presence mAbs in cell culture media (RPMI (Gibco) +10% FBS (Sigma)). After incubation for 24 hours at 37°C with 5% CO₂, supernatant was collected and CBA was performed according to manufacturer's protocol (BD Biosciences) to measure cytokines produced in response to mAbs. Samples were analyzed
10 using the Accuri C6 cytometer analyzer (BD Biosciences).

Results

As shown in FIGS. 16A and 16B, all anti-hLILRB2 humanized mAbs displayed M1-promoting activity, while suppressing the production M2-associated cytokines including IL-10 and CCL-2. 67% of
15 humanized anti-hLILRB2 mAbs tested were shown to have sub-nanomolar activity in this assay. EC_{50} values for each of the variants tested are shown in FIG. 10B.

Example 12. Humanized antibody characterization: Selective binding to non-human primate LILRB2 (LILRBb)

20 To assess humanized mAbs for cross-species reactivity, hLILRB2-specific, ligand-blocking mAbs were assessed for additional selective binding to putative rhesus LILRB2 (LILRBb) over-expressed cells and not to closely related NHP LILR family members.

Methods

25 Anti-hLILRB2 mAb binding to rhesus LILRB2 (LILRBb) protein was assessed by incubating LILRBb-CHO cells with select anti-hLILRB2 mAbs for 30 minutes. After incubation, cells were washed and incubated with anti-hIgG-APC (Jackson Labs) according to manufacturer's protocol. Cell binding was assessed by flow cytometry using a Celesta flow cytometer analyzer (BD Biosciences).

Results

30 All anti-hLILRB2 humanized mAbs bound to rhesus LILRB2 (LILRBb) in dose-dependent and specific manner (FIG. 17A). These anti-hLILRB2 mAbs did not bind the closely-related rhesus LILRBa protein expressed on cells (FIG. 17B).

Example 13. Gene expression analysis: Histoculture experiments

35 Fresh human kidney tumor samples were obtained post-surgery. A section of each tumor was cut and fixed for IHC. Approximately 300- μ M slices of remaining tumor were placed in a six-well plate. Indicated treatments were added into the medium and plates were incubated at 37°C. Each slice was treated with 10 μ g/mL of one of six drugs for 24 hours. The six treatments included in the experiment are
40 J-19, J-17, and J-11 (all LILRB2 binders and ligand blockers), J-04 (a LILRB2 binder that does not block ligand binding), an anti-TIM3 antibody, and palivizumab, which was used as a negative control.

Tumor slices were lysed using Qiagen's TissueLyser processor, and formalin-fixed paraffin-embedded (FFPE) samples were deparaffinized. RNA was extracted from FFPE and fresh tumor samples, quantified using Qubit, and, in certain cases, QC'd using AATI's Fragment Analyzer. If sufficient RNA was extracted from the sample, gene expression was performed using NanoString nCounter using the Human Immunology V2 panel as well as a custom macrophage-specific spike-in. Gene expression was normalized to the expression of housekeeping genes, and noise thresholding was performed using the data from negative probes. Gene expression was transformed to the log2 space and data from samples that were treated with LILRB2 binders or anti-TIM3 were normalized to data from the palivizumab treated sample from the same patient. FIG. 18 shows change in gene expression in response to treatment relative to palivizumab control. Differential gene expression relative to palivizumab control is quantified in Table 7, below. Each gene in the list showed differential expression to at least two treatments with a nominal p value less than 0.055. The fold change in gene expression was either positive for all treatments or negative for all treatments.

Table 7. Histoculture differential gene expression

Gene	J-04	J-17	J-11	J-19	TIM3
CD68	-0.29	-0.20	-0.24	-0.31	
CXCL9		0.98	0.80	0.72	0.67
G6PD		-0.21	-0.26	-0.25	-0.17
IL10	-0.41	-0.40	-0.37	-0.38	
IL6R	0.33	0.45	0.36	0.31	
ETS1	0.31	0.34			0.14
KCNJ2	0.55	0.49	0.82		
MASP1		0.46		0.36	0.32
ZEB1	0.33	0.41			0.21
BAT3			-0.15	-0.12	
CCL2		-0.50	-0.57		
CLEC4A			0.28	0.29	
CXCL11				0.93	0.78
GUSB		0.15		0.11	
IFITM1		0.48	0.42		
IL15			0.35		0.22
IL18R1		-0.22			-0.30
IRF1		0.47			0.39
ITGA6			0.39	0.29	
KLRC3	-0.44		-0.24		
PIGR		0.58		0.71	
PTPN22	-0.62		-0.21		
SDHA		0.25		0.20	
SLC2A1	0.27		0.45		
TAP1		0.24			0.24

A hierarchical clustering heatmap showing the log2 (fold change) in expression of each gene (row) in each treated sample (column) is shown in FIG. 19. Each gene in the list showed differential expression to at least two treatments with a nominal p value less than 0.055. The expression of Set 1 genes is

generally downregulated in response to treatment (gray boxes) and the expression of Set 2 genes is generally upregulated in response to treatment (black boxes).

A response score for each sample was calculated by adding the sum of the log₂(fold change) of a subset of genes in Set 2 to the negative sum of the log₂(fold change) of a subset of genes in Set 1 and dividing by the number of genes included, according to the following equation:

$$PD\ score = \frac{1}{\#Set1\ genes + \#Set2\ genes} \left(\sum_{Set2} \log_2(fold\ change) - \sum_{Set1} \log_2(fold\ change) \right)$$

The response score for each donor to each ligand-blocking anti-LILRB2 drug is shown in FIG. 20.

Response to treatment is consistent across treatments within donor, thus allowing for classification of donors by their response to anti-LILRB2 treatment. Donors with an average response score greater than 0.5 are classified as “full responders”; those with an average response score between 0.3 and 0.5 are classified as “partial responders”; those with scores below 0.3 are classified as “non-responders.”

Monoculture signatures were derived based on the mean log₂ (fold change) in gene expression across donors in response to anti-LILRB2 ligand-blocking drugs in the absence of LPS after 4 hours and in the presence of LPS after 24 hours (FIGS. 21A and 21B). Monoculture signature scores were calculated for each histoculture sample treated with an anti-LILRB2 ligand-blocking drug by projection of the log₂ (fold change) in gene expression onto the vector defined by the monoculture signature. The monoculture signature scores (four hours in the absence of LPS and 24 hours in the presence of LPS) are significantly higher ($p < 0.01$) in full responders compared to partial and non-responders.

In sum, the monoculture results showed that LILRB2-binding drugs cause macrophages to differentially express a number of genes consistently across donors. The set of genes that was modulated in this system constitutes a monoculture signature that incorporates both magnitude and directionality. To confirm that these pathways would also be modulated in more complex systems, histoculture experiments were performed. Analysis of histoculture data shows that exposure of kidney tumor slices to LILRB2-binding drugs results in upregulation of inflammatory chemokine expression, as well as differential expression of known myeloid-specific genes. The genes are co-regulated and are only differentially expressed in a subset of samples. This subset of genes constitutes the PD response signature, which is used to calculate response scores and classify samples based on response to drugs. It should be noted that donors that respond to one anti-LILRB2 drug generally respond to all of them. Additionally, when the histoculture data was projected onto the monoculture signature, the responders showed statistically significant monoculture scores. Thus, the modulation of myeloid-specific genes was consistent with findings in *in vitro* experiments, suggesting that the same biological pathways are being affected.

Example 14. Toxicology

Specificity of anti-LILRB2 antibodies was determined by assessing binding of antibodies to red blood cells and platelets by flow cytometry or to serum proteins by ELISA. No off-target binding was observed in these assays (FIG. 22).

The potential for anti-LILRB2 antibodies to elicit cytokine storm was assessed in a human whole blood cytokine release assay using titrations of soluble antibodies. The assay was incubated for

24 hours at 37°C. Plasma was then isolated and cytokines were measured using a 10-cytokine MSD panel. Data are mean +/- SD of three donors. As shown in FIGS. 23A-23D, anti-LILRB2 antibodies did not exhibit induction of cytokines associated with cytokine storm (e.g., IL-4, IL-6, IL-18, or TNFα) in this assay.

5 The potential for anti-LILRB2 antibodies to induce neutrophil activation was assessed in human whole blood using titrations of soluble antibodies. The assay was incubated for two hours at 37°C. Changes in neutrophil activation markers (increase in CD11b and decrease in CD62L) were assessed by flow cytometry. Data are mean +/- SD of 2 donors. Anti-LILRB2 antibodies did not induce neutrophil activation, as indicated by low CD11b expression (FIGS. 24A and 24B) and retention of CD62L (FIGS. 10 24C and 24D).

Example 15. Pharmacokinetics

Cynomolgus monkeys (n=3 per group) received a single intravenous infusion of the indicated concentration of anti-LILRB2 antibody. Serum concentrations of drug were measured using an electrochemiluminescent assay, and the results, shown in FIG. 25, indicate that single-dose pharmacokinetics in cynomolgus monkeys exhibits a half-life typical of human IgG4 antibodies.

To assess the effect of anti-LILRB2 on neutrophil populations, a CBC assay was conducted in cynomolgus monkeys pre-study and following dosing of anti-LILRB2 antibodies. As shown in FIGS. 26A and 26B, peripheral blood neutrophils remained within normal range and displayed a nonsignificant downward trend.

Example 16. Pirb Knockout Mice Experiment

Eight- to twelve-week old Pirb homozygous knockout mice or wild type littermate controls were inoculated subcutaneously with B16.SIY (1×10^6), LLC (2×10^5), or MC38 (5×10^5) tumor cells. Once palpable tumors were felt, mice were monitored and tumor measurements recorded at least twice weekly until tumors exceeded 2,000 mm³ or mice had a body weight decrease of over 20%. Some mice were sacrificed early for analysis of the tumor-infiltrating cells. All experiments were conducted in accordance with institutional guidelines for animal care and use.

Tumors were detected in all wild type mice and in line with historical growth kinetics at Jounce Therapeutics. While no significant difference was observed in the growth of B16.SIY or LLC tumors between wild type and Pirb knockout mice (FIGS. 27A, 27B, 28A, and 28B), a significant decrease in MC38 tumor growth was found in Pirb knockout as compared to wild type mice (FIGS. 29A and 29B). Analysis of the MC38 tumor-infiltrating cells was consistent with a phenotype of tumor-associated macrophages that exhibited less immunosuppressive characteristics (lower IL-4R) and increased antigen presentation capacity (higher MHC class II) in Pirb knockout mice as compared to wild type controls (data not shown).

Example 17. Alanine Scan Analysis

The heavy chain and light chain variable regions of J-19.h1 are set forth in FIG. 30. The complementarity-determining region (CDR) of the heavy and light chains of J-19.h1 as defined by the Kabat CDR definition are indicated in FIG. 30 by underlining. Key binding residues of J-19.h1 necessary for binding the target, LILRB2, were identified by mutating individual residues in the CDRs. The scan was

conducted by mutating 34 heavy chain and 18 light chain residues in the CDRs individually to alanine. Mutations to CDRL2 were not included as this region of J-19.h1 was not determined to contribute to LILRB2 binding. A full mutation of J-19.h1 to the germline CDRL2 sequence did not change binding affinity for the target.

- 5 All variants were produced transiently in a Chinese Hamster Ovarian cell line and purified using into citrate buffer on an automated liquid handler. Affinities were determined using a ForteBio Octet Red96. J-19.h1 variants were normalized to 10 ug/mL and loaded onto anti-human capture sensors. The loaded sensors were then soaked in kinetics buffer to establish a baseline and dipped into wells containing LILRB2 at two concentrations of 50 nM and 5 nM, followed by a dissociation step into buffer.
- 10 Kinetics data was calculated using the ForteBio data analysis software.

Resulting affinities of J-19.h1 variants to LILRB2 showed key residues, highlighted grey, are critical to LILRB2 binding. Mutation to alanine resulted in affinities that were 5-fold less than the control or resulted in complete abrogation of binding. Residues with a dotted underline had affinities between 2 and 5-fold of the control. All other residues in the CDR maintained similar affinity to LILRB2 when mutated to

15 alanine.

Example 18. qPCR Primers

Commercially available qPCR assays for LILRB2 from both Applied Biosystems (TaqMan) and Biorad (PrimePCR) did not show specificity for their target when run on cDNA derived from the RNA of

20 LILR family member over-expressing cell lines. The LILR family members have high homology with each other and primer sets therefore can produce off target effects during PCR.

The following primer sets were tested on the over-expressing cell lines and one primer set showed specificity under certain PCR conditions. The cDNA libraries were generated using both the BioRad iScript Reverse Transcription Supermix and the Fluidigm Reverse Transcription master mix. The

25 primer sets, when not accompanied with a probe, were run using the BioRad SsoFast EvaGreen Supermix with Low ROX master mix. The primer sets with probes were run using the Applied Biosystems TaqMan Fast Advanced Master Mix. The primers were ordered from IDT as oligos and the probes were labeled with FAM.

Table 8. Primer and probe sequences

	Forward Primer	Reverse Primer	Probe (if any)
Set 1	CACACAGCTCAACCTGGACA	TGGGTAGGCTCCTGTCATCA	
Set 2	AGCTCAACCTGGACAGCAC	CTTGGGGATGGTCCCTGTCT	
Set 3	ACACACAGCTCAACCTGGAC	CAGGCAGACTCAGATCAGCA	
Set 4	CACACAGCTCAACCTGGACA	CTGCAGGCAGACTCAGATCA	
Set 5	CCTGCATTCTCCTCTGTGC	CTGTCCAGGTTGAGCTGTGT	
Set 6	TCGCACAGGTGCTATGGTTA	GCACTGAGAGTGATGGCTTCTTA	
Set 7	AGTAGAAGGAGACTCAGGACTG	TCCCAAAGTTCCTCAGCATC	AGCCTGGACCCCTAACAAAGACC
Set 8	TTCCACACTTTCTCTCTGACC	GGGAATTCAGCCTGGTACTTAG	TGCCCCACTCCGTCTAAGATCAATACA
Set 9	CGTCACCCTCAGTTGTCAG	TCCGTGTAATCCAAGATGCTG	CCTTGAAGCCCAGGAGTACCGTCTA
Set 10	CCTACTTCCCTGCATTCTCC	CAGGCAGACTCAGATCAGC	AGCTCAACCTGGACGGCACA
Set 11	TTCTTCCCTACTTCCCTGCATTTC	CTTCAAGGCTCCCCTGACAAC	
Set 12	GAAGTCAACTTTTCTTCCCTAC	CAAGGCTCCCCTGACAAC	
Set 13	CACACAGCTCAACCTGGACA	AGACTCAGCCCAGACAGAT	
Set 14	GTCAACTTTTCTTCCCTACTTC	AAGGCTCCCCTGACAAC	
Set 15	AAGAAGCCATCACTCTCAGTGC	GTAGGAGCGGCTCACAGG	

The forward primers for sets 1-15 are SEQ ID NOs: 135-149; the reverse primers for sets 1-15 are SEQ ID NOs: 150-164; the probes for sets 7-10 are SEQ ID NOs: 165-168; each in order as set forth in Table 8.

- 5 Set 9 listed above proved to be specific for LILRB2 when assayed across the numerous LILR family member over-expressing cell lines when run as a TaqMan assay (both Applied Biosystems master mix and IDT GE master mix), as well as a primer set EvaGreen assay (BioRad Master mix). The following PCR cycling conditions were followed: Cycle 1: 95°C for 60 seconds; Cycle 2: 96°C for 5 seconds; Cycle 3: 65°C for 20 seconds; Repeat cycles 2-3 for 40 cycles total; Melting curve for EvaGreen chemistry from 60-95°C. Primer and probe sequences: Forward: CGTCACCCTCAGTTGTCAG (SEQ ID NO: 143); Reverse: TCCGTGTAATCCAAGATGCTG (SEQ ID NO: 158); Probe: CCTTGAAGCCCAGGAGTACCGTCTA (SEQ ID NO: 167).

- 10 The addition of up to 5 nucleotides to either end of the primers should not affect PCR specificity per the UCSC In-Silico PCR tool (bold is wet-validated primer set). https://genome.ucsc.edu/cgi-bin/hgPcr?hgsid=693240227_npi8w0U7mF4EWHuVaOYA4nIqdsZ AGTCC-
15 **CGTCACCCTCAGTTGTCAG**-GGGAG (SEQ ID NO: 169); TCGTA-**TCCGTGTAATCCAAGATGCTG**-ATTTT (SEQ ID NO: 170).

Example 19. PD Signature Score Analysis of Fresh Tumor Samples

- 20 Fresh human tumor samples were obtained post-surgery. A section of each tumor was cut and fixed for IHC. 300 µM slices of remaining tumor were placed in a 6- well plate. Treatments were added into the medium and plates were incubated at 37°C. Tumor slices were stored in RNAlater after incubation. Each slice was treated with 10 µg/mL of drug for 24 hours; in instances where samples were treated with more than one drug, 10 µg/mL of each drug was used.

- 25 Tumor slices were lysed using Qiagen's TissueLyser processor and FFPE samples were deparaffinized. RNA was extracted from FFPE and fresh tumor samples, quantified using Qubit, and QC'd using AATI's Fragment Analyzer. If sufficient RNA was extracted from the sample, gene expression was performed using NanoString nCounter using the Human Immunology V2 panel as well as a custom macrophage-specific spike-in. Gene expression was normalized to the expression of housekeeping
30 genes, then noise thresholding was performed using the data from negative probes and data was transformed to the log2 space. This data will henceforth be referred to as "normalized gene expression." Normalized gene expression data was then further normalized to the average data from the palivizumab treated samples from the same patient. This data will henceforth be referred to as "palivizumab-normalized gene expression."

- 35 Pharmacodynamic (PD) signature scores were calculated for each sample. Monoculture signatures are derived from the mean log2 (fold change compared to palivizumab-treated samples) in gene expression across monocyte-derived macrophages from 4 donors in response to anti-LILRB2 ligand-blocking drugs in the absence of LPS after 4 hours. "Monoculture signature scores" were calculated for each treated histoculture sample by projecting the palivizumab-normalized gene expression
40 onto the vector defined by the monoculture signature. "IFNγ signature scores" were calculated by averaging the palivizumab-normalized gene expression of the 6 genes identified by Hirsch et al. (32nd Annual Meeting and Pre-Conference Programs of the Society for Immunotherapy of Cancer (SITC 2017):

Part One, P39; J. Immunother. Cancer 5 (Suppl. 2):86, 2017) displaying modulated expression in response to anti-PD1 treatment. "Keytruda signature scores" were calculated by averaging the palivizumab-normalized gene expression of the 18 genes identified by Ayers et al. (J. Clin. Invest. 127:2930-2940, 2017) as being predictive of clinical response to pembrolizumab.

5 To evaluate noise in the system and determine response cutoffs, 173 tumor slices (samples) from 80 kidney, lung, and head and neck tumors were treated with the control antibody palivizumab for 24 hours. At least two samples from each tumor were treated with palivizumab. The noise threshold for each PD response signature was defined as the 95th percentile of the distribution of the signature scores across the 173 samples. Tumors are classified as "responders" to a particular drug if the average PD
10 signature score across all samples from that tumor treated with that drug is greater than the noise threshold for that signature.

Baseline (untreated) samples from most tumors were characterized. Cell type specific signatures were calculated by averaging the normalized gene expression of genes that are associated with particular cell types. The Keytruda signature was calculated for each baseline sample by averaging the normalized
15 gene expression of the 18 genes identified by Ayers et al. (supra) as being predictive of clinical response to pembrolizumab.

Results of the experiments described above are shown in FIGS. 31-34.

FIG. 31 is a histogram of the IFN γ PD response scores from 173 tumor samples from 80 tumors treated with palivizumab for 24 hours. In each tumor, at least two samples were treated with palivizumab.
20 The noise threshold for the signature is defined as the 95th percentile of the distribution. For the IFN γ signature, the noise threshold is 0.43.

FIG. 32 is a Venn diagram and chart describing the PD response rates to J-19.h1 across 3 indications: renal cell carcinoma, head and neck cancer, and lung cancer. Tumors are classified as "responders" if the average PD response score across all J-19.H1 treated slices for that tumor is greater
25 than the noise threshold. As noted above, the noise threshold for each PD signature is defined as the 95th percentile of the distribution of PD response scores of palivizumab treated samples across tumors with more than one palivizumab treated sample. In histoculture, J-19.H1 induces different PD responses across indications, suggesting multiple mechanisms of action: the monoculture signature indicates macrophage polarization; the IFN gamma signature suggests similar response to checkpoint inhibitors;
30 the Keytruda signature is a sign of tumor priming for response to checkpoint inhibitors.

FIG. 33 is a series of graphs showing Keytruda signature scores calculated for untreated samples, based on normalized gene expression (raw gene expression is normalized to housekeeping genes and negative control probes, then log₂ transformed). Tumors are classified as IFN γ PD
35 responders if the average response of all samples in that tumor treated with J-19.H1 is greater than the noise threshold of the IFN γ signature. Each dot represents the Keytruda signature score of an untreated tumor sample. Dotted lines show the average baseline Keytruda signature score for the samples profiled in each indication. The baseline Keytruda signature score is a necessary but insufficient condition for IFN gamma PD response to pembrolizumab in histoculture, which is consistent with clinical observations reported by others, thus suggesting the relevance of the histoculture model to clinical outcomes.

40 FIG. 34, left panel, is a table showing average IFN γ PD signature scores calculated for 18 head and neck tumors in response to J-19.h1, pembrolizumab, or J-19.H1 combined with pembrolizumab. Cells highlighted in grey indicate tumors for which the response to treatment is greater than the noise

threshold. Rows with an asterisk beside them denote tumors for which J-19.h1 potentiates response; i.e., the IFN γ PD signature score in response to J-19.H1 + pembrolizumab is greater than or equal to the score in response to pembrolizumab alone + 0.43 (the noise threshold for the IFN γ PD signature). Tumors that have potentiated response with J-19.H1 are referred to as having a “combo effect” in the right panel. FIG. 34, right panel, is a graph showing a comparison of the indication-normalized tumor macrophage content of tumors prior to treatment. The graph shows the baseline macrophage content of tumors that display a combination effect in response to J-19.H1 + pembrolizumab compared to those that do not show any potentiation due to J-19.H1. The comparison is made for tumors across 3 indications: renal cell carcinoma, lung cancer and head, and neck cancer. Tumor macrophage content is calculated by averaging the expression of genes associated with macrophages in untreated samples and is normalized within each indication. The IFN gamma PD response to pembrolizumab in histoculture is potentiated by J-19.H1 in samples enriched with macrophages.

Example 20. Antibody mutants

The heavy chain variable region of J-19.h1 is set forth below:
 QITLKESGPTLVKPTQTTLTCTFSGFSLNTYAMGVSWIRQPPGKALEWLA~~SI~~WWNGNKYNNPSLKSRLLT
 VTKDTSKNQVLTMTNMDPVDTATYYCAHSRIIR~~FT~~DYVMDAWGQGTLTIVSS (SEQ ID NO: 53)
 CDRH1, CDRH2, and CDRH3 are indicated by underlining, in order. **R**’ denotes a residue in CDRH3 that, when mutate to alanine (J-19.h5), measured higher affinity for LILRB2 compared to J-19.h1. This measurement was determined using a ForteBio Octet Red96. The variant was normalized to 10 ug/mL and loaded onto an anti-human capture sensor. The loaded sensor was then soaked in kinetics buffer to establish a baseline and dipped into wells containing LILRB2 at two concentrations of 50 nM and 5 nM, followed by a dissociation step into buffer. Kinetics data was calculated using the ForteBio data analysis software. Results showed J-19.h5 having a two-fold higher affinity for LILRB2 compared to the unmutated version of J-19.h1.

Additional variants were made of J-19.h1, in which the arginine was mutated to aspartate (J-19.h6) and glutamate (J-19.h7). All variants were produced transiently using a Chinese Hamster Ovarian cell line and purified using citrate buffer on an automated liquid handler. Affinity to LILRB2 was measured exactly as it was previously to J-19.h5. The data indicated that these two variants have even greater affinity to LILRB2 compared to J-19.h1 and J-19.h5.

Affinities for the four antibodies (J-19.h1, J-19.h5, J-19.h6, and J-19.h7) were confirmed through surface plasmon resonance (SPR) using a SierraSensor Mass-2. The antibodies were captured using an anti-human Fc chip at a concentration of 2 ug/mL. LILRB2 was flowed over the captured antibodies at seven concentrations (65, 21.67, 7.22, 2.41, 0.802, 0.267, 0.089 nM). J-19.h5 and J-19.h6 were run in triplicates, while J-19.h7 and J-19.h1 were run in duplicates. Below is a table describing the association, dissociation, and Kd of the four antibodies.

Table 9. Kinetic Measurements of J-19.h1 and Higher Affinity Mutants

Analyte	Ligand	Ka (1/Ms)	Kd (1/s)	KD (M)	Replicates	Fold difference over J-19.h1
LILRB2	J-19.h5	8.76E+05	1.15E-03	1.31E-09	3	1.91
	J-19.h6	8.25E+05	5.92E-04	7.18E-10	3	3.47
	J-19.h7	8.65E+05	7.88E-04	9.12E-10	2	2.73
	J-19.h1	7.05E+05	1.76E-03	2.49E-09	2	1

Table 10. Table of Sequences

SEQ ID NO:	Description	Sequence
1	J-11.h heavy chain	QVQLQQSGAELMKPGASVKLSCKATGYILTGYWIEWVKQRP GHGLEWIGEILPGSGSTNYNENFKGKATFTADTSSNTAYMQ LSSLTTEDSAIYYCARAVLG YFDYWGQGTTLTVSSASTKGPS VFPLAPCSRSTSESTAALGCLVKDYFPEPVTVSWNSGALTS GVHTFPAVLQSSGLYSLSSVTVPSSSLGKTKYTCNVDHKPS NTKVDKRVESKYGPPCPPCPAPEFLGGPSVFLFPPKPKDTL MISRTPEVTCVVDVVSQEDPEVQFNWYVDGVEVHNAKTKP REEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKGLPSSI EKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLVKGFY PSDIAVEWESNGQPENNYKTTTPVLDSDGSFFLYSRLTVDK SRWQEGNVFSCSVMEALHNHYTQKSLSLSLGK
2	J-11.h light chain	DIVMTQSHKFMSTSVGDRVSITCKASQDVSTAVAWYQQKPG QSPKLLIYWASTRHTGVPDRFTGSGSGTDYTLTISSVQAEDL ALYYCHQH YSTYTFGGGKLEIKRTVAAPSVFIFPPSDEQLK SGTASVVCLLNNFYPREAKVQWKVDNALQSGNSQESVTEQ DSKDSTYSLSSSTLTLSKADYEKHKVYACEVTHQGLSSPVTKS FNRGEC
3	J-11.h V _H	QVQLQQSGAELMKPGASVKLSCKATGYILTGYWIEWVKQRP GHGLEWIGEILPGSGSTNYNENFKGKATFTADTSSNTAYMQ LSSLTTEDSAIYYCARAVLG YFDYWGQGTTLTVSS
4	J-11.h V _L	DIVMTQSHKFMSTSVGDRVSITCKASQDVSTAVAWYQQKPG QSPKLLIYWASTRHTGVPDRFTGSGSGTDYTLTISSVQAEDL ALYYCHQH YSTYTFGGGKLEIK
5	J-11.h CDR-H1	GYWIE
6	J-11.h CDR-H2	EILPGSGSTNYNENFKG
7	J-11.h CDR-H3	AVLG YFDY
8	J-11.h CDR-L1	KASQDVSTAVA
9	J-11.h CDR-L2	WASTRHT
10	J-11.h CDR-L3	HQH YSTY
11	J-19.h heavy chain	QVTLKESGPGILQPSHTLSLTCSFSGFSLNTYAMGVSWIRQP SGKGLEWLASIWVWNGNKYNNPSLKSRLTVSKDTSNNQAFLK VTSVDTADTATYYCAHSRIIRFTDYVMDAWGQGASVTSSA STKGPSVFPLAPCSRSTSESTAALGCLVKDYFPEPVTVSWN SGALTSGVHTFPAVLQSSGLYSLSSVTVPSSSLGKTKYTCN VDHKPSNTKVDKRVESKYGPPCPPCPAPEFLGGPSVFLFPP KPKDTLMISRTPEVTCVVDVVSQEDPEVQFNWYVDGVEVHN AKTKPREEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKG LPSSIEKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLV KGFYPSDIAVEWESNGQPENNYKTTTPVLDSDGSFFLYSRL TVDKSRWQEGNVFSCSVMEALHNHYTQKSLSLSLGK
12	J-19.h light chain	DIQMTQSPASLSTFLGEPVTIECRASEDIYNDLAWYQQKPGK SPQLLIYNANSLHTGVPSRFSGSGSGTQYSLKINSLQSEDVA SYFCQQYYDYPLTFGSGTKLEIKRTVAAPSVFIFPPSDEQLKS GTASVVCLLNNFYPREAKVQWKVDNALQSGNSQESVTEQD SKDSTYSLSSSTLTLSKADYEKHKVYACEVTHQGLSSPVTKSF NRGEC
13	J-19.h V _H	QVTLKESGPGILQPSHTLSLTCSFSGFSLNTYAMGVSWIRQP SGKGLEWLASIWVWNGNKYNNPSLKSRLTVSKDTSNNQAFLK VTSVDTADTATYYCAHSRIIRFTDYVMDAWGQGASVTSS
14	J-19.h V _L	DIQMTQSPASLSTFLGEPVTIECRASEDIYNDLAWYQQKPGK SPQLLIYNANSLHTGVPSRFSGSGSGTQYSLKINSLQSEDVA SYFCQQYYDYPLTFGSGTKLEIK
15	J-19.h CDR-H1	TYAMGVS
16	J-19.h CDR-H2	SIWVWNGNKYNNPSLKS
17	J-19.h CDR-H3	SRIIRFTDYVMDA
18	J-19.h CDR-L1	RASEDIYNDA
19	J-19.h CDR-L2	NANSLHT
20	J-19.h CDR-L3	QQYYDYPLT

21	J-17.h heavy chain	QIQLVQSGPELKKPGETVKISCKASGYFTFTYGLSWVKQTPG KGLKWMGWINTYSGVPTYTDDFKGRFAFSLETSASTAYLQI NNLKNEEDATYFCARPYDFDQVGFAFWGQGTTLTVSAASTK GPSVFPLAPCSRSTSESTAALGCLVKDYFPEPVTVSWNSGA LTSGVHTFPAVLQSSGLYSLSSVVTVPSSSLGKTKYTCNVDH KPSNTKVDKRVESKYGPPCPPCPAPEFLGGPSVFLFPPKPK DTLMISRTPEVTCVVVDVSQEDPEVQFNWYVDGVEVHNAKT KPREEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKGLPS SIEKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLVKGF YPSDIAVEWESNGQPENNYKTTTPVLDSDGSFFLYSRLTVD KSRWQEGNVFSCSVMHEALHNHYTQKSLSLGLK
22	J-17.h light chain	SIVMTQTPKFLLSAGDRVSITCKASQTVSSDVAWYQQKAG QSPKLLIYYASNRYTGVPDRFTGSGYGTDFFTISTVQAEDL AVYFCQQDYSSPFTFGGGSKLEIKRTVAAPSVFIFPPSDEQL KSGTASVVCLLNNFYPREAKVQWKVDNALQSGNSQESVTE QDSKDYSTYLSSTLTLSKADYEKHKVYACEVTHQGLSSPVTK SFNRGEC
23	J-17.h V _H	QIQLVQSGPELKKPGETVKISCKASGYFTFTYGLSWVKQTPG KGLKWMGWINTYSGVPTYTDDFKGRFAFSLETSASTAYLQI NNLKNEEDATYFCARPYDFDQVGFAFWGQGTTLTVSA
24	J-17.h V _L	SIVMTQTPKFLLSAGDRVSITCKASQTVSSDVAWYQQKAG QSPKLLIYYASNRYTGVPDRFTGSGYGTDFFTISTVQAEDL AVYFCQQDYSSPFTFGGGSKLEIK
25	J-17.h CDR-H1	TYGLS
26	J-17.h CDR-H2	WINTYSGVPTYTDDFKG
27	J-17.h CDR-H3	PYDFDQVGFAF
28	J-17.h CDR-L1	KASQTVSSDVA
29	J-17.h CDR-L2	YASNRYT
30	J-17.h CDR-L3	QQDYSSPFT
31	J-04 heavy chain	QVQLQQSGAELVRPGASVTLSCASGYTFADYIEHWVKQTP VHGLEWIGAIIDPETGGTAYNQKFKGKAILTADKSSSTAYMEL RSLTSEDSAVYYCTRYDYDDAMDYWGQGTSTVTVSSASTK GPSVFPLAPCSRSTSESTAALGCLVKDYFPEPVTVSWNSGA LTSGVHTFPAVLQSSGLYSLSSVVTVPSSSLGKTKYTCNVDH KPSNTKVDKRVESKYGPPCPPCPAPEFLGGPSVFLFPPKPK DTLMISRTPEVTCVVVDVSQEDPEVQFNWYVDGVEVHNAKT KPREEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKGLPS SIEKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLVKGF YPSDIAVEWESNGQPENNYKTTTPVLDSDGSFFLYSRLTVD KSRWQEGNVFSCSVMHEALHNHYTQKSLSLGLK
32	J-04 light chain	QIVLTQSPAISASPGKEVTMTCSASSSVFMHWYQQKSGT SPKRWIYGTSLKASGVPARFSGSGSGTSYSLTISSEAEADA TYQCQQWNGNPFTFGSGTKLETKRTVAAPSVFIFPPSDEQL KSGTASVVCLLNNFYPREAKVQWKVDNALQSGNSQESVTE QDSKDYSTYLSSTLTLSKADYEKHKVYACEVTHQGLSSPVTK SFNRGEC
33	J-04 V _H	QVQLQQSGAELVRPGASVTLSCASGYTFADYIEHWVKQTP VHGLEWIGAIIDPETGGTAYNQKFKGKAILTADKSSSTAYMEL RSLTSEDSAVYYCTRYDYDDAMDYWGQGTSTVTVSS
34	J-04 V _L	QIVLTQSPAISASPGKEVTMTCSASSSVFMHWYQQKSGT SPKRWIYGTSLKASGVPARFSGSGSGTSYSLTISSEAEADA TYQCQQWNGNPFTFGSGTKLETK
35	J-04 CDR-H1	DYIEH
36	J-04 CDR-H2	AIDPETGGTAYNQKFKG
37	J-04 CDR-H3	YYDYDDAMDY
38	J-04 CDR-L1	SASSSVFMH
39	J-04 CDR-L2	GTSKLAS
40	J-04 CDR-L3	QQWNGNPFT
41	J-03 heavy chain	QVQLQQSGAELVRPGASVTLSCASGYKFTDYEMHWVKQT PVHGLEWIGAIIDPETNGTAYNKKFKGKAILTADKSSSTAYME LRSLTSEDSAVYYCTRGDYDFSFAWFAYWGQGTTLTVSAAST KGPSVFPLAPCSRSTSESTAALGCLVKDYFPEPVTVSWNSG

		ALTSQVHTFPAVLQSSGLYSLSSVVTVPSSSLGKTKYTCNV HKPSNTKVDKRVESKYGPPCPPCPAPEFLGGPSVFLFPPKP KDTLMISRTPEVTCVVVDVSQEDPEVQFNWYVDGVEVHNAK TKPREEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKGLP SSIEKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLVKG FYPSDIAVEWESNGQPENNYKTTPVLDSDGSFFLYSRLTV DKSRWQEGNVFSCSVMHEALHNHYTQKSLSLGLGK
42	J-03 light chain	DIVLTQSPASLAVSLGQRATISCRASESDNYDISFMHWYQQ KPGQPPKLLIYRASNLESGIPARFSGSGSRTDFTLTINPVETD DVATYYCQQSNKDPRTFGGGTKLEIKRTVAAPSVFIFPPSDE QLKSGTASVVCLLNNFYPREAKVQWKVDNALQSGNSQESV TEQDSKDYSLSSSTLTLSKADYEKHKVYACEVTHQGLSSPV TKSFNRGEC
43	J-03 V _H	QVQLQQSGAELVRPGASVTLSCASGYKFTDYEMHWVKQT PVHGLEWIGAIIDPETNGTAYNKKFKGKAILTADKSSSTAYME LRSLTSEDSAVYYCTRGDYDFSAWFAYWGQGLTVTSA
44	J-03 V _L	DIVLTQSPASLAVSLGQRATISCRASESDNYDISFMHWYQQ KPGQPPKLLIYRASNLESGIPARFSGSGSRTDFTLTINPVETD DVATYYCQQSNKDPRTFGGGTKLEIK
45	J-03 CDR-H1	DYEMH
46	J-03 CDR-H2	AIDPETNGTAYNKKFKG
47	J-03 CDR-H3	GDYDFSAWFAY
48	J-03 CDR-L1	RASESDNYDISFMH
49	J-03 CDR-L2	RASNLES
50	J-03 CDR-L3	QQSNKDPRT
51	J-19.h1 heavy chain	QITLKESGPTLVKPTQTLTLCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIWWNGNKYNNPSLKSRLTVTKDTSKNQVVL MTNMDPVDATYYCAHSRIIRFTDYVMDAWGQGLTVTVSSA STKGPSVFPLAPCSRSTSESTAALGCLVKDYFPEPVTVSWN SGALTSGVHTFPAVLQSSGLYSLSSVVTVPSSSLGKTKYTCN VDHKPSNTKVDKRVESKYGPPCPPCPAPEFLGGPSVFLFPP KPKDTLMISRTPEVTCVVVDVSQEDPEVQFNWYVDGVEVHN AKTKPREEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKGL LPSSIEKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLV KGFYPSDIAVEWESNGQPENNYKTTPVLDSDGSFFLYSRL TVDKSRWQEGNVFSCSVMHEALHNHYTQKSLSLGLGK
52	J-19.h1 light chain	DIQMTQSPSSLSSTSVGDRVTITCRASEDIYNDLAWYQQKPGK APKLLIYNANSLHTGVASRFSGSGSGTDFTFTISSLPEDVAT YFCQQYYDYPLTFGGGKLEIKRTVAAPSVFIFPPSDEQLK GTASVVCLLNNFYPREAKVQWKVDNALQSGNSQESVTEQD SKDSTYSLSSSTLTLSKADYEKHKVYACEVTHQGLSSPVTKSF NRGEC
53	J-19.h1 V _H	QITLKESGPTLVKPTQTLTLCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIWWNGNKYNNPSLKSRLTVTKDTSKNQVVL MTNMDPVDATYYCAHSRIIRFTDYVMDAWGQGLTVTVSS
54	J-19.h1 V _L	DIQMTQSPSSLSSTSVGDRVTITCRASEDIYNDLAWYQQKPGK APKLLIYNANSLHTGVASRFSGSGSGTDFTFTISSLPEDVAT YFCQQYYDYPLTFGGGKLEIK
55	J-19.h1 CDR-H1	TYAMGV
56	J-19.h1 CDR-H2	SIWWNGNKYNNPSLKS
57	J-19.h1 CDR-H3	SRIIRFTDYVMDA
58	J-19.h1 CDR-L1	RASEDIYNDLA
59	J-19.h1 CDR-L2	NANSLHT
60	J-19.h1 CDR-L3	QQYYDYPLT
61	J-19.h2 heavy chain	QITLKESGPTLVKPTQTLTLCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIWWNGNKYNNPSLKSRLTVTKDTSKNQVVL MTNMDPVDATYYCAHSRIIRFTDYVMDAWGQGLTVTVSSA STKGPSVFPLAPCSRSTSESTAALGCLVKDYFPEPVTVSWN SGALTSGVHTFPAVLQSSGLYSLSSVVTVPSSSLGKTKYTCN VDHKPSNTKVDKRVESKYGPPCPPCPAPEFLGGPSVFLFPP KPKDTLMISRTPEVTCVVVDVSQEDPEVQFNWYVDGVEVHN AKTKPREEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKGL

		LPSSIEKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLV KGFYPDSIAVEWESNGQPENNYKTTTPVLDSDGSFFLYSRL TVDKSRWQEGNVFSCSVMHEALHNHYTQKSLSLSLGK
62	J-19.h2 light chain	DIVMTQSPSSLSASVGDVTITCRASEDIYNDLAWYQQKPGK APQLLLYNANSLHTGVPSRFSGSGSGTDYTLTISTLQPEDFA TYYCQQYYDYPLTFGPGTKVHIKRTVAAPSVFIFPPSDEQLK SGTASVCLNNFYFPREAKVQWKVDNALQSGNSQESVTEQ DSKDSTYLSSTLTLSKADYEKHKVYACEVTHQGLSSPVTKS FNRGEC
63	J-19.h2 V _H	QITLKESGPTLVKPTQTLTLTCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIIWWNGNKYNNPSLKSRLTVTKDTSKNQVVL MTNMDPVDATATYYCAHSRIIRFTDYVMDAWGQGLTVTVSS
64	J-19.h2 V _L	DIVMTQSPSSLSASVGDVTITCRASEDIYNDLAWYQQKPGK APQLLLYNANSLHTGVPSRFSGSGSGTDYTLTISTLQPEDFA TYYCQQYYDYPLTFGPGTKVHIK
65	J-19.h2 CDR-H1	TYAMGVS
66	J-19.h2 CDR-H2	SIWWNGNKYNNPSLKS
67	J-19.h2 CDR-H3	SRIIRFTDYVMDA
68	J-19.h2 CDR-L1	RASEDIYNDLA
69	J-19.h2 CDR-L2	NANSLHT
70	J-19.h2 CDR-L3	QQYYDYPLT
71	J-19.h3 heavy chain	QVTLKESGPSLVKPTQTLTLTCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIIWWNGNKYNNPSLKSRLTITKDTSKNQVVLK VTNMDPADTATYYCAHSRIIRFTDYVMDAWGQGTTVTVSSA STKGPSVFPLAPCSRSTSESTAALGCLVKDYFPEPVTVSWN SGALTSGVHTFPAVLQSSGLYSLSSVTVPSSSLGKTKYTCN VDHKPSNTKVDKRVESKYGPPCPPCPAPEFLGGPSVFLFPP KPKDTLMISRTPEVTCVVDVDSQEDPEVQFNWYVDGVEVHN AKTKPREEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKNG LPSSIEKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLV KGFYPDSIAVEWESNGQPENNYKTTTPVLDSDGSFFLYSRL TVDKSRWQEGNVFSCSVMHEALHNHYTQKSLSLSLGK
72	J-19.h3 light chain	DIVMTQSPSSLSASVGDVTITCRASEDIYNDLAWYQQKPGK APQLLLYNANSLHTGVPSRFSGSGSGTDYTLTISTLQPEDFA TYYCQQYYDYPLTFGPGTKVHIKRTVAAPSVFIFPPSDEQLK SGTASVCLNNFYFPREAKVQWKVDNALQSGNSQESVTEQ DSKDSTYLSSTLTLSKADYEKHKVYACEVTHQGLSSPVTKS FNRGEC
73	J-19.h3 V _H	QVTLKESGPSLVKPTQTLTLTCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIIWWNGNKYNNPSLKSRLTITKDTSKNQVVLK VTNMDPADTATYYCAHSRIIRFTDYVMDAWGQGTTVTVSS
74	J-19.h3 V _L	DIVMTQSPSSLSASVGDVTITCRASEDIYNDLAWYQQKPGK APQLLLYNANSLHTGVPSRFSGSGSGTDYTLTISTLQPEDFA TYYCQQYYDYPLTFGPGTKVHIK
75	J-19.h3 CDR-H1	TYAMGVS
76	J-19.h3 CDR-H2	SIWWNGNKYNNPSLKS
77	J-19.h3 CDR-H3	SRIIRFTDYVMDA
78	J-19.h3 CDR-L1	RASEDIYNDLA
79	J-19.h3 CDR-L2	NANSLHT
80	J-19.h3 CDR-L3	QQYYDYPLT
81	J-19.h4 heavy chain	QVTLKESGPALVKPTHTLTCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIIWWNGNKYNNPSLKSRLTISKDTSKNQVVL MTNMDPEDTATFYCAHSRIIRFTDYVMDAWGRGTTTVTVSSA STKGPSVFPLAPCSRSTSESTAALGCLVKDYFPEPVTVSWN SGALTSGVHTFPAVLQSSGLYSLSSVTVPSSSLGKTKYTCN VDHKPSNTKVDKRVESKYGPPCPPCPAPEFLGGPSVFLFPP KPKDTLMISRTPEVTCVVDVDSQEDPEVQFNWYVDGVEVHN AKTKPREEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKNG LPSSIEKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLV KGFYPDSIAVEWESNGQPENNYKTTTPVLDSDGSFFLYSRL TVDKSRWQEGNVFSCSVMHEALHNHYTQKSLSLSLGK

82	J-19.h4 light chain	DIVMTQSPSSLSASVGDVTITCRASEDIYNDLAWYQQKPGK APQLLLYNANSLHTGVPSRFSGSGSGTDYTLTISTLQPEDFA TYYCQQYYDYPLTFGPGTKVHIKRTVAAPSVFIFPPSDEQLK SGTASVVCLLNNFYPREAKVQWKVDNALQSGNSQESVTEQ DSKDSTYLSSTLTLSKADYEKHKVYACEVTHQGLSSPVTKS FNRGEC
83	J-19.h4 V _H	QVTLKESGPALVKPTHTLTLCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIIWWNGNKYNNPSLKSRLTISKDTSKNQVVLT MTNMDPEDTATFYCAHSRIIRFTDYVMDAWGRGTTVTVSS
84	J-19.h4 V _L	DIVMTQSPSSLSASVGDVTITCRASEDIYNDLAWYQQKPGK APQLLLYNANSLHTGVPSRFSGSGSGTDYTLTISTLQPEDFA TYYCQQYYDYPLTFGPGTKVHIK
85	J-19.h4 CDR-H1	TYAMGVS
86	J-19.h4 CDR-H2	SIWWNGNKYNNPSLKS
87	J-19.h4 CDR-H3	SRIIRFTDYVMDA
88	J-19.h4 CDR-L1	RASEDIYNDLA
89	J-19.h4 CDR-L2	NANSLHT
90	J-19.h4 CDR-L3	QQYYDYPLT
91	J-19.h5 heavy chain	QITLKESGPTLVKPTQTLTLCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIIWWNGNKYNNPSLKSRLTVTKDTSKNQVVLT MTNMDPVDATATYYCAHSRIIAFTDYVMDAWGQGLTVTVSSA STKGPSVFPLAPCSRSTSESTAALGCLVKDYFPEPVTVSWN SGALTSGVHTFPAVLQSSGLYSLSSVTVPSSSLGKTKYTCN VDHKPSNTKVDKRVESKYGPCPPCPAPEFLGGPSVFLFPP KPKDTLMISRTPEVTCVVVDVSDQEDPEVQFNWYVDGVEVHN AKTKPREEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKNG LPSSIEKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLV KGFYPDSIAVEWESNGQPENNYKTTTPVLDSDGSFFLYSRL TVDKSRWQEGNVFSCSVMHEALHNHYTQKSLSLSLGK
92	J-19.h5 light chain	DIQMTQSPSSLSSTSVGDRVTITCRASEDIYNDLAWYQQKPGK APKLLIYNANSLHTGVASRFSGSGSGTDFTFTISSLQPEDVAT YFCQQYYDYPLTFGQGTKLEIKRTVAAPSVFIFPPSDEQLKS GTASVVCLLNNFYPREAKVQWKVDNALQSGNSQESVTEQD SKDSTYLSSTLTLSKADYEKHKVYACEVTHQGLSSPVTKSF NRGEC
93	J-19.h5 V _H	QITLKESGPTLVKPTQTLTLCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIIWWNGNKYNNPSLKSRLTVTKDTSKNQVVLT MTNMDPVDATATYYCAHSRIIAFTDYVMDAWGQGLTVTVSS
94	J-19.h5 V _L	DIQMTQSPSSLSSTSVGDRVTITCRASEDIYNDLAWYQQKPGK APKLLIYNANSLHTGVASRFSGSGSGTDFTFTISSLQPEDVAT YFCQQYYDYPLTFGQGTKLEIK
95	J-19.h5 CDR-H1	TYAMGVS
96	J-19.h5 CDR-H2	SIWWNGNKYNNPSLKS
97	J-19.h5 CDR-H3	SRIIAFTDYVMDA
98	J-19.h5 CDR-L1	RASEDIYNDLA
99	J-19.h5 CDR-L2	NANSLHT
100	J-19.h5 CDR-L3	QQYYDYPLT
101	J-19.h6 heavy chain	QITLKESGPTLVKPTQTLTLCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIIWWNGNKYNNPSLKSRLTVTKDTSKNQVVLT MTNMDPVDATATYYCAHSRIIDFTDYVMDAWGQGLTVTVSSA STKGPSVFPLAPCSRSTSESTAALGCLVKDYFPEPVTVSWN SGALTSGVHTFPAVLQSSGLYSLSSVTVPSSSLGKTKYTCN VDHKPSNTKVDKRVESKYGPCPPCPAPEFLGGPSVFLFPP KPKDTLMISRTPEVTCVVVDVSDQEDPEVQFNWYVDGVEVHN AKTKPREEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKNG LPSSIEKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLV KGFYPDSIAVEWESNGQPENNYKTTTPVLDSDGSFFLYSRL TVDKSRWQEGNVFSCSVMHEALHNHYTQKSLSLSLGK
102	J-19.h6 light chain	DIQMTQSPSSLSSTSVGDRVTITCRASEDIYNDLAWYQQKPGK APKLLIYNANSLHTGVASRFSGSGSGTDFTFTISSLQPEDVAT YFCQQYYDYPLTFGQGTKLEIKRTVAAPSVFIFPPSDEQLKS GTASVVCLLNNFYPREAKVQWKVDNALQSGNSQESVTEQD

		SKDSTYSLSSSTLTLSKADYEKHKVYACEVTHQGLSSPVTKSF NRGEC	
103	J-19.h6 V _H	QITLKESGPTLVKPTQTLTLTCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIWWNGNKYNNPSLKSRLTVTKDTSKNQVVLT MTNMDPVDATATYYCAHSRIIDFTDYVMDAWGQGLTVTVSS	
104	J-19.h6 V _L	DIQMTQSPSSLSTSVGDRVITITCRASEDIYNDLAWYQQKPGK APKLLIYNANSLHTGVASRFSGSGSGTDFTFTISSLPEDVAT YFCQQYYDYPLTFGQGTKLEIK	
105	J-19.h6 CDR-H1	TYAMGVS	
106	J-19.h6 CDR-H2	SIWWNGNKYNNPSLKS	
107	J-19.h6 CDR-H3	SRIIDFTDYVMDA	
108	J-19.h6 CDR-L1	RASEDIYNDLA	
109	J-19.h6 CDR-L2	NANSLHT	
110	J-19.h6 CDR-L3	QQYYDYPLT	
111	J-19.h7 heavy chain	QITLKESGPTLVKPTQTLTLTCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIWWNGNKYNNPSLKSRLTVTKDTSKNQVVLT MTNMDPVDATATYYCAHSRIIEFTDYVMDAWGQGLTVTVSSA STKGPSVFPLAPCSRSTSESTAALGCLVKDYFPEPTVSWN SGALTSGVHTFPAVLQSSGLYSLSSVTVPSSSLGKTKYTCN VDHKPSNTKVDKRVESKYGPCCPAPPEFLGGPSVFLFPP KPKDTLMISRTPEVTCVVVDVVSQEDPEVQFNWYVDGVEVHN AKTKPREEQFNSTYRVVSVLTVLHQDWLNGKEYKCKVSNKG LPSSIEKTISKAKGQPREPQVYTLPPSQEEMTKNQVSLTCLV KGFYPSDIAVEWESNGQPENNYKTTPPVLDSDGSFFLYSRL TVDKSRWQEGNVFSCSVMEALHNHYTQKSLSLSLGK	
112	J-19.h7 light chain	DIQMTQSPSSLSTSVGDRVITITCRASEDIYNDLAWYQQKPGK APKLLIYNANSLHTGVASRFSGSGSGTDFTFTISSLPEDVAT YFCQQYYDYPLTFGQGTKLEIKRTVAAPSVFIFPPSDEQLKS GTASVVCLLNNFYPREAKVQWKVDNALQSGNSQESVTEQD SKDSTYSLSSSTLTLSKADYEKHKVYACEVTHQGLSSPVTKSF NRGEC	
113	J-19.h7 V _H	QITLKESGPTLVKPTQTLTLTCTFSGFSLNTYAMGVSWIRQP PGKALEWLASIWWNGNKYNNPSLKSRLTVTKDTSKNQVVLT MTNMDPVDATATYYCAHSRIIEFTDYVMDAWGQGLTVTVSS	
114	J-19.h7 V _L	DIQMTQSPSSLSTSVGDRVITITCRASEDIYNDLAWYQQKPGK APKLLIYNANSLHTGVASRFSGSGSGTDFTFTISSLPEDVAT YFCQQYYDYPLTFGQGTKLEIK	
115	J-19.h7 CDR-H1	TYAMGVS	
116	J-19.h7 CDR-H2	SIWWNGNKYNNPSLKS	
117	J-19.h7 CDR-H3	SRIIEFTDYVMDA	
118	J-19.h7 CDR-L1	RASEDIYNDLA	
119	J-19.h7 CDR-L2	NANSLHT	
120	J-19.h7 CDR-L3	QQYYDYPLT	
SEQ ID NO:	Protein	Acc. No.	Sequence
121	LILRA1	O75019	MTPIVTVLICLRLSLGPRTHVQAGTLPKPTLWAEPGSVITQGS PVTLWCQGILETQEYRLYREKKTAPWITRIPQEIVKKGQFPI SITWEHTGRYRCFYGSHTAGWSEPSDPLELVVTGAYIKPTLS ALPSPVVTSGGNVTLHCVSQAFAFGSFILCKEGEDEHPQCLN SQPRTHGWSRAIFSVGPVSPSRRWSYRCYAYDSNSPHVWS LPSDLELLVLGVSKKPSLSVQPGPIVAPGESLTQCVSDVSY DRFVLYKEGERDFLQLPGPQPQAGLSQANFTLGPVSRSYG GQYRCSGAYNLSSEWSAPSDPLDILIAGQFRGRPFISVHPGP TVASGENVTLLCQSWGPFHTFLLTKAGAADAPLRRLRSIHEY KYQAEFPMPSPVTSAHSGTYRCYGSLSNPYLLSHPSDSLEL MVSGAAETLSPQNKSDSKAGAANTLSPSQNKATASHPQDYT VENLIRMGIAGLVVLVVLGILLFEAQHSQSRSL
122	LILRA2	Q8N149	MTPILTVLICLGLSLGPRTHVQAGHLPKPTLWAEPGSVIIQGS PVTLRCCQSLQAEYHYLYRENKSASWVRRIQEPGKNGQFPI PSITWEHAGRYHCQYYSHNHSSEYSDPLELVVTGAYSKPTL SALPSPVVTLGGNVTLQCVSQAFAFDGFIKCEGEDEHPQRL NSHSHARGWSWAIFSVGPVSPSRRWSYRCYAYDSNSPYV

			WSLPSDLELLVPGVSKKPSLSVQPGPMVAPGESLTLCQVS DVG YDRFVLYKEGERDFLQRPGWQPQAGLSQANFTLGPVS PSHGGQYRCYSAHNLSSEWSAPSDPLDILITGQFYDRPSLS VQPVPTVAPGKNVTLLCQSRGQFHTFLLTKEGAGHPPLHLR SEHQAQQNQAEFRMGPVTSAHVGTYRCYSSLSNPNYLLSLP SDPLELVVSEAAETLSPSQNKTDSTTTSLGQHPQDVTVENLI RMGVAGLVVLGILLFEAQHSQSRSLQDAAGR
123	LILRA3	Q8N6C8	MTPILTVLICLGLSLDPRTHVQAGPLPKPTLWAEPGSVITQGS PVTLRCCQGSLETQEYHLYREKKTALWITRIPQELVKKGQFPIL SITWEHAGRYCCYGSHTAGLSESSDPLELVVTGAYSKPTLS ALPSPVVTSGGNVTIQCDSQVAFDGFILCKEGEDEHPQCLNS HSHARGSSRAIFSVGPVSPSRRWYRCYGYDSRAPYVWSL PSDLLGLLVPGVSKKPSLSVQPGPVVAPGEKLTFCQGS DAG YDRFVLYKEWGRDFLQRPGRQPQAGLSQANFTLGPVSRSY GGQYTCSGAYNLSSEWSAPSDPLDILITGQIRARPFLSVRPG PTVASGENVTLLCQSQGGMHTFLLTKEGAADSPRLKSKRQ SHKYQAEFPMSPVTSAHAGTYRCYGSLSNPNYLLTHPSDPL ELVVSGAAETLSPQNKSDSKAGE
124	LILRA4	P59901	MTLILTSLFFGLSLGPRTRVQAENLPKILWAEPPVITWHN PVTIWCQGTLEAQGYRLDKEGNSMSRHILKTLESENKVKLSI PSMMWEHAGRYHCYYQSPAGWSEPSDPLELVVTAYSRTPL SALPSPVVTSGVNVTLRCASRLGLGRFTLIEEGDHRLLSWTLN SHQHNHGKFQALFPMGPLTFSNRGTFRCYGYENNTPYVWS EPSDPLQLLVSGVSRKPSLLTLQGPVVTGENLTLCQGS DV GYIRYTLYKEGADGLPQRPGRQPQAGLSQANFTLSPVSRSY GGQYRCYGAHNVSSEWSAPSDPLDILIAQGISDRPSLSVQP GPTVTSGEKVTLLCQSWDPMFTFLLTKEGAHPPLRLRSMY GAHKYQAEFPMSPVTSAHAGTYRCYGSRSNPNYLLSHPSEP LELVVSGATETLNPQKKSDSKTAPHLQDVTVENLIRMGVAG LVLLFLGILLFEAQHSQSRSPPRCSQEANSRKDNAPFRVVEP WEQI
125	LILRA5	A6NI73	MAPWHSQAQLQPVGGDAVSPALMVLLCLGLSLGPRTHVQ AGNLSKATLWAEPGSVISRGNSVTIRCQGTLEAQEYRLVKE GSPEPWDTQNPLEPKNKARFSIPSMTEHHAGRYRCYYSPA GWSEPSDPLELVVTGFYNKPTLSALPSPVVTSGENVTLQCG SRLRFDRFILTEEGDHKLSWTLDSQLTPSGQFQALFPVGPVT PSHRWMLRCYGSRRHILQVWSEPSDLEIPVSGAADNLSPS QNKSDSGTASHLQDYAVENLIRMGMAGLILVVLGILFQDWH SQRSPQAAAGR
126	LILRA6	Q6PI73	MTPALTALLCLGLSLGPRTRVQAGPFPKPTLWAEPGSVISW GSPVTIWCQGSLEAQEYQLDKEGSPEPLDRNNPLEPKNKAR FSIPSMTQHAGRYRCHYYSSAGWSEPSDPLELVMTGFYN KPTLSALPSPVVASGGNMTLRCSQKGYHHFVLMKEGEHQ LPRTLDSQQLHSGGFQALFPVGPVTPSHRWRFTCYYYTNT PRVWSHPSDPLEILPSGVSRKPSLLTLQGPVLAPGQSLTLQC GSDVG YDRFVLYKEGERDFLQRPQQPQAGLSQANFTLGP VSPSHGGQYRCYGAHNLSSEWSAPSDPLNLMAGQIYDTS LSAQPGPTVASGENVTLLCQSRGYFDTFLLTKEGAHPPLRL RSMYGAHKYQAEFPMSPVTSAHAGTYRCYGSYSSNPHLLS FPSEPLELMVSGHSGGSSLPTGPPSTPASHAKDVTVENLIR MGMAGLVVLGILLFEAQHSQRNPQDAAGR
127	LILRB1	Q8NHL6	MTPILTVLICLGLSLGPRTHVQAGHLPKPTLWAEPGSVITQGS PVTLRCCQGGQETQEYRLYREKKTALWITRIPQELVKKGQFP PSITWEHAGRYRCYYGSDTAGRSESSDPLELVVTGAYIKPTL SAQPSPVVNSGGNVILQCDSQVAFDGFSLCKEGEDEHPQCL NSQPHARGSSRAIFSVGPVSPSRWWYRCYAYDSNSPYEW SLPSDLELLVLGVSKKPSLSVQPGPIVAPEETLTLQCGSDA GYNRFVLYKDGERDFLQLAGAQPQAGLSQANFTLGPVSRSY GGQYRCYGAHNLSSEWSAPSDPLDILIAQGFYDRVLSVQP GPTVASGENVTLLCQSQGWMQTFLLTKEGAADDPWRLRST YQSQKYQAEFPMGPVTSAHAGTYRCYGSQSSKPYLLTHPS DPLELVVSGPSGGPSSPTTGPTSTSGPEDQPLTPTGSDPQS GLGRHLGVVIGILVAVILLLLLLLLLLFLILRHRRQGKHWSTQR

			KADFQHPAGAVGPEPTDRGLQWRSSPAADAQEENLYAAVK HTQPEDGVEMDTRSPHDEDPQAVTYAEVKHSRPRREMASP PSPLSGEFLDTKDRQAEEDRQMDTEAAASEAPQDVTYAQLH SLTLRREATEPPPSQEGPSPAVPSIYATLAIH
128	LILRB2	Q8N423	MTPIVTVLICLGLSLGPRTHVQTGTIPKPTLWAEPDSVITQGS PVTLSQCGSLEAEQYRLYREKKASWITRIRPELVKNGQFHI PSITWEHTGRYGCQYYSRARWSELSDPLVLMTGAYPKPTL SAQSPVVTSGGRVTLQCESQVAFGGFILCKEGEEHPQCL NSQPHARGSSRAIFSVGPVSPNRRWSHRCYGYDLNSPYVW SSPSDLELLVPGVSKKPSLSVQPGPVVAPGESLTLQCVSDV GYDRFVLYKEGERDLRQLPGRQPQAGLSQANFTLGPVSR YGGQYRCYGAHNLSSECSAPSDPLDILITGQIRGTPFISVQP GPTVASGENVTLLCQSWRQFHTFLLTKAGAADAPLRLRSIHE YPKYQAEFPMSPVTSAHAGTYRCYGSLSNDPYLLSHPSEPL ELVVSGPSMGSSPPPTGPISPTAGPEDQPLTPTGSDPQSGL GRHLGVVIGILVAVVLLLLLLLLLFLILRHRQKGKHWSTQRKA DFQHPAGAVGPEPTDRGLQWRSSPAADAQEENLYAAVKDT QPEDGVEMDTRAAASEAPQDVTYAQLHSLTLRRKATEPPPS QEREPPAEPsiyatLAIH
129	LILRB2	NP_00586 5.3	MTPIVTVLICLGLSLGPRTRVQTGTIPKPTLWAEPDSVITQGS PVTLSQCGSLEAEQYRLYREKKASWITRIRPELVKNGQFHI PSITWEHTGRYGCQYYSRARWSELSDPLVLMTGAYPKPTL SAQSPVVTSGGRVTLQCESQVAFGGFILCKEGEDEHPQCL NSQPHARGSSRAIFSVGPVSPNRRWSHRCYGYDLNSPYVW SSPSDLELLVPGVSKKPSLSVQPGPVMAPGESLTLQCVSDV VGYDRFVLYKEGERDLRQLPGRQPQAGLSQANFTLGPVSR SYGGQYRCYGAHNLSSECSAPSDPLDILITGQIRGTPFISVQP GPTVASGENVTLLCQSWRQFHTFLLTKAGAADAPLRLRSIHE YPKYQAEFPMSPVTSAHAGTYRCYGSLSNDPYLLSHPSEPL ELVVSGPSMGSSPPPTGPISPTAGPEDQPLTPTGSDPQSGL GRHLGVVIGILVAVVLLLLLLLLLFLILRHRQKGKHWSTQRKA DFQHPAGAVGPEPTDRGLQWRSSPAADAQEENLYAAVKDT QPEDGVEMDTRAAASEAPQDVTYAQLHSLTLRRKATEPPPS QEREPPAEPsiyatLAIH
130	LILRB3	O75022	MTPALTALLCLGLSLGPRTRVQAGPFPKPTLWAEPGSVISW GSPVTIWCQGSQEAQYRLHKEGSPELDRNNPLEPKNKARF RFSIPSMTEHHAGRYRCHYYSSAGWSEPSDPLEMVMGTGAY SKPTLSALPSPVVASGGNMTLRCSQKGYHHFVLMKEGEH QLPRTLDSQQLHSRGFQALFPVGPVTPSHRWRFCTCYYYTIN TPWVWVSHPSDPLEILPSGVSRLKPSLLTLQGPVLA PQSLLTQ CGSDVGYNRFLVLYKEGERDFLQRPQQPQAGLSQANFTLGP VPSPSNGGQYRCYGAHNLSSEWSAPSDPLNLMAGQFISYDTV SLSAQPGPTVASGENVTLLCQSWWQFDTFLLTKEGAHPPL RLRSMYGAHKYQAEFPMSPVTSAHAGTYRCYGSYSSNPHL LSHPSEPLELVVSGHSGGSSLPPTGPPSTPGLGRYLEVLIGV SVAFVLLLFLLLFLLLRRQRHSHKRTSDQRKTDQFQRPAGAAE TEPKDRGLLRSSPAADVQEENLYAAVKDTQSEDRVELDSQ SPHDEDPQAVTYAPVKHSSPRREMASPPSSLSGEFLDTKDR QVEEDRQMDTEAAASEASQDVTYAQLHSLTLRRKATEPPPS QEGEPPAEPsiyatLAIH
131	LILRB4	Q8NHJ6	MIPTFTALLCLGLSLGPRTHMQAGPLPKPTLWAEPGSVISWG NSVTIWCQGTLEAREYRLDKEESPAPWDRQNPLEPKNKARF SIPSMTEYAGRYRCYRSPVGSQPSDPLELVMTGAYSK PTLSALPSPLVTSGKSVTLLCQSRSPMDTFLLIKERAHPPLH LRSEHGAQQHQAEPMSPVTSVHGGTYRCFSSHGFSHYLL SHPSDPLELIVSGSLEDPRPSPTRSVSTAAGPEDQPLMPTGS VPHSGLRRHWEVLIGVLVVSILLLSLLLFLLLQHWROGKHRTL AQRQADFQRPPGAAEPEPKDGGQLQRRSSPAADVQGENFCA AVKNTQPEDGVEMDTRQSPHDEDPQAVTYAKVKHSRPRRE MASPPSSLSGEFLDTKDRQAEEDRQMDTEAAASEAPQDVT YAQLHSFTLRQKATEPPPSQEGASPAEPSVYATLAIH
132	LILRB5	O75023	MTLTLVLCGLSLGPRTCVQAGTLPKPTLWAEPASVIARG KPVTLWCQGPLETEEYRLDKEGLPWARKRQNPLEPGAKAK

			FHIPSTVYDSAGRYRCYYETPAGWSEPSDPLELVATGFYAE PTLLALPSPVVASGGNVTLQCDTLDGLLTFVLVEEEQKLPRT LYSQKLPKGPSQALFPVGPVTPSCRWRFRYYYYRKNPQV WSNPDLLEILVPGVSRKPSLLIPQGSVVARGGSLTLQCRSD VGYDIFVLVYKEGEHDLVQSGGQQPQAGLSQANFTLGPVSR HGGQYRCYGAHNLSRWSPSDPLDILAGLIPDIPALSVQP GPKVASGENVTLLCQSWHQIDTFFLTKEGAHPPLCLKSKY QSYRHQAEFMSPVTSAQGGTYRCYSAIRSYPYLLSSPSYP QELVVSGPSGDPSLSPTGSTPTPGPEDQPLTPTGLDPQSG GRHLGVVTGVSFAVLLFLLLFLLLRHRHQSKHR TSAHFYR PAGAAGPEPKDQGLQKRASPVADIQEEILNAVKDTQPKDG VEMDARAAASEAPQDVTYAQLHSLTLRREATEPPPSQEREP PAEPSIYAPLAIH
133	Macaca fasciculari s LILRB2 (putative)	XP_01529 7203	MTPILMVLICLGLSLGPRTHVQAGILPKPTLWAEPGSVISEGS PVTLRQCQSLQVQEYHLYREKNPASWVRQIRQELVKKG YFA IGFITWEHTGQYRCQYYSHSWWSEPSDPLELVVTGAYSKPT LSALPSPVVASGGNVTLQCDSQVAFDSTFLCKEGEDEHPQR LNCQSHARGWSWAVFSVGPVSPSRWSYRCYGYISSAPNV WSLPSDLELLVPGVSKKPSLSVQPGPVVAPGDKLTLCQGS DAGYDRFALYKEGEGDFLQRPVRQPQAGLSQANFLLGPVS RSHGGQYRCGSAHNLSSEWSAPSDPLDILAGQIRGRPFSLV QPGPKVVS GENVTLLCQSSWQFHAFLLTQAGAADAHLHLRS MYKYPKYQAEFPMSPVTSAHAGTYRCYGSRSSNPYLLSVPS DPLELVVSGPSGGPSSPTTGPTSTCAGPEDQPLTPTGSAPQ SGLGRHLGVVTGVLVAFVLLFLLLFLVLRYYRQGRWTS AQRKADFQHPAGAVEPEPRDRGLQRRSSPAADTQEENLYA AVKDTQPEDGVELDSRAAASEDPQDVTYAQLQSLTLRREAT EPPPSQERAPPVESSYATLTIH
134	Macaca mulatta LILRBb (putative)	Q110P6_ MACMU	GLSLGSRTRVQAGTLPKPTLWAEPDVITQGSPTLRQCQS LQVQEYRLYRERKPASWVRIRQELVKKG YFAIGFITWEHTG QYHCQYYSHSWWPEPSDPLELVMTGAYSKPTLSALPSPM ASGGNVTLQCDSQVAFDGFILCKEGEDEHPQRLNSHFHAYG WSRAVFSVGPVSPSRWSYRCYGYDSRSPYVWSLPSDLE LLVPGVSKKPSLSVQPGPVVAPGDKLTLCQGS DAGYNRFAL YKEGEGNFLOHPGRQRQAGLSQANFLLGPVSRSHGGQYRC YGAHNLSSEWSAPSDPLDILAGQIRGRPSLLVQPGRTVASG ENVTLQSSWQFHVLLTQAGAADAHLHLRSMYKYPKYQA EFPMSPVTSAHAGTYRCYGS HSSDSYLLSVPSDPLELVVSG PSGGPSSPTTGPTSTCGPEDQPLTPTGSAPQSGLGRHLGV VTGVLVAFVLLFLLLFLVLRHRRQGRWTS AQRKADFQH PAGAVEPEPRDRGLQRRSSPAANTQEENLYAAMKDTQPED GVELDSQAAASEDPQDVTYAQLQSLTLRRETTEPPPSQERA PPVESSY

Other Embodiments

The disclosure may be embodied in other specific forms without departing from the spirit or essential characteristics thereof. The foregoing embodiments are therefore to be considered in all
5 respects illustrative rather than limiting of the disclosure. Scope of the disclosure is thus indicated by the appended claims rather than by the foregoing description, and all changes that come within the meaning and range of equivalency of the claims are therefore intended to be embraced herein. All references cited herein are incorporated herein by reference.

In the event of an inconsistency between a sequence in the sequence listing and a sequence in
10 the specification, the sequence in the specification should be considered as controlling.