

mAb	Domain/s ite	IC50 WT (ng/ml)	IC50 B.1.617.2 (ng/ml)	VH usage (% id.)	Source (DSO)	ACE2 blocking	Ref.
S2X107	NTD	2611.00	10000.00	4-38-2 (97)	Sympt. (75)	Neg.	McCallum et al.
S2X28	NTD	1121.30	10000.00	3-30 (97.9)	Sympt. (48)	Neg.	McCallum et al.
S2X333	NTD	217.95	35016.00	3-33 (96.5)	Sympt. (125)	Neg.	McCallum et al.
S2H7	RBM	1227.25	347.05	3-66 (98.3)	Sympt. (17)	Weak	Thomson et al.
S2H14	RBM	1666.00	566.40	3-15 (100)	Sympt. (17)	Weak	Piccoli et al.; Thomson et al.
S2D19	RBM	369.55	129.95	4-31 (99.7)	Hosp. (49)	Moderate	Thomson et al.
S2X192	RBM	423.00	246.15	1-69 (96.9)	Sympt. (75)	Weak	Thomson et al.
S2H19	RBM	549.25	382.45	3-15 (98.6)	Sympt. (45)	Weak	Thomson et al.
S2E12	RBM	2.09	1.72	1-58 (97.6)	Hosp. (51)	Strong	Thomson et al.; Tortorici et al.
S2X615	RBM	9.80	14.59	3-11 (94.8)	Sympt. (271)	Strong	Collier et al.
S2X128	RBM	36.82	65.97	1-69-2 (97.6)	Sympt. (75)	Strong	Thomson et al.
S2D8	RBM	8.44	16.78	3-23 (96.5)	Hosp. (49)	Strong	Thomson et al.
S2H58	RBM	5.21	12.55	1-2 (97.9)	Sympt. (45)	Strong	Thomson et al.
S2N28	RBM	10.05	36.95	3-30 (97.2)	Hosp. (51)	Strong	Thomson et al.
S2M11	RBM	2.07	8.32	1-2 (96.5)	Hosp. (46)	Weak	Thomson et al.; Tortorici et al.
S2D106	RBM	8.0	34.6	1-69 (97.2)	Hosp. (98)	Strong	Thomson et al.
S2D32	RBM	4.6	104.6	3-49 (98.3)	Hosp. (49)	Strong	Thomson et al.
S2N22	RBM	16.8	543.4	3-23 (96.5)	Hosp. (51)	Strong	Thomson et al.
S2D97	RBM	10.0	332.9	2-5 (96.9)	Hosp. (98)	Weak	Thomson et al.
S2H71	RBM	18.2	622.8	2-5 (99)	Sympt. (45)	Moderate	Thomson et al.
S2H70	RBM	194.9	10000.0	1-2 (99)	Sympt. (45)	Weak	Thomson et al.
S2X58	RBM	14.4	10000.0	1-46 (99)	Sympt. (48)	Strong	Thomson et al.
S2N12	RBM	10.6	10000.0	4-39 (97.6)	Hosp. (51)	Strong	Thomson et al.
S2X30	RBM	10.0	10000.0	1-69 (97.9)	Sympt. (48)	Strong	Thomson et al.
etesevimab	RBM	28.7	23.0 / 10.3*	3-66 (99.7)	Sympt. (?)	Strong	R. Shi et al. Nature 2020
casirivimab	RBM	6.0	7.2 / 3.5*	3-30 (98.6)	Immunized mice	Strong	J. Hansen et al. Science 2020
regdanvimab	RBM	2.2	29.2 / 16.3*	2-70 (?)	Sympt. (?)	Strong	
imdevimab	RBM	31.9	1607.2 / 45.4*	3-11 (98.6)	Sympt. (?)	Strong	J. Hansen et al. Science 2020
bamlanivimab	RBM	7.8	10000 / 10000*	1-69 (99.7)	Sympt. (?)	Strong	Jones et al. Sci Transl Med 2021
S309	non-RBM	63.9	46.4	1-18 (97.2)	SARS-CoV	Weak	Pinto et al.
S2X35	non-RBM	181.2	224.6	1-18 (98.6)	Sympt. (48)	Strong	Piccoli et al.
S2H94	non-RBM	134.1	182.9	3-23 (93.4)	Sympt. (81)	Strong	Thomson et al.
S2X259	non-RBM	74.2	101.1	1-69 (94.1)	Sympt. (75)	Moderate	Tortorici et al (BioRxiv 2021)
S2H97	non-RBM	599.3	1260.4	5-51 (98.3)	Sympt. (81)	Weak	Collier et al.; Starr et al (BioRxiv 21)
S2X609	non-RBM	19.7	10000.0	1-69 (93.8)	Sympt. (271)	Strong	Collier et al.
S2X608	non-RBM	18.9	10000.0	1-33 (93.2)	Sympt. (271)	Strong	Collier et al.
S2X619	non-RBM	18.2	10000.0	1-69 (92.7)	Sympt. (271)	Strong	Collier et al.
S2X305	non-RBM	11.8	9522.5	1-2 (95.1)	Sympt. (125)	Strong	Collier et al.

DSO, days after symptom onset. Sympt., symptomatic. Hosp., hospitalized. SARS-CoV, infected with SARS-CoV virus. *clinical-stage mAbs tested with Vero E6 cells not expressing TMPRSS2

Extended Data Table 2: Monoclonal antibodies used in neutralisation assays against pseudotyped virus bearing spike from WT (Wuhan-1 D614) or B.1.617.2.