Figure S1









e

f

SNVs/indels Pipline (paired tumor and normal)





Figure S1. Histopathology of GIST specimens, overview of three next generation sequencing cohorts, quality control of WGS and WES data, and analytical workflow.

(a) The amount of viable tumor tissue and morphologic appearance for each GIST specimen used in the WGS, WES and/or RNA-seq. To determine the amount of viable tumor tissue and morphologic appearance, frozen sections were prepared from each cryopreserved sample with sufficient material for analysis. Cryosections of the same tumor specimen used in WGS, WES and/or RNA-seq were evaluated. Sections were mounted on precoated glass slides and stained with H&E frozen section kit (top) and CD117 immunohistochemistry staining (bottom). These validation studies showed that each specimen had a spindle or epithelioid cell morphology, and contained 25% or less nonneoplastic elements. L denotes low-risk, I denotes intermediate-risk, H denotes high-risk, M denotes metastatic.

(b) Composition of three GIST next generation sequencing cohorts in this study. The number of cases and tumor samples per cohort is labeled in parentheses.

(c) Quality estimation of WGS and WES data. Distribution of depth, and PCR duplicates for all samples analyzed by WGS and WES.

(d) BAM-matcher analysis for paired tumor and normal samples. Heatmap showing the fraction of common SNPs to determine whether two BAM files represent samples from the same patient.

(e) Analytical workflow. Variant calling pipelines paired tumor-normal samples.

(f) Venn plots showing the number of somatic SNVs (top) and indels (bottom) identified by different algorithms.







Figure S2. Somatic coding mutation rates of GIST and other human cancers. The numbers of cases in each tumor type are shown next to the labels in parentheses. Each dot represents one tumor sample. Tumor types are ordered by the coding mutation rate.

(a) Comparison of TMB between GIST and 26 PCAWG (Pan-Cancer Analysis of Whole Genomes) human cancers. Mutation data of PCAWG were retrieved from published paper¹. Only tumor types with more than 20 samples in PCAWG are shown. AdenoCA, adenocarcinoma; BNHL, B-cell non-Hodgkin lymphoma; ChRCC, chromophobe renal cell carcinoma; CLL, chronic lymphocytic leukemia; CNS, central nervous system; ColoRect, colorectal; Eso, esophageal; GBM, glioblastoma; HCC, hepatocellular carcinoma; Medullo, medulloblastoma; MH, microhomology; MPN, myeloproliferative neoplasm; Osteosarc, osteosarcoma; Panc, pancreatic; PiloAstro, pilocytic astrocytoma; Prost; prostate; RCC, renal cell carcinoma; SCC, squamous cell carcinoma; TCC, transitional cell carcinoma; Thy, thyroid.

(b) Comparison of TMB between GIST and 6 non-GIST sarcomas. Mutation data of 6 non-GIST sarcomas were retrieved from published paper². SS, synovial sarcoma; MPNST, malignant peripheral nerve sheath tumor; DDLPS, dedifferentiated liposarcoma; STLMS, soft tissue leiomyosarcoma; ULMS, gynecologic leiomyosarcoma; UPS, undifferentiated pleomorphic sarcoma; MFS, myxofibrosarcoma.

In this figure, the low bound, centerline, and upper bound of boxplot represent the first quartile, the median, and the third quartile of data, respectively; the upper and lower whiskers extend to the largest and smallest value within 1.5 times of the interquartile range (IQR) and the points greater than $\pm 1.5 \times IQR$ are plotted as outlier dots.

Figure S3



Figure S3. Metastatic GISTs harbor more genomic aberrations.

(a) Boxplots showing the alternation burdens in primary and metastatic GISTs.

(b) Number of clone and subclone mutations in coding region among different risk stratification.

(c) TMB and CNV burden are positively associated with tumor size and mitotic count.

In this figure, *P* values were calculated by the two-sided wilcoxon rank sum test. The low bound, centerline, and upper bound of boxplot represent the first quartile, the median, and the third quartile of data, respectively; the upper and lower whiskers extend to the largest and smallest value within 1.5 times of the interquartile range (IQR) and the points greater than $\pm 1.5 \times IQR$ are plotted as outlier dots. Source data are provided as a Source Data file.

Figure S4



Figure S4. Constitutive activation of the novel *KIT* mutant (A502_Y503insFA) identified in GIST and its biochemical response to first-line and second-line TKIs (imatinib and sunitinib).

(a) Constitutive activation of the novel KIT mutant (A502_Y503insFA). Mutant A502_Y503insFA cDNA was transfected into HEK293 cells. Well-established oncogenic KIT mutants (exon 9, A502_Y503dup; exon 11, V559D) were also transfected as controls.

(b) Comparative biochemical activity of TKIs for inhibiting KIT activity in transiently transfected HEK293 cells. HEK293 cells were transiently transfected, and protein lysates from transfected cells were prepared and subjected to western blotting. Representative results for the comparative activity of imatinib or sunitinib for inhibiting the novel *KIT* exon 9 mutant (A502_Y503insFA). The *KIT* exon 9 mutant (A502_Y503dup) and *KIT* exon 11 mutant (V559D) serve as positive controls. All experiments were replicated independently three times.

Figure S5



Figure S5. Lollipop plots showing the distribution of all non-silent mutations in ARID1A, DEPDC5, NF1 and SETD2.

The protein domains of each gene are indicated in the figure. The scale bars represent the length (amino acids) of the protein sequence and the protein domains are indicated by colors.

Figure S6





c



12

Figure S6. Validation of YLPM1 genomic aberrations in GISTs.

(a) Sanger sequencing confirms the somatic homozygous mutations of *YLPM1*. Identical *YLPM1* nonsense mutation in multiple anatomically distinct metastases from the same patients (case 85).

(b-c) Validation of homozygous *YLPM1* deletions in GISTs. (b) Integrative genome viewer images of part of chromosome 14q from matched tumor and nonneoplastic cell DNAs from the same patient (case 56), demonstrating intragenic *YLPM1* deletion (exons 1–4 homozygous deletion) and the tumor-restricted nature of the *YLPM1* alteration. (c) Genomic qPCR analysis validation of the homozygous deletion of *YLPM1* in case 56. Source data are provided as a Source Data file. Data are presented as mean values \pm s.d. n=3.

a

4				
	YLPM1 aberrations	Normal <i>YLPM1</i>	Total	YLPM1 aberrations frequency
GISTs	9	59	68	13.24%
Non-GIST sarcomas (TCGA, Pan-Cancer Atlas)	8*	243	253	3.16%
All TCGA Pan-Cancer	364	10589	10953	3.32%

b



Figure S7. Genomic YLPM1 aberrations in 339 human sarcomas, including 86 GISTs and 253 non-GIST sarcomas.

(a) The 253 non-GIST sarcomas (TCGA Pan-Cancer Atlas program, Hoadley KA *et al*, Cell-of-origin patterns dominate the molecular classification of 10,000 tumors from 33 types of cancer, *Cell*, 2018) include 99 leiomyosarcomas, 59 dedifferentiated liposarcomas, 50 undifferentiated pleomorphic sarcomas/malignant fibrous histiocytoma/high-grade spindle cell sarcomas, 24 myxofibrosarcomas, 10 synovial sarcomas, 9 malignant peripheral nerve sheath tumors and 2 desmoid/aggressive fibromatosis. Genomic *YLPM1* aberrations are significantly more frequent in GISTs compared with non-GIST sarcomas (p<0.0001, two-tailed Fisher's test). * The 8 *YLPM1* aberrations are: 5 amplifications (3 in myxofibrosarcomas, 1 in a dedifferentiated liposarcoma, and 1 in a malignant peripheral nerve sheath tumor), *YLPM1-KHDRBS2* fusion in a malignant peripheral nerve sheath tumor, E263D in a myxofibrosarcoma, and R1357X in a malignant peripheral nerve sheath tumor.
(b) The pie chart indicates the frequency of *YLPM1* aberrations in GIST and other cancer types.

Figure S8



Figure S8. Genomic alteration of YLPM1 is correlated with telomere length in human GISTs.

(a) Bar plot showing the log2 ratio of telomere content in tumors with YLPM1 mutations.

(b) Box plot showing the log2 ratio of telomere content in tumors with *YLPM1* mutations. *P* value is determined by two-sided Wilcoxon rank-sum test. The low bound, centerline, and upper bound of boxplot represent the first quartile, the median, and the third quartile of data, respectively; the upper and lower whiskers extend to the largest and smallest value within 1.5 times of the interquartile range (IQR) and the points greater than $\pm 1.5 \times$ IQR are plotted as outlier dots.

(c) Scatter plot showing the correlation between telomere content and telomere length detected on WGS data.

(d) Bar plot showing the log2 ratio of telomere length in tumors with *YLPM1* mutations based on WGS data. Source data are provided as a Source Data file.

Figure S9



Figure S9. Evaluation of YLPM1 CpG island methylation status in GISTs.

(a) Total frequency of methylated and unmethylated status of 48 CpGs in the *YLPM1* promoter region of the tumors with low *YLPM1* FPKM. The matched normal samples were also checked if available. The red bar indicates the frequency of methylated clones in tumors, and the blue bar indicates methylated clones in paired normal samples.

(b) Number of methylated and unmethylated clones at each CpG site. Colored bars represent the aggregated methylation status as assessed by bisulfite genomic sequencing at each position: red, methylated; blue, unmethylated.

Figure S10



20











YLPM1 Knockout - Enrichment profile - Hits Ctrl

Figure S10. YLPM1 knockout promotes tumor proliferation and oxidative phosphorylation in GIST.

(a) Sanger sequencing confirmation of the YLPM1 knockout (c.24_25 insT; p.G9fs*11) in GIST-T1 cells.

(b) *YLPM1* knockout increases the viability of GIST-T1 cells, as assessed by the CellTiter-Glo viability assay. n=3. ***P < 0.001. The *P* value are calculated using the two-sided Student's t test.

(c) Crystal violet staining assay shows that *YLPM1* knockout promotes GIST-T1 cell proliferation. Representative plates (top) and mean colony numbers (bottom) are shown (\pm standard error of the mean). n=3. **P* < 0.05. The *P* value are calculated using the two-sided Student's t test.

(d) *YLPM1* knockout promotes anchorage-independent growth of GIST-T1 cells. Representative plates (top) and mean colony numbers (bottom) are shown (\pm s.e.m. of the mean). n=3. **P* < 0.05. The *P* value are calculated using the two-sided Student's t test.

(e-f) *YLPM1* knockout accelerates the growth of GIST-T1 xenografts in nude mice. Growth curves (e), and tumor weights (f) of transplanted tumors. Error bars are the mean \pm s.e.m. of 6 replicates.

(g) Sanger sequencing confirms *KIT* exon 11 mutation (c.1678_1734del, p.Val560_Tyr578del) in *YLPM1*-KO tumor and *YLPM1* overexpressed tumor.

(h) The OCR profile following the addition of mitochondrial inhibitors $(1 \mu M \text{ oligomycin}, 1 \mu M \text{ FCCP}, 0.5 \mu M \text{ rotenone/antimycin A})$ was determined at various time points by XFe24 and normalized with cell numbers.

(i) Parameters of mitochondrial function are calculated from data shown in (h). Significance was assessed by Student's *t*-test. Data are shown as mean \pm s.e.m., ***P* < 0.01. Basal respiration was calculated as the difference between basal OCR and rotenone/antimycin-inhibited OCR. Maximal respiration was calculated as the difference between FCCP stimulated OCR and rotenone/antimycin-inhibited OCR. The *P* values are calculated using the two-sided Student's t test.

(j) GSEA showing that genes involved in hallmark mitotic spindle gene sets are significantly upregulated in YLPM1 inactivated GIST-T1 cells, whereas immune gene sets are significantly downregulated in YLPM1 inactivated GIST-T1 cells. NES, normalized enrichment score.



23

Figure S11. YLPM1 does not regulate the KIT oncogenic pathway and the sensitivity of GIST cells to imatinib.

(a) (Left) *YLPM1* knockout does not regulate the KIT oncogenic pathways in GIST-T1 cells. (Right) *YLPM1* restoration does not regulate the KIT oncogenic pathways in GIST-T1^{*YLPM1* KO} cells.

(b) (Top) *YLPM1* knockout does not change the sensitivity of GIST-T1 cells to a KIT inhibitor (imatinib). IC₅₀ values of GIST-T1 with or without the *YLPM1* knockout are shown. (Bottom) *YLPM1* restoration does not change the sensitivity of GIST-T1^{*YLPM1* KO} cells to the KIT inhibitor (imatinib). IC₅₀ values of GIST-T1^{*YLPM1* KO} with or without *YLPM1* restoration are shown. Data are presented as mean values \pm s.d. n=3.



Figure S12. Mutational signature of GISTs.

(a) Lego plots of 96 mutation profiles in tumor-normal paired GISTs. SNVs are divided into six categories with 16 flanking trinucleotide contexts. Inset pie charts display the proportion of 6 categories of mutations. Genome-wide includes all somatic SNVs detected in the 19 WGS cases, exome includes all somatic SNVs in target region of the 49 WES cases, coding region includes all somatic SNVs in both WES and WGS cases, non-coding region includes all somatic non-coding SNVs in 19 WGS cases.

(b) Correlation between any two groups in Figure S12a.

(c) De novo signatures analysis of GISTs using bayesNMF based on 19 WGS data. The bar plot shows the frequencies of one and two signatures obtained through signature analysis; 200 independent analyses were performed (left). Bar plot of contributions for two signatures extracted by bayesNMF in 19 WGS (right).

(d) 96-substitution classification of 2 signatures (W1 and W2) extracted by bayesNMF in 19 WGS. Each color refers to one of the six base substitutions, with x-axis showed 96 mutation types and y-axis showed the estimated mutations of each mutation type.

(e) Heatmap showing the cosine similarity between mutational signatures (W1 and W2) identified in 19 WGS using bayesNMF and COSMIC database (v2).

Figure S13



27



Figure S13. CNV signatures in GISTs.

(a) Total profiles of CNV signatures in 78 GISTs form 68 patients.

(b) Mutation burden of CNV signatures. Mutation burden per megabase of the CNV signatures was sorted by median (red line) with each dot representing one tumor and the number of tumors with signature indicated below.

(c) The correlation of CNV signature intensities with subtypes and clinicopathologic classifications. Boxplots showing the number of COSMIC_CN1/CN9 mutations in mRNA subtypes and clinicopathologic classifications, respectively. *P* values are determined by two-sided Wilcoxon rank-sum test. L, low-risk; I, intermediate-risk; H, high-risk and M, metastatic. The low bound, centerline, and upper bound of boxplot represent the first quartile, the median, and the third quartile of data, respectively; the upper and lower whiskers extend to the largest and smallest value within 1.5 times of the interquartile range (IQR) and the points greater than $\pm 1.5 \times IQR$ are plotted as outlier dots.

Figure S14



Figure S14. CN/GE correlations, DMD copy number variations and CN-LOH of KIT in GISTs.

(a) Hallmark pathways enrichment.

(b) Venn diagrams of CNV-mRNA correlation genes and genes in the focal peaks.

(c) Copy number variations of *DMD*. (Left) Schematic diagram displaying *DMD* CNV segments with the corresponding log2 ratio. (Right) Tumors with *DMD* deletions showing decreased mRNA expression than those with normal *DMD* copy number. *P* value is determined by two-sided Wilcoxon rank-sum test. The low bound, centerline, and upper bound of boxplot represent the first quartile, the median, and the third quartile of data, respectively; the upper and lower whiskers extend to the largest and smallest value within 1.5 times of the interquartile range (IQR) and the points greater than $\pm 1.5 \times$ IQR are plotted as outlier dots.









Figure S15. Sanger validation of the 4 *DMD* deletions, circos plots and log2 copy ratio plots, telomere content and *TERT* expression in GISTs.

(a) Sanger validation of the 4 *DMD* SVs identified by Manta. (Left) Sanger sequencing chromatograms showing *DMD* deletion regions; (Right) Comparison of the normalized *DMD* depth in tumor and paired normal samples. For WGS samples, the read depths of the tumor and paired normal tissues were calculated in a 100-bp window in the *DMD* gene and its adjacent region. For WES samples, only the read depths of the exon region were calculated in the *DMD* gene, while the intron region was scaled down by 200 times. To avoid the influence of sequencing depth on the calculation of read depth in the *DMD* gene, the read depth of the normal samples was normalized by the sequencing depth ratio between tumor and paired normal samples.

(b) Circos plots (left) and log2 copy ratio plots (right) for all analyzed WGS samples. The first (outer) circle shows the chromosomal positions. The second circle shows all SNVs and indels detected in the sample, with the position of each point indicating the VAF. The third circle shows the inferred copy number of each CNV segment, with amplification depicted in orange and deletions depicted in blue. The fourth circle shows all LOH events. The fifth (inner) circle shows all SVs. Red boxes on the copy ratio plots show chromothripsis detected by ShatterSeek.

(c-d) Telomere content and *TERT* expression in GISTs. The low bound, centerline, and upper bound of boxplot represent the first quartile, the median, and the third quartile of data, respectively; the upper and lower whiskers extend to the largest and smallest value within 1.5 times of the interquartile range (IQR) and the points greater than $\pm 1.5 \times$ IQR are plotted as outlier dots. (c) Comparison of telomere content in GIST and other human cancers. (d) TERT mRNA increases in GISTs with chromothripsis or kataegis (Left). Comparison of telomere content in GISTs with chromothripsis or kataegis versus without group (Right). Source data are provided as a Source Data file.

(e) The mutational spectra for different mutational pattern (left), rainfall plot illustrating the distribution of IMDs (right) for all analyzed WGS samples. Red boxes show the kataegis detected by SeqKat.

Figure S16



Figure S16. Genomic heterogeneity among spatially and temporally separated GISTs from individual patients and clonal analysis of *KIT* in GISTs.

(a) Bar graphs showing the tumor genomic heterogeneity of 4 cases with multiple GISTs. Each bar represents a single tumor lesion.

(b) The cancer cell fraction (CCF) of the somatic mutations in the 4 cases with multiple GISTs. Individual mutations are shown on the horizontal axis, and CCF is plotted on the vertical axis. Selected cancer-associated genes are labeled on the horizontal axis. Purple = mutations present in all samples; green = mutations shared by partial samples, yellow = private mutations, light color bars indicate subclones and dark color bars indicate clones.

(c) The CCF of the somatic *KIT* mutations in GISTs. The probability distributions of the CCF are showed in red (Clonal) and blue (Subclonal). The primary mutations are highlighted in bold.

Figure S17



Figure S17, related to Figure 7. Processing and validation of mRNA clustering.

(a) Principal component analysis divides the samples into 3 groups (green, 5 normal tissues; red, 4 GIST cell lines; blue, 107 frozen GISTs).

(b) Heatmap shows consensus matrices of the 107 GIST samples with mRNA data for k = 2 to k = 10 resulting from the consensus clustering approach.

(c) Determination of the optimal cluster number of 107 GISTs. (Right) Consensus empirical cumulative distribution function (CDF) with different k values (k = 2 to k = 10); (Left) delta area changes with the number of clusters. The x-axis represents the number of k and the y-axis represents the relative change in area under CDF curve. The optimal cluster number was five, but cluster 5 only included a WT GIST and were excluded from the following analysis, so we chose four as the optimal cluster number.

(d) Number of selected genes (based on the median absolute deviation, MAD) in the clustering results.

(e) Silhouette plot of clustering results (4 clusters) in 106 GISTs using the top 1500 genes (MAD).

Figure S18



Figure S18. Validation of mRNA-based subtypes of GISTs in Japanese (n = 65) and Complexity Index in Sarcomas (CINSARC) cohorts (n = 60).

(a) Consensus clustering matrices of 125 GISTs in validation cohorts with mRNA data for k = 2 to k = 10. Heatmap shows consensus matrices of the 125 GISTs with five clusters (k = 5).

(b) Determination of the optimal cluster number of 125 GISTs form validation cohorts. (Left) Consensus empirical cumulative distribution function (CDF) with different k values (k = 2 to k = 10); (Right) delta area changes with the number of clusters. The x-axis represents the number of k and the y-axis represents the relative change in area under CDF curve. The optimal cluster number was five, but cluster 5 only included 2 KIT/PDGFRA wild type GISTs and were excluded from the following analysis, so we chose four as the optimal cluster number

(c) Number of selected genes (based on standard deviation, SD) in the clustering results.

(d) Silhouette plot of clustering results (4 clusters) in 123 GISTs using the top 1100 genes (SD).



Figure S19. Molecular features in GIST mRNA subtypes.

(a) Boxplots of differentially expressed driver genes among the 4 mRNA subtypes.

(b) Chromosome arm-level CNV frequencies across 4 mRNA subtype of 69 GISTs. Dark red, red and light red represent the amplification (AMP) frequencies of GISTs in C1 (n=30), C2 (n=25) and C3 (n=14) subtype, respectively. Dark blue, blue and light blue represent the deletion (DEL) frequencies of GISTs in C1 (n=30), C2 (n=25) and C3 (n=14) subtype, respectively. Arms with significant group differences are denoted by green asterisks (both the GISTIC q value and chi-square test p value less than 0.05)

(c) Gene set enrichment analysis (GSEA) of expression data for 4 mRNA subtypes, utilizing MSigDB positional gene sets (MSigDB v7.0, collection C1). NES, normalized enrichment score.

(d) Comparisons of tumor mutational burdens (somatic coding mutation and CNVs) among the 4 mRNA subtypes.

In (a) and (d), *P* values were calculated by the two-sided wilcoxon rank sum test. The low bound, centerline, and upper bound of boxplot represent the first quartile, the median, and the third quartile of data, respectively; the upper and lower whiskers extend to the largest and smallest value within 1.5 times of the interquartile range (IQR) and the points greater than $\pm 1.5 \times IQR$ are plotted as outlier dots.







Figure S20. Immune characterization in GIST mRNA subtypes.

(a) Bar plots showing the percentage of 22 infiltrating immune cell types in the 4 mRNA subtypes (calculated using the CIBERSORT algorithm, 547 signature genes).

(b) Bar plots showing the proportion of CD8 positive cells in 30 GISTs with IHC. The percentage of positive was quantitatively evaluated using QuPath's built-in 'Positive cell detection'. Data are presented as mean values \pm s.d. n=5. **, P<0.01. The P values are calculated using the two-sided Student's t test.

(c) Boxplot of gene expression for PD-1. The low bound, centerline, and upper bound of boxplot represent the first quartile, the median, and the third quartile of data, respectively; the upper and lower whiskers extend to the largest and smallest value within 1.5 times of the interquartile range (IQR) and the points greater than $\pm 1.5 \times IQR$ are plotted as outlier dots. *P* values were calculated by the two-sided wilcoxon rank sum test.

(d) The expression of immunoinhibitory (left) and immunostimulatory molecules (right) in the 4 mRNA subtypes. The Nemenyi test was conducted and annotated as follows (compared with any other subtypes): ***, P < 0.001, **, P < 0.01, *, P < 0.05.

Figure S21



Figure S21. GIST-CN16 primary cells belong to the C2 subtype.

(a) Principal component analysis identifies that GIST-CN16 belongs to the C2 subtype.(b) The transcriptome heatmap shows that GIST-CN16 belongs to the C2 subtype.Source data are provided as a Source Data file.

Figure S22



Fig. S4a



Fig. S4b



Fig.S11a



Figure S22. Uncropped blots of Fig. 3c, Fig. S4a, Fig. S4b and Fig. S11a.

References

1. Alexandrov, L.B. et al. The repertoire of mutational signatures in human cancer. Nature 578, 94-101 (2020).

2. Cancer Genome Atlas Research Network. Comprehensive and integrated genomic characterization of adult soft tissue sarcomas. *Cell* **171**, 950-965 e28 (2017).