

Fig S1

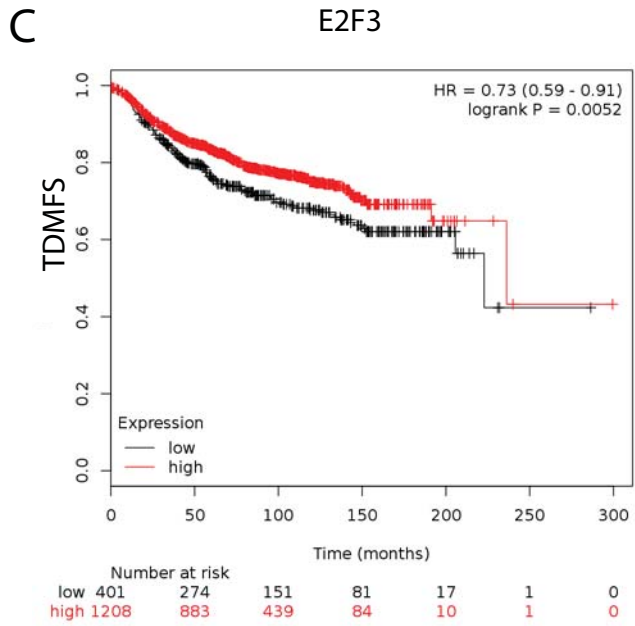
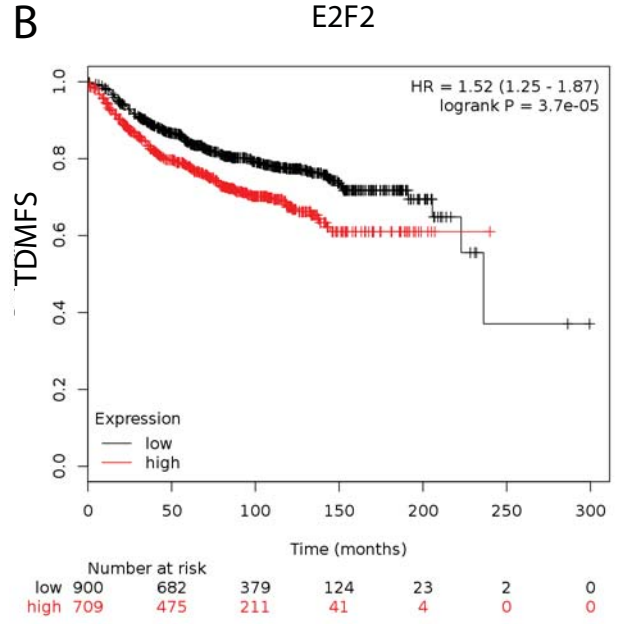
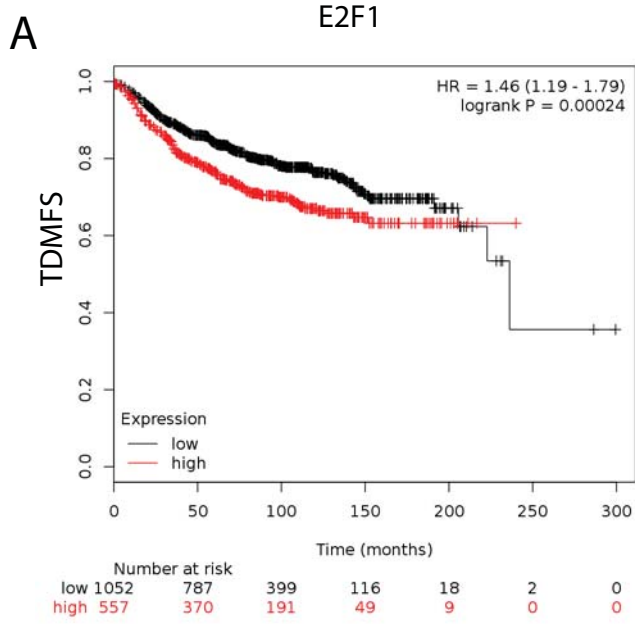


Fig S2

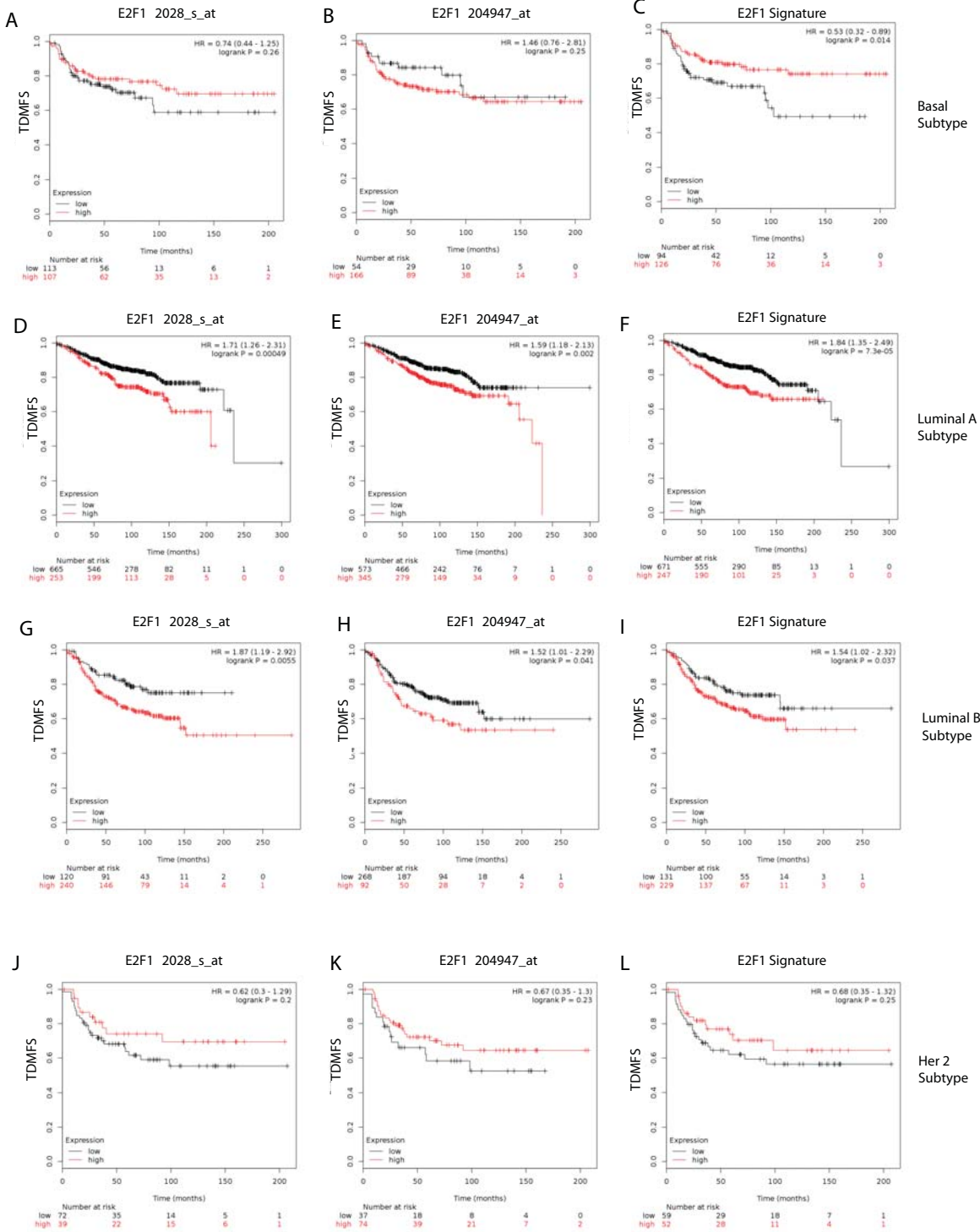


Fig S3

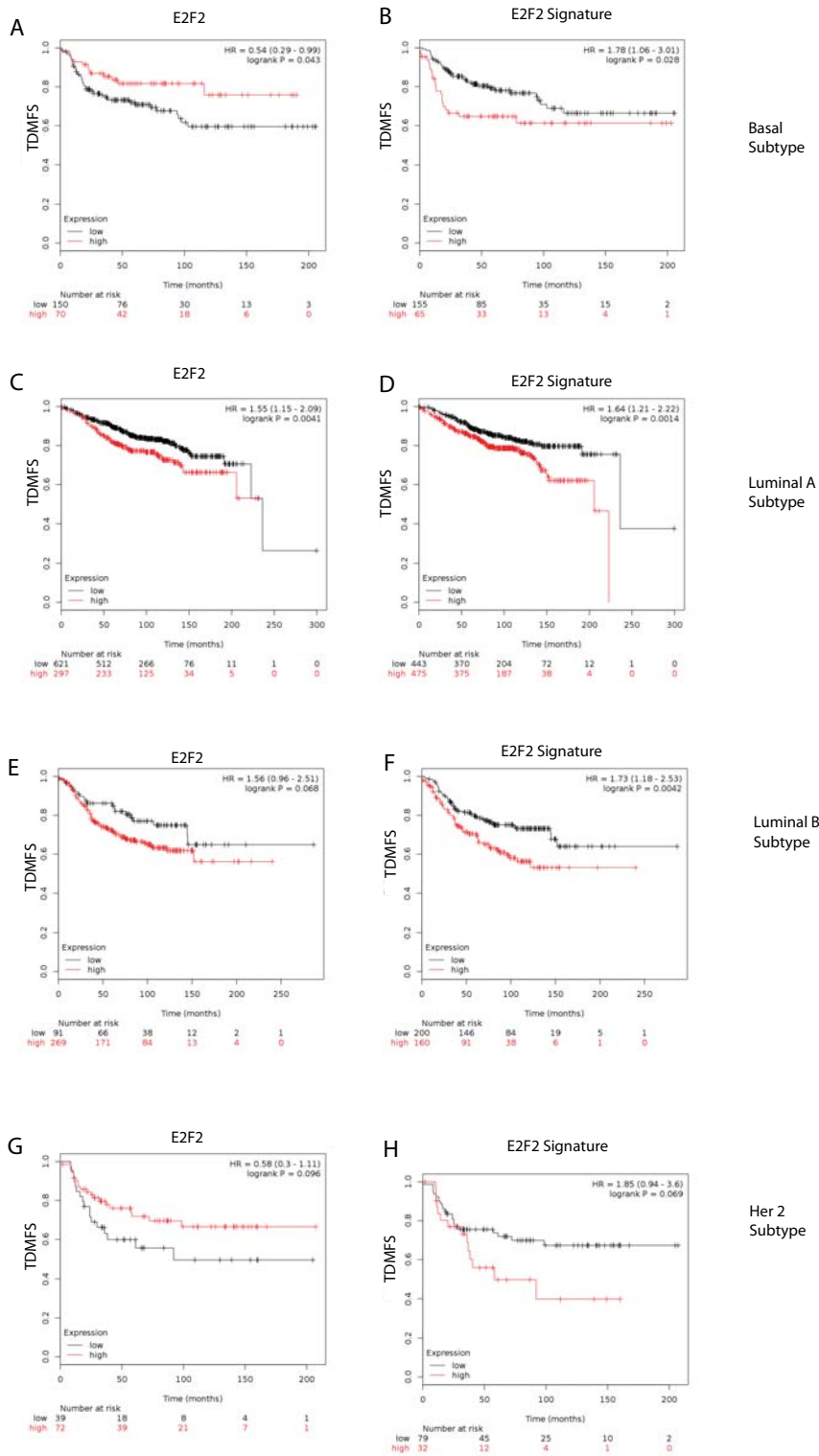


Fig S4

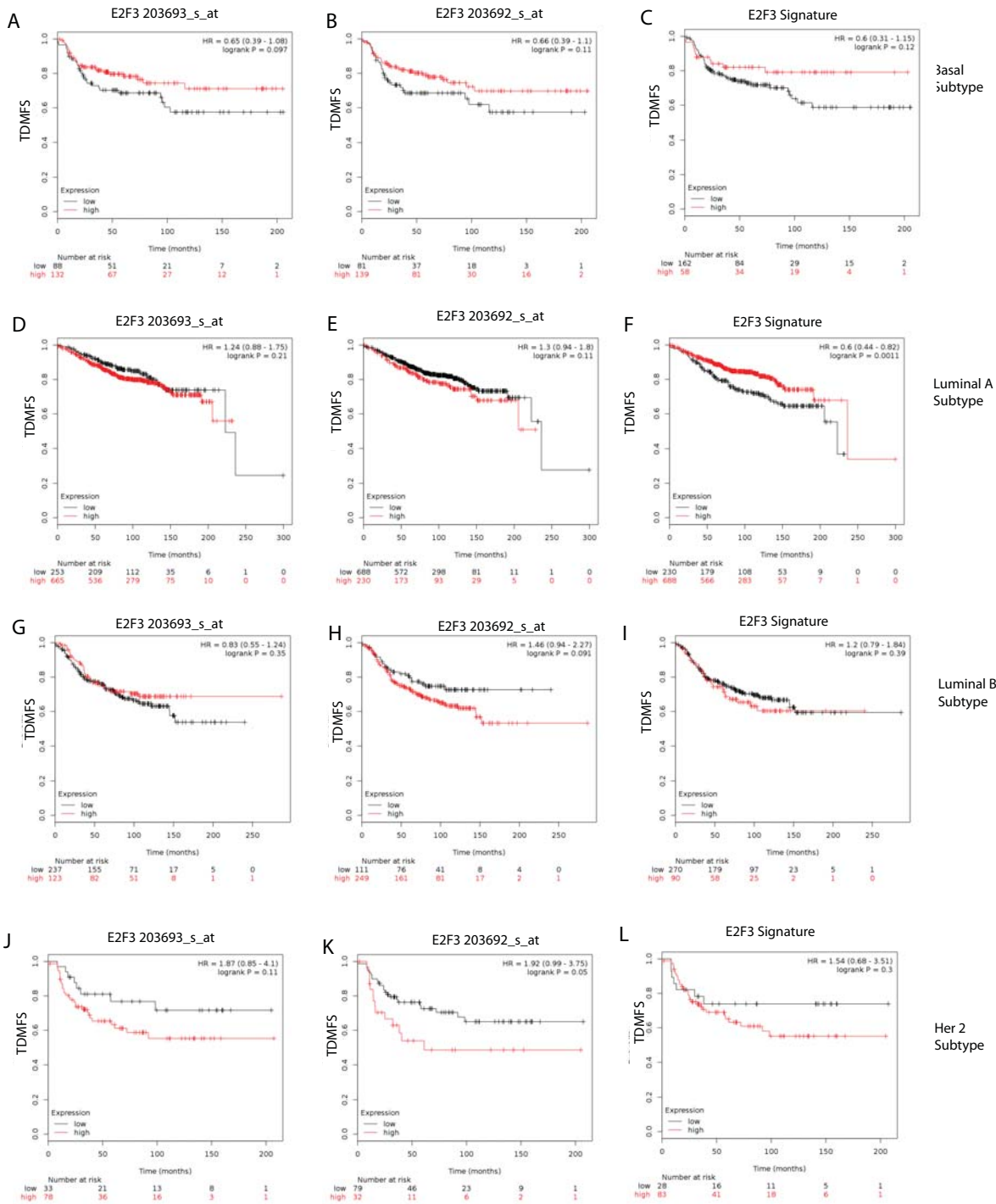
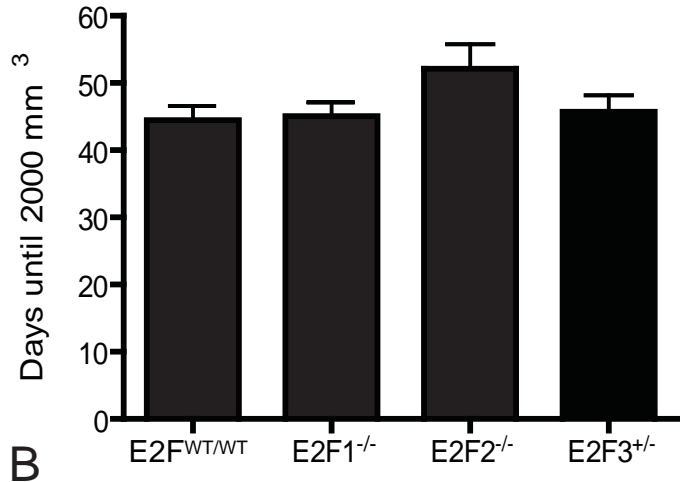
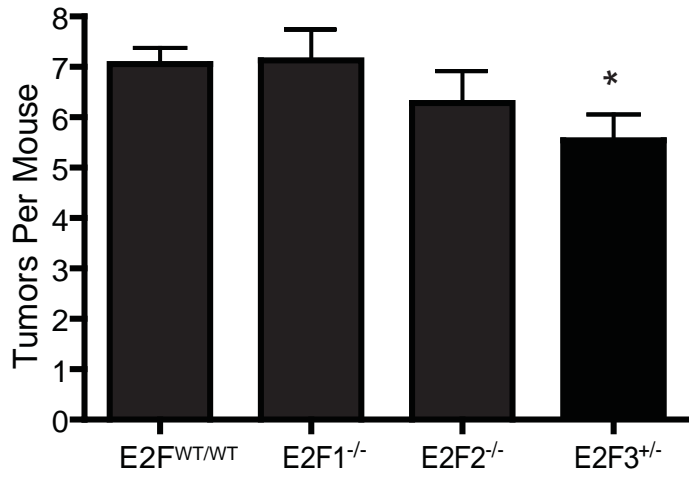


Fig S5

A



B



C

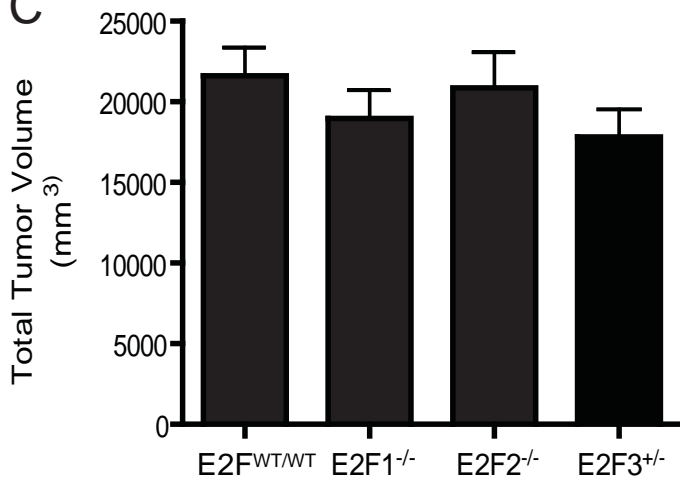


Fig S6

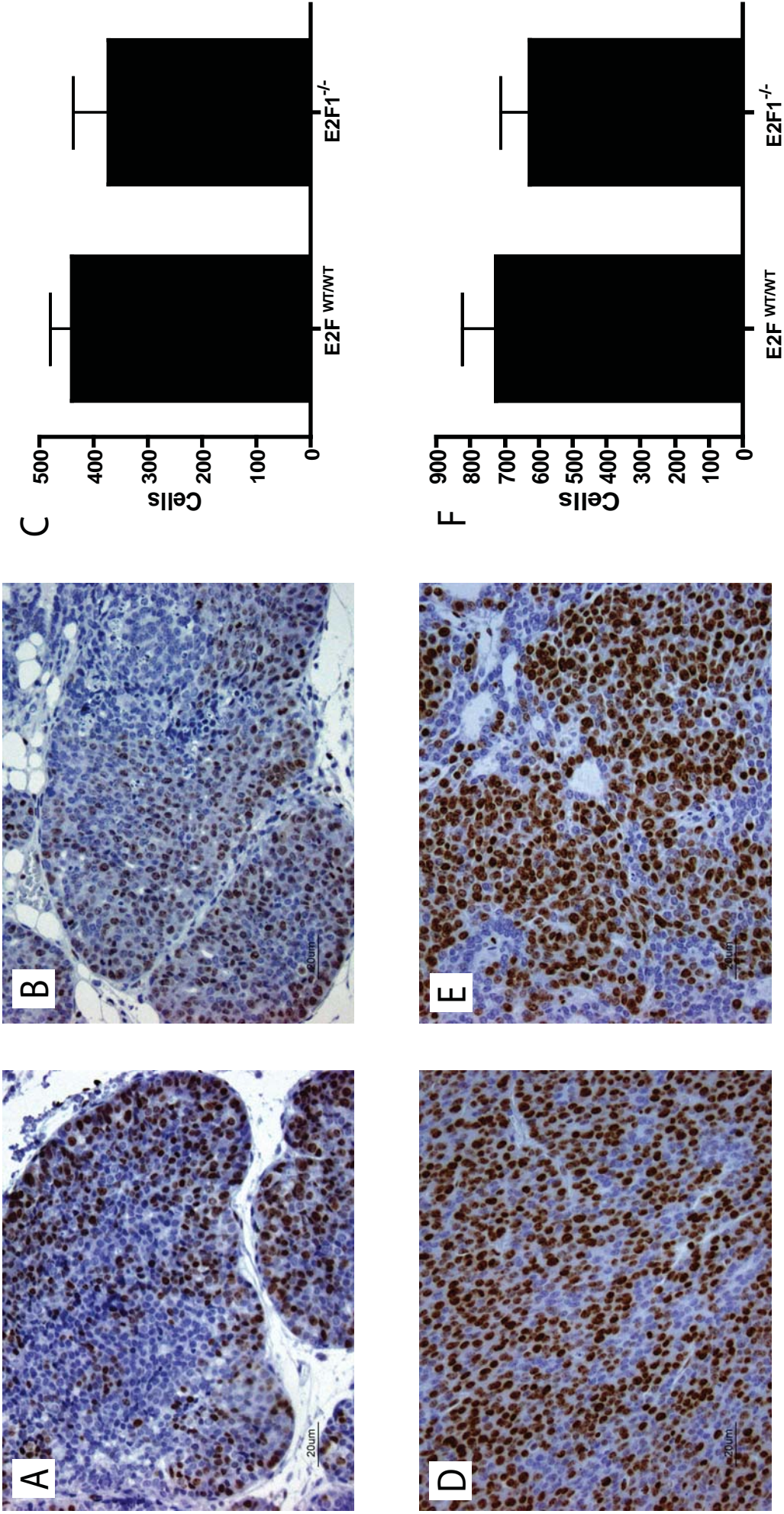


Fig S7

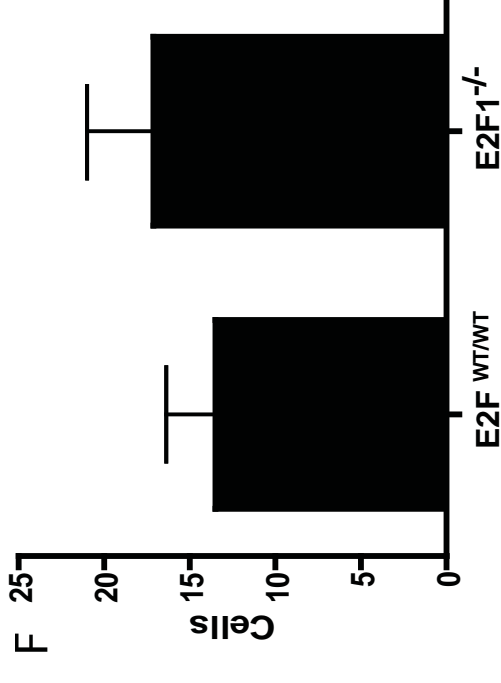
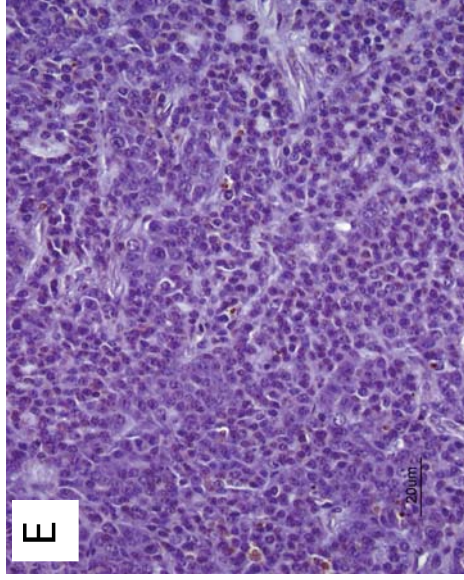
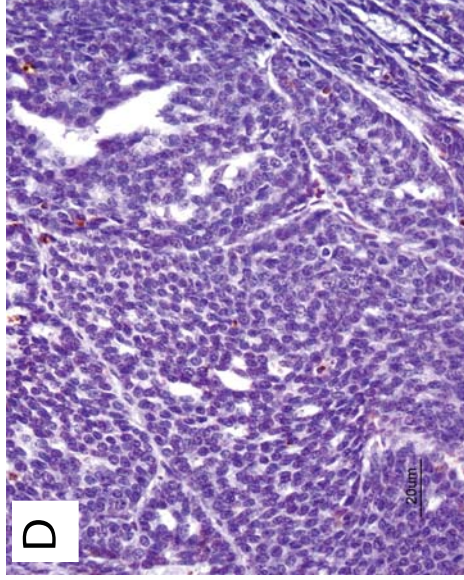
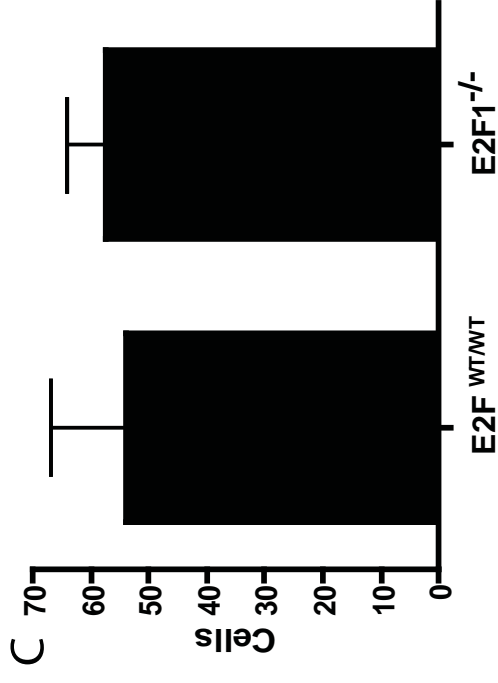
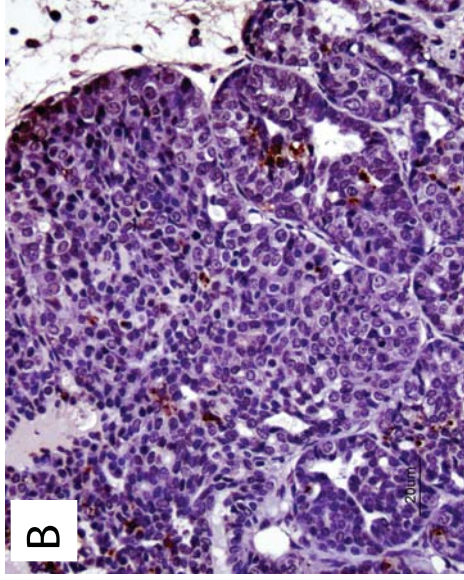
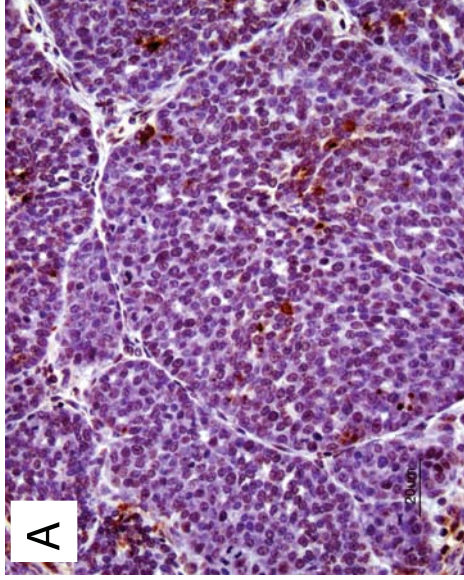


Fig S8

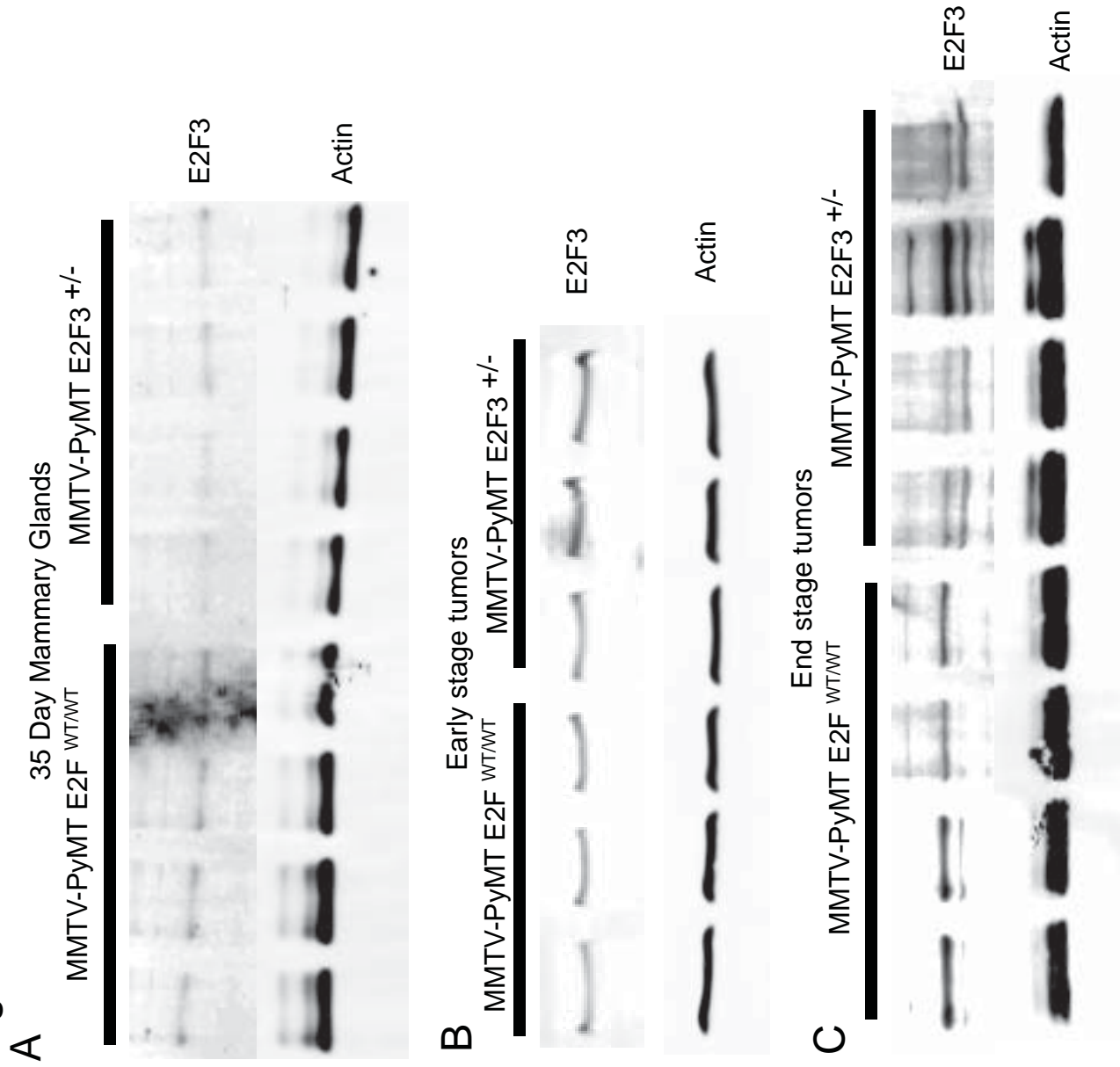




Fig S9

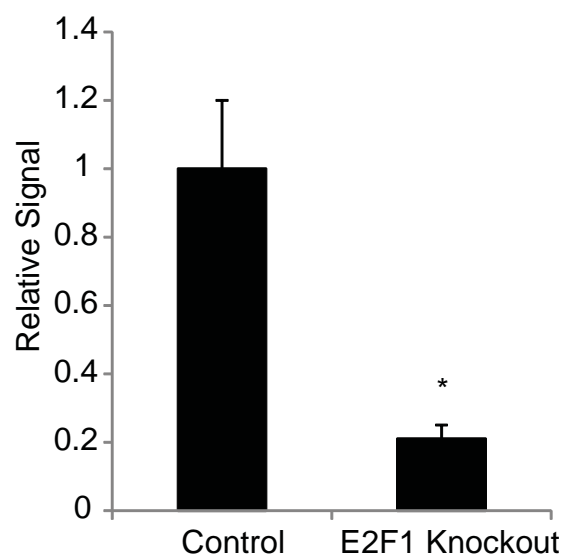
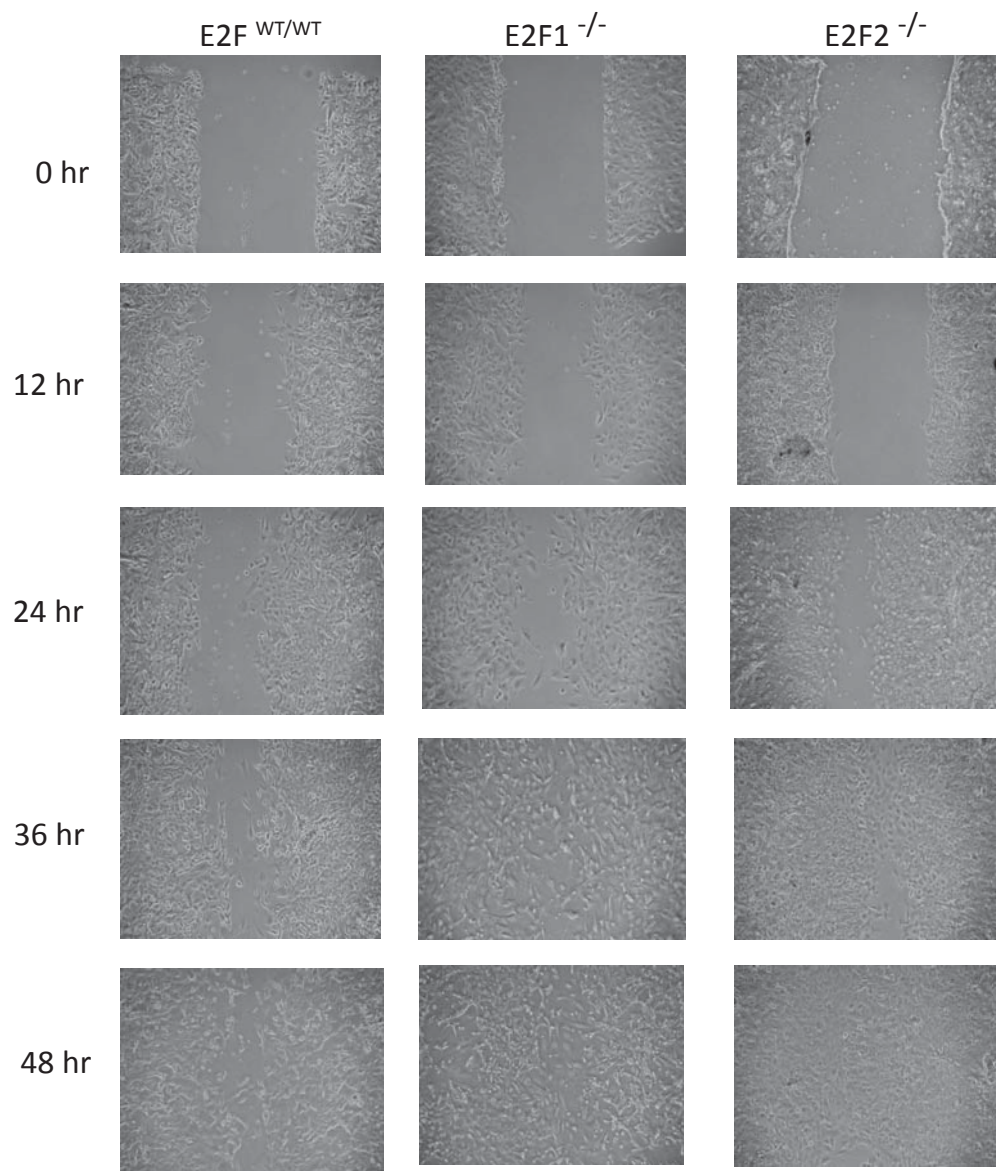


Fig S10

A



B

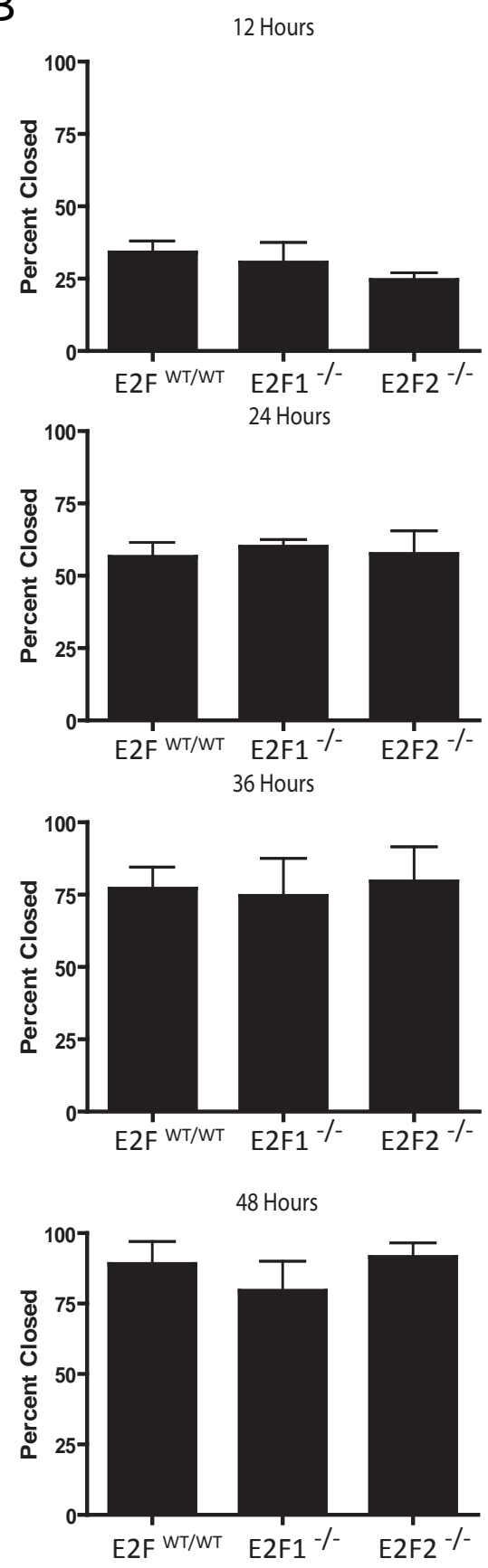


Fig S11

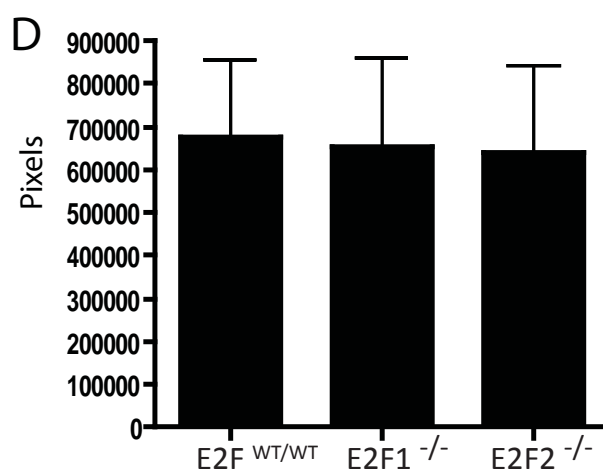
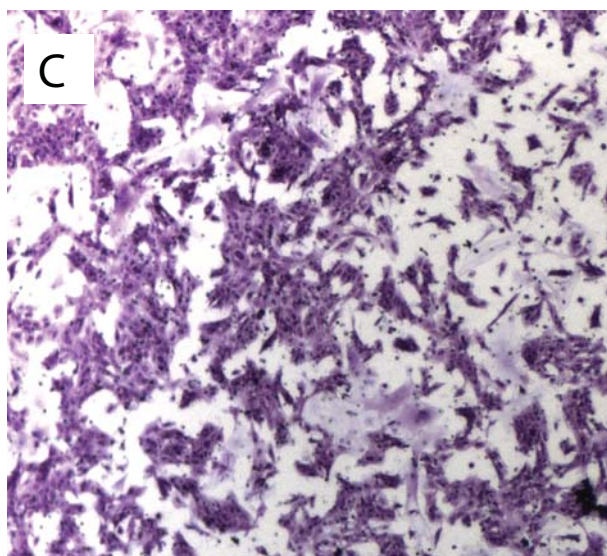
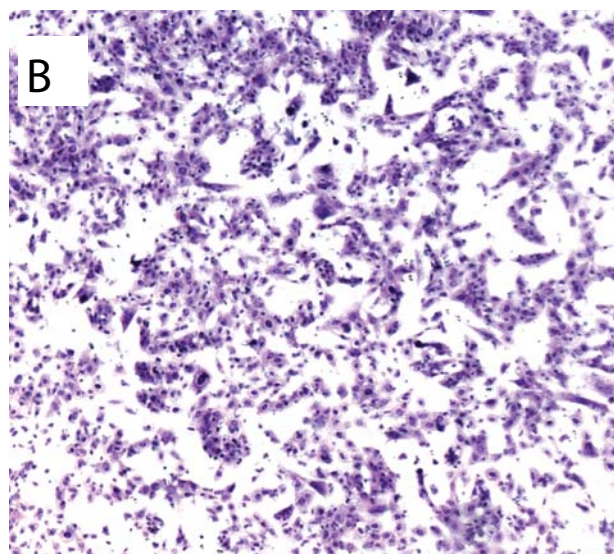
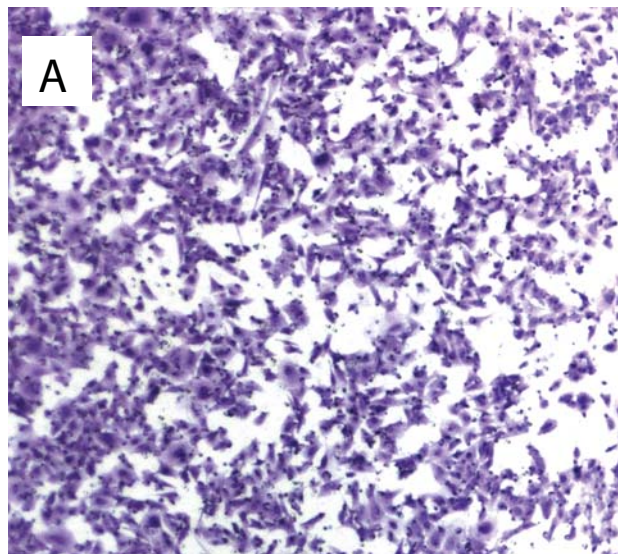


Fig S12

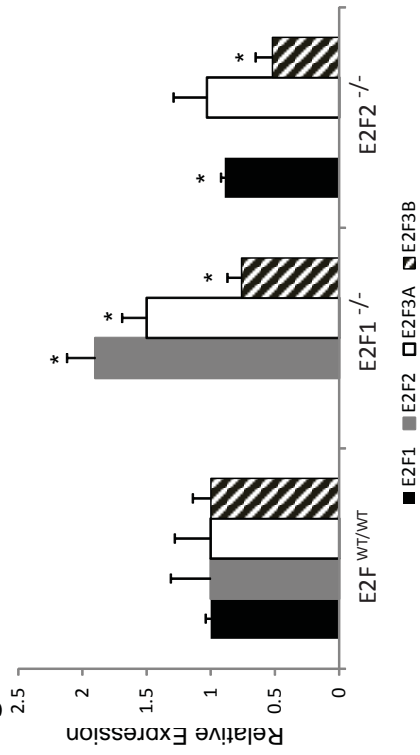


Fig S13

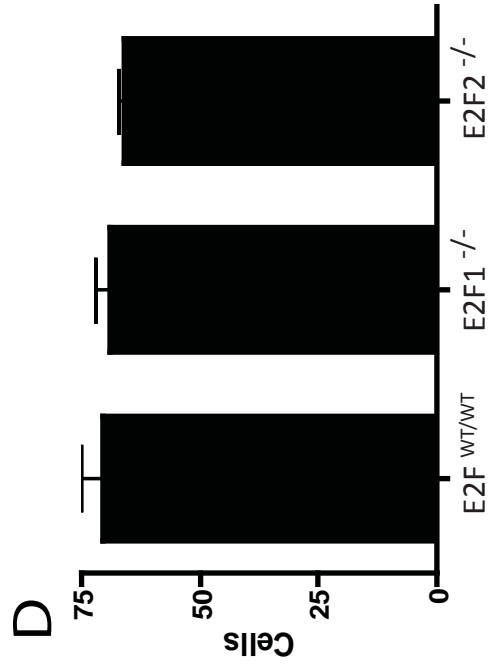
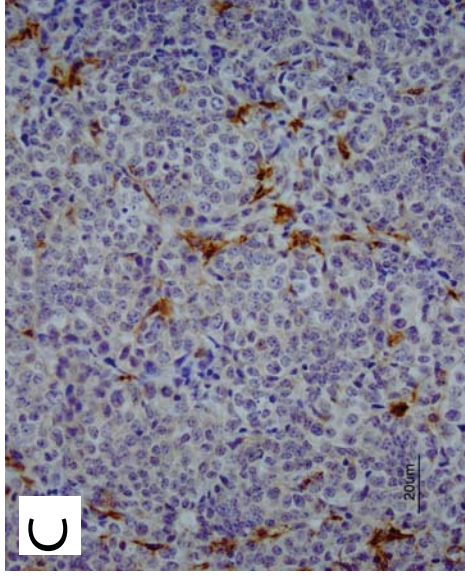
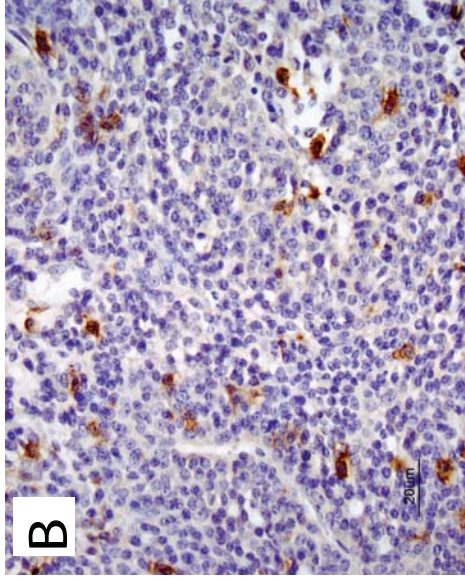
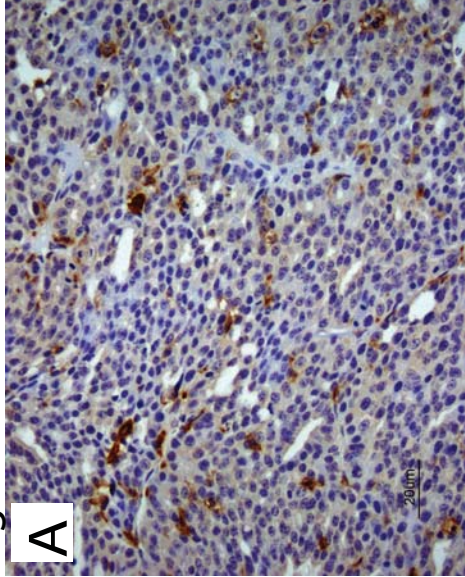


Fig S1- Association E2F signature genes with human breast cancer distant metastasis free survival times.

(A) Using the average expression of the upregulated genes in the E2F1 signature, a correlation ( $p=0.00024$ ) with a shorter time to distant metastasis in human breast cancer patients ( $n=1610$ ) was detected. (B) Using the average expression of the upregulated genes in the E2F2 signature, a correlation ( $p=0.000037$ ) with a shorter time to distant metastasis in human breast cancer patients ( $n=1610$ ) was detected. (C) Using the average expression of the upregulated genes in the E2F3 signature, a correlation ( $p=0.0052$ ) with a longer time to distant metastasis in human breast cancer patients ( $n=1610$ ) was detected. Patient stratification was conducted using the [www.kmplot.com](http://www.kmplot.com) auto selection tool.

Fig S2- Association of E2F1 levels and signature genes distant metastasis free survival times within specific intrinsic subtypes of human breast cancer.

For each analysis using signature genes the average expression of the upregulated genes in the E2F1 signature were used during stratification. (A-C) The association of E2F1 levels and signature genes within the basal subtype of breast cancer are shown. (D-F) The association of E2F1 levels and signature genes with metastasis events in the luminal A subtype of breast cancer are shown ( $p=0.0049$  for 2028\_s\_at,  $p=0.002$  for 204947\_at, and  $p=0.000073$  for the analysis using the signature genes). (G-I) The association of E2F1 levels and signature genes with metastasis events in the luminal B subtype of breast cancer are shown ( $p=0.0055$  for 2028\_s\_at,  $p=0.041$  for 204947\_at, and  $p=0.037$  for the analysis using the signature genes). (J-L) The association of E2F1 levels and signature genes within the Her2 subtype of breast cancer are shown.

Fig S3- Association of E2F2 levels and signature genes distant metastasis free survival times within specific intrinsic subtypes of human breast cancer.

For each analysis using signature genes the average expression of the upregulated genes in the E2F2 signature were used during stratification. (A-B) The association of E2F2 levels and signature genes within the basal subtype of breast cancer are shown. While high levels of E2F2 are protective ( $p=0.043$ , high expression E2F2 signature genes predict faster onset of distant metastasis( $p=0.028$ )) (C-D) The association of E2F2 levels and signature genes with metastasis events in the luminal A subtype of breast cancer are shown( $p=0.0041$  for E2F2 levels,  $p=0.0014$  for the analysis using the signature genes). (E-F) The association of E2F2 levels and signature genes with metastasis events in the luminal B subtype of breast cancer are shown( $p=0.0042$  for the analysis using the signature genes). (G-H) The association of E2F2 levels and signature genes within the Her2 subtype of breast cancer are shown.

Fig S4- Association of E2F3 levels and signature genes distant metastasis free survival times within specific intrinsic subtypes of human breast cancer.

For each analysis using signature genes the average expression of the upregulated genes in the E2F3 signature were used during stratification. (A-C) The association of E2F3 levels and signature genes within the basal subtype of breast cancer are shown. (D-F) The association of E2F3 levels and signature genes with metastasis events in the luminal A subtype of breast cancer are shown. (G-I) The association of E2F3 levels and signature genes with metastasis events in the luminal B subtype of breast cancer are shown. (J-L) The association of E2F3 levels and signature genes within the Her2 subtype of breast cancer are shown.

Fig S5- Loss of E2Fs does not affect tumor growth rate or tumor burden.

(A) The average tumor growth rate is depicted by the days until the primary tumor reaches 2,000mm<sup>3</sup> from initial palpation. At tumor endpoint, the number of tumors present on each mouse was counted. (B) The average number of tumors per mouse for each population of E2F<sup>WT/WT</sup> or mutant mice. (C) The average volume (mm<sup>3</sup>) from the sum of each tumor present within a mouse. All error bars represent SEM. All comparisons were made between E2F wild type controls and E2F knockout mice using a T-Test.

Fig S6- E2F1 loss has no effect on KI67 staining in early or late staged tumors.

(A) Representative IHC staining for KI67 in early stage (diameter=6mm) E2F<sup>WT/WT</sup> tumors (n=5). (B) Representative IHC staining for KI67 in early stage (diameter=6mm) E2F1<sup>-/-</sup> tumors (n=5). (C) Quantification of IHC results showing the average number of KI67 positive cells per field in E2F<sup>WT/WT</sup> and E2F1<sup>-/-</sup> early stage tumors. (D) Representative IHC staining for KI67 in end stage (diameter=20mm) E2F<sup>WT/WT</sup> tumors (n=5). (E) Representative IHC staining for KI67 in end stage (diameter=20mm) E2F1<sup>-/-</sup> tumors (n=5). (F) Quantification of IHC results showing the average number of KI67 positive cells per field in E2F<sup>WT/WT</sup> and E2F1<sup>-/-</sup> end stage tumors.

Fig S7- E2F1 loss has no effect on TUNEL staining in early or late staged tumors.

(A) Representative IHC staining for TUNEL in early stage (diameter=6mm) E2F<sup>WT/WT</sup> tumors (n=5). (B) Representative IHC staining for TUNEL in early stage (diameter=6mm) E2F1<sup>-/-</sup> tumors (n=5). (C) Quantification of IHC results showing the average number of TUNEL positive cells per field in E2F<sup>WT/WT</sup> and E2F1<sup>-/-</sup> early stage tumors. (D) Representative IHC staining for TUNEL in end stage (diameter=20mm) E2F<sup>WT/WT</sup> tumors (n=5). (E) Representative IHC staining for TUNEL in end stage (diameter=20mm) E2F1<sup>-/-</sup> tumors (n=5). (F) Quantification of IHC



results showing the average number of TUNEL positive cells per field in E2F<sup>WT/WT</sup> and E2F1<sup>-/-</sup> end stage tumors.

Fig S8- Western blot analysis shows E2F3 protein levels at various stages of MMTV-PyMT tumor development.

(A) A comparison of E2F3 protein levels in 35 day old mammary glands in E2F WT (n=4) and E2F3<sup>+/-</sup> (n=4) glands. (B) A comparison of E2F3 protein levels in early stage (diameter= 6mm) tumors from E2F<sup>WT/WT</sup> (n=3) and E2F3<sup>+/-</sup> (n=3) mice. (C) A comparison of E2F3 protein levels in end stage (diameter= 20mm) tumors from E2F<sup>WT/WT</sup> (n=4) and E2F3<sup>+/-</sup> (n=4) mice.

Fig S9- Loss of E2Fs reduces transgenic signal for circulating tumor cells.

A comparison of qRT-PCR signal for expression of the transgene circulating tumor cell marker in transgenic control mice and E2F1 knockout mice reveals that loss of E2F1 significantly (p<.0001) reduces circulating tumor cells.

Fig S10- Wound healing assay shows migratory ability of tumor derived cells from E2F<sup>WT/WT</sup>, E2F1<sup>-/-</sup>, and E2F2<sup>-/-</sup> mice.

(A) Representative pictures of wound closure at indicated time points for E2F<sup>WT/WT</sup>, E2F1<sup>-/-</sup>, and E2F2<sup>-/-</sup> tumor cells. (B) Quantification of wound closure at indicated time points for E2F<sup>WT/WT</sup>, E2F1<sup>-/-</sup>, and E2F2<sup>-/-</sup> tumor cells.

Fig S11- Transwell invasion assay shows migratory ability of tumor derived cells from E2F<sup>WT/WT</sup>, E2F1<sup>-/-</sup>, and E2F2<sup>-/-</sup> mice.

(A) Representative picture for E2F<sup>WT/WT</sup> tumor cell migration in the transwell invasion assay. (B) Representative picture for E2F1<sup>-/-</sup> tumor cell migration in the transwell invasion assay. (C)

Representative picture for E2F2<sup>-/-</sup> tumor cell migration in the transwell invasion assay. (D) Quantification of transwell invasion assay for E2F<sup>WT/WT</sup>, E2F1<sup>-/-</sup> and E2F2<sup>-/-</sup> tumor cells.

Fig S12- Relative expression of E2F1, E2F2, E2F3A, and E2F3B in MMTV-PyMT transplanted tumors.

E2F1<sup>-/-</sup> tumors (n=4) had a significant increase in E2F2 (p=0.0032) and E2F3A (p=0.0254) expression with a significant decrease in E2F3B (p=0.0358). Similar to the spontaneous tumors, E2F2<sup>-/-</sup> transplanted tumors had a significant decrease in E2F1 expression (p=0.0046) and a significant downregulation (p=0.0024) of E2F3B.

Fig S13- E2F loss has no effect on F4/80 staining in end stage tumors.

(A) Representative IHC staining for F4/80 in end stage (diameter=20mm) E2F<sup>WT/WT</sup> tumors (n=5). (B) Representative IHC staining for F4/80 in end stage (diameter=20mm) E2F1<sup>-/-</sup> tumors (n=5). (C) Representative IHC staining for F4/80 in end stage (diameter=20mm) E2F2<sup>-/-</sup> tumors (n=5). (D) Quantification of IHC results showing the average number of F4/80 positive cells per field across the various indicated genotypes.