Supplementary Figures:

Supplementary Figure 1. Homozygosity map of affected individual from family 1422. Homozygosity plots showing homozygous blocks (red) in affected individuals from family 1422, with homozygous *MFSD2A* mutations. Gray: homozygous block comprising *MFSD2A* overlaps in all the affecteds. Arrow: location of *MFSD2A.*

Supplementary Figure 2. Homozygosity map of affected individual from family

1825. Homozygosity plots showing homozygous blocks (red) in affected individuals from family 1825, with homozygous *MFSD2A* mutations. Gray: homozygous block comprising *MFSD2A* overlaps in all the affecteds. Arrow: location of *MFSD2A.*

Supplementary Figure 3. Chromatograms from Sanger sequencing of father (heterozygous), affected (homozygous) and an unaffected sibling or non-related control (reference normal homozygous) showing the mutations (arrow).

Supplementary Figure 4. MFSD2A is expressed in endothelial cells of microvessels in human fetal brain. MFSD2A (red) is highly expressed in endothelium and colocalizes with glucose transporter GLUT1 (green) in the human fetal brain. Arrows show endothelial cells in blood brain vessels. Scale bar 20µm.

Supplementary Figure 5. Expression of *MFSD2A* **in human tissues.** RT-PCR (upper panel) and qPCR (lower panel) across human adult tissues shows expression in all tissues tested but skeletal muscle and heart. *GAPDH* was used as loading control.

Supplementary Figure 6. Biological incorporation of radiolabeled LPC-[¹⁴C]oleate into phosphatidylcholine (PC). Cells expressing human Mfsd2a (WT) and mutations p.T159M and p. S166L or empty plasmid were incubated with $LPC-[$ ¹⁴C] oleate for 1hr. Lipids were extracted and analyzed using TLC for phospholipids. PC: phosphatidylcholine, LPC: lysophosphatidylcholine.

Supplementary Figure 7. *mfsd2aa* **and** *mfsd2ab* **are expressed in the nervous system of zebrafish embryos**. Whole mount embryo *in situ* hybridization of *mfsd2aa* and *mfsd2ab* riboprobes at 24, 48 and 96 hpf (hours post-fertilization). Both *mfsd2aa* and *mfsd2ab* were detected in the nervous system of zebrafish embryos at all stages examined.

Supplementary Figure 8. Transport activity of zebrafish mfsd2aa and mfsd2ab. (a) Transport of $100\mu\text{M}$ LPC-[¹⁴C]DHA, LPC-[¹⁴C]oleate, or LPC [³H]palmitate after 30 min of cells overexpressing with zebrafish mfsd2aa (fmfsd2aa) and mfsd2ab (fmfsd2ab) and human Mfsd2a proteins in HEK293 cells. **(b)** Biological incorporation of radiolabeled $LPC-[{}^{14}C]$ oleate into phosphatidylcholine (PC). Cells expressing with fmfsd2aa and fmfsd2ab or empty plasmid were incubated with $100 \mu M$ LPC- 14 °C β oleate for 1hr. Lipids were extracted and analyzed using TLC for phospholipids. **(c)** quantification of PC and LPC bands from TLC plate shown in (b). PC: phosphatidylcholine, LPC: lysophosphatidylcholine. Experiments were performed twice with triplicates. Data are expressed as mean ± SEM. ****p*<0.001.

Supplementary Figure 9. 10 kD dextran injection. Intracardiac injection of 10-kD dextran into *mfsd2aa* morpholino (MO)-injected and control embryos. *mfsd2aa* MO (1ng) was co-injected with zebrafish wild-type *mfsd2aa* mRNA (50ng), human wild-type *MFSD2A* mRNA (50ng), or mutated p.T159M and p.S166L human *MFSD2A* mRNA (50ng). Colocalization of dextran (green) and cranial blood vessels (red). See **Supplementary videos 1-6**.

Supplementary Figure 10. 2000 kD dextran injection. Intracardiac injection of 2000 kD dextran into *mfsd2aa* morpholino (MO)-injected and control embryos. *mfsd2aa* MO (1ng) was co-injected with zebrafish wild-type *mfsd2aa* mRNA (50ng), human wild-type *MFSD2A* mRNA (50ng), or mutated p.T159M and p.S166L human *MFSD2A* mRNA (50ng). Colocalization of dextran (green) and cranial blood vessels (red). See **Supplementary videos 7-12**.

Supplementary Figure 11. *mfsd2aa* **morphants exhibit brain hemorrhage.** Injection of *mfsd2aa* MOs in zebrafish embryos caused brain hemorrhage (10%) at 3 day post fertilization (dpf). Representative images of control and *mfsd2aa* morphant showing brain hemorrhage (arrowhead).

Supplementary Figure 12. Axial MRI T2 images showing absence of evidence of blood derived products determined by this level of resolution in affected children.

Supplementary videos

Supplementary video 1: Intracardiac injection of 10-kD dextran into control embryos. (**a**) side and (**b**) dorsal view 2 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing to brain parenchyma.

Supplementary video 2: Intracardiac injection of 10-kD dextran into *mfsd2aa* morpholino (1ng) (MO)-injected embryos. (**a**) side and (**b**) dorsal view 2 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing to dextran extravasation into the brain parenchyma.

Supplementary video 3: Intracardiac injection of 10-kD dextran into *mfsd2aa* morpholino (MO)-injected embryos. *mfsd2aa* MO (1ng) was co-injected with human wild-type *MFSD2A* mRNA (50ng). (**a**) side and (**b**) dorsal view 2 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing absence of dextran extravasation into the brain parenchyma.

Supplementary video 4: Intracardiac injection of 10-kD dextran into *mfsd2aa* morpholino (MO)-injected embryos. *mfsd2aa* MO (1ng) was co-injected with zebrafish wild-type *mfsd2aa* mRNA (50ng). (**a**) side and (**b**) dorsal view 2 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing absence of dextran extravasation into the brain parenchyma.

Supplementary video 5: Intracardiac injection of 10-kD dextran into *mfsd2aa* morpholino (MO)-injected embryos. *mfsd2aa* MO (1ng) was co-injected with mutated p.S166L human *MFSD2A* mRNA (50ng). (**a**) side and (**b**) dorsal view 2 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing dextran extravasation into the brain parenchyma.

Supplementary video 6: Intracardiac injection of 10-kD dextran into *mfsd2aa* morpholino (MO)-injected embryos. *mfsd2aa* MO (1ng) was co-injected with mutated p.T159M human *MFSD2A* mRNA (50ng). (**a**) side and (**b**) dorsal view 2 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing dextran extravasation into the brain parenchyma.

Supplementary video 7: Intracardiac injection of 2000-kD dextran into control embryos. (**a**) side and (**b**) dorsal view 0 minutes after dextran injection. (**c**) side and (**d**) dorsal view 40 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing to brain parenchyma.

Supplementary video 8: Intracardiac injection of 2000-kD dextran into *mfsd2aa* morpholino (1ng) (MO)-injected embryos. (**a**) side and (**b**) dorsal view 0 minutes after dextran injection. (**c**) side and (**d**) dorsal view 40 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing to dextran extravasation into the brain parenchyma.

Supplementary video 9: Intracardiac injection of 2000-kD dextran into *mfsd2aa* morpholino (MO)-injected embryos. *mfsd2aa* MO (1ng) was co-injected with human wild-type *MFSD2A* mRNA (50ng). (**a**) side and (**b**) dorsal view 0 minutes after dextran injection. (**c**) side and (**d**) dorsal view 40 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing absence of dextran extravasation into the brain parenchyma.

Supplementary video 10: Intracardiac injection of 2000-kD dextran into *mfsd2aa* morpholino (MO)-injected embryos. *mfsd2aa* MO (1ng) was co-injected with zebrafish wild-type *mfsd2aa* mRNA (50ng). (**a**) side and (**b**) dorsal view 0 minutes after dextran injection. (**c**) side and (**d**) dorsal view 40 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing absence of dextran extravasation into the brain parenchyma.

Supplementary video 11: Intracardiac injection of 2000-kD dextran into *mfsd2aa* morpholino (MO)-injected embryos. *mfsd2aa* MO (1ng) was co-injected with mutated p.S166L human *MFSD2A* mRNA (50ng). (**a**) side and (**b**) dorsal view 0 minutes after dextran injection. (**c**) side and (**d**) dorsal view 40 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing dextran extravasation into the brain parenchyma.

Supplementary video 12: Intracardiac injection of 2000-kD dextran into *mfsd2aa* morpholino (MO)-injected embryos. *mfsd2aa* MO (1ng) was co-injected with mutated p.T159M human *MFSD2A* mRNA (50ng). (**a**) side and (**b**) dorsal view 0 minutes after dextran injection. (**c**) side and (**d**) dorsal view 40 minutes after dextran injection. Colocalization of dextran (green) and cranial blood vessels (red). Arrow pointing dextran extravasation into the brain parenchyma.

Supplementary Table 1. Clinical characteristics of affected members of families 1422 and 1825. Abbreviations. HC head circumference, MRI Magnetic resonance imaging, SD Standard deviation, n/a not available.

Supplementary Table 2. Genetic variants from family 1825 from exome sequencing.

Abbreviations. Chr chromosome, ref reference, mut mutation, cons conservation.

Supplementary Table 3. Genetic variants from family 1422 from exome sequencing.

Abbreviations. Chr chromosome, ref reference, mut mutation, cons conservation.

Supplementary Table 4. Genetic variants in genes listed in OMIM database as causative of clinically relevant phenotype from family 1825 exome sequencing. Abbreviations. Chr chromosome, ref reference, mut mutation, cons conservation, AF allele frequency.

Supplementary Table 5. Genetic variants in genes listed in OMIM database as causative of clinically relevant phenotype from family 1422 exome sequencing. Abbreviations. Chr chromosome, ref reference, mut mutation, cons conservation, AF allele frequency.

Supplementary Table 6. Primers and morpholino antisense oligonucleotides used in this study.

Supplementary Results

MODELING HUMAN MFSD2A MUTATIONS

We took advantage of the detailed structural information of MelB to provide a molecular basis for the inactivating mutations p.T159M and p.S166L. The overall mechanism of transport of the MFS family has been first inferred from the X-ray structure of glycerol-3 phosphate transporter GlpT from *E. coli,* and confirmed by structures of other MFS family members and more recently including MelB, a close ortholog of MFSD2 $A^{3,8,9}$. The model has been described as a "rocker-switch, alternating access" model in which an outward open conformation binds to ligands causing a conformation switch to the insideopen conformation⁹. The energy to drive this conformational change is provided by the binding of cations that flow down their concentration gradients. In the case of MFSD2A, it utilizes sodium to drive the transport of LPC⁴. Indeed, MFSD2A contains a conserved sodium-binding site that has been shown to be essential for sodium-dependent transport of $LPC⁴$.

A molecular explanation for loss of function of p.T159M in the affected children can be inferred from the atomic resolution structure of MelB. Sequence alignment of human MFSD2A and MelB indicated conservation of T159 with T121 in MelB. T121 in MelB faces the sodium-binding site and forms hydrogen bonds with the sodium binding residue D59, which is equivalent to D97 in human MFSD2A (**Fig. 2i**). Both T121 and D59 are required for MelB transport³. Threading the human MFSD2A sequence on the MelB model revealed that T159 in human is also in close proximity to the sodiumbinding residue D97, which is equivalent to D96 in mouse MFSD2A and essential for function⁴. Similar to p.T159M, p.T121A in MelB is non-functional. Therefore, the p.T159M mutation is predicted to disrupt sodium binding and prevent ligand transport. The p.S166L mutation is also non-functional, and the affected child is a clinical phenocopy of the children having the p.T159M mutation. Interestingly, p.T159M and p.S166L both reside on transmembrane domain 4 (TMD4), which has been proposed to communicate ligand and sodium binding^{3,10}. The S166 residue is conserved in all sequenced vertebrates, but not conserved in MelB. Moreover, the S166 residue faces the transport cavity (**Fig. 2i**), suggesting a role in ligand binding. Indeed, S166 corresponding residue in MelB, $W128$, is critical for melibiose transport^{3,10}. Therefore, S166 residue is predicted to play a role in substrate binding by potentially forming a hydrogen bond with the phosphorylcholine headgroup of LPC.