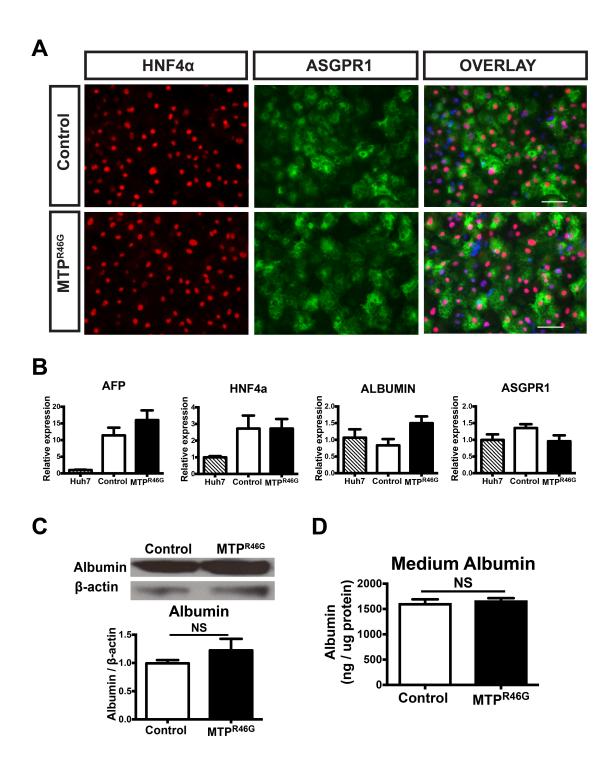


Supplement Figure 1: Generation of ABL-specific iPSCs and confirmation of mutation. Related to Figure 1

(A) Sequence of MTTP in iPSCs from the ABL patient showing a missense mutation c.136 C>G, p. Arg46Gly. (B) Predicted MTP protein structure and location of the mutation. Image used with permission from Walsh et. al., 2015. (C) Representative images showing morphologies of iPSCs from control subjects. Scale bar: 200 μ m. (D) Quantification of SSEA4 and TRA1-60 by FACs analysis. Values are means and SEM for three or four independent experiments for all lipid analysis.



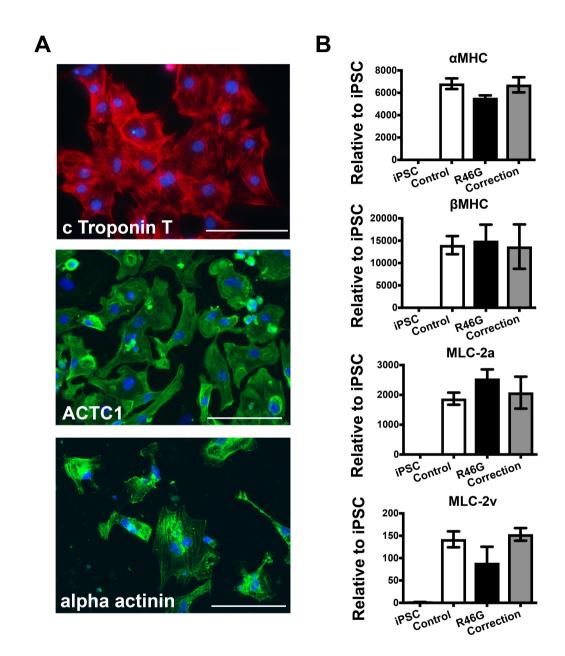
Supplement Figure 2: Differentiation of iPSCs into hepatocytes.

Related to Figure 1

(A) Representative images showing

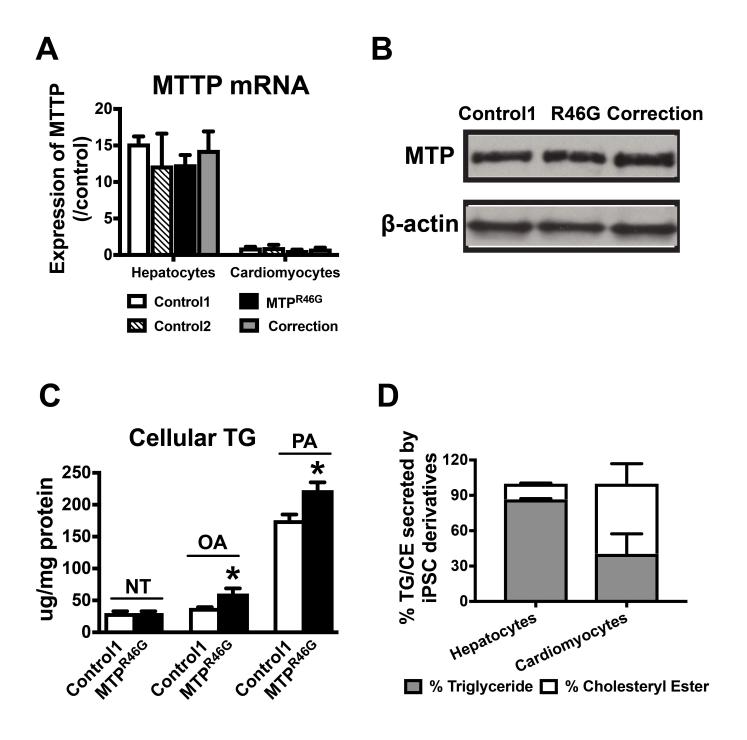
positive immunostaining of hepatocyte markers HNF4 α (red) and ASGPR1 (green). Scale bar: 100 μ m. (B) Hepatic genes, such as HNF4 α , ALBUMIN, AFP, and ASGPR1 were analyzed by real-time PCR.

(C-D) Cellular and medium albumin levels were measured by western blotting and ELISA respectively. β -actin was blotted as a loading control. \pm S.D. Values are means for three experiments for all lipid analysis.



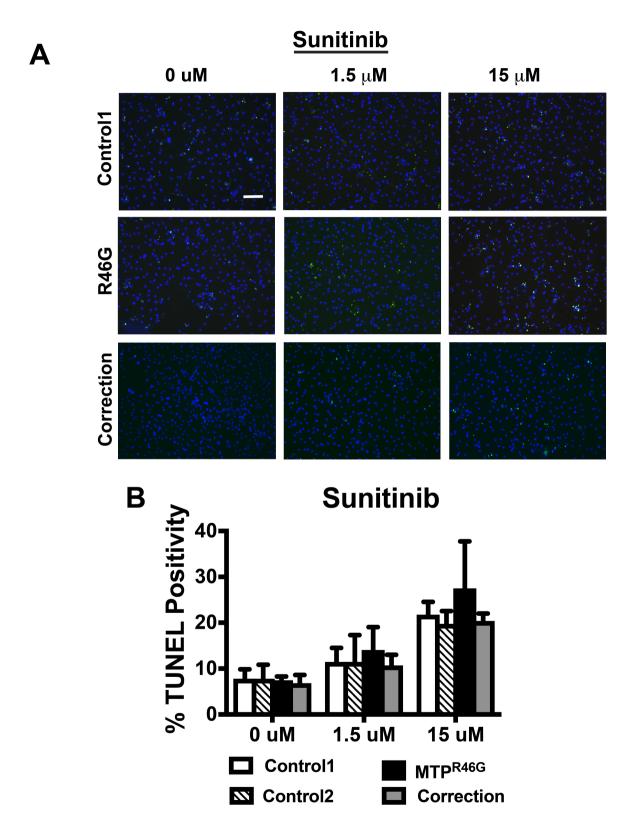
Supplement Figure 3: Differentiation of iPSCs into cardiomyocytes Related to Figure 4

(A) Representative images of immunofluorescence staining of cardiomyocyte markers in iPSCs derived cardiomyocytes from control subjects. Scale bar: 200 μm (B) Expression of cardiac-specific markers, such as, αMHC, βMHC, MLC2A, and MLC2V. ± S.D. Values are means for three independent experiments.



Supplement Figure 4: Elevated cellular TG in MTPR46G cardiomyocytes. Related to Figure 4

(A-B) Quantification of messenger RNA MTTP and protein of MTP by real-time PCR and western blot. (C) Cellular TG contents were measured by enzymatic assays and normalized to total protein. (D) Percentage of secreted [14C] OA counts in either TG or CE as determined by thin layer chromatography separation in hepatocytes and cardiomyocytes. ± S.D. *P<0.05. Values are means for three independent experiments.



Supplement Figure 5: Sunitinib and staurosporine induced dose-dependent apoptosis in iPSC-derived cardiomyocytes.

Related to Figure 5

- (A) Representative images of TUENL staining in sunitinib (0, 1.5 uM, 15 uM) treated cardiomyocytes.
- Scale bar: 150 um. (B) Percentage of apoptotic cells were counted by Image J (>1000 cells per condition).
- (C) Percentage of TUNEL positivity in iPSC-derived cardiomyocytes induced by staurosporine (1uM) and PA (0.5mM).
- (D) Expression of Caspase3 and Caspase9 upon staurosporine and PA treatment were analyzed by real-time PCR. \pm S.D. *P<0.05. Values are means for three independent experiments.

Table S1. Subject Lipid Panel Results Related to Figure 1

Subject	Race	Sex	Age	TC	VLDL	LDL	HDL	TG	ApoAl	АроВ
Subject				mg/dl						
Control (M8)	White	Male	66	166	22	102	42	130	137	85
ABL (M7)	White	Male	60	52	-	13	40	10	61	10

TC: total cholesterol; VLDL: very low density lipoprotein; LDL: low density lipoprotein; HDL: high density lipoprotein; TG: triglyceride; ApoAI: apolipoprotein A-I; ApoB: apolipoprotein B; "-" indicates undetectable; Age reflects age at time of visit.

Table S2. IPS clones from subjects Related to Figure 1

Subject	iPSC clones	WiCell ID		
	iPS-M8-SeV2	PENN156i-M8-2*		
Control1	iPS-M8-SeV3	N/A		
	iPS-M8-SeV5	N/A		
	iPS-SV20	PENN123i-SV20*		
Control2	iPS-SV10	PENN078i-SV10*		
	iPS-M7-SeV16	PENN144i-M7-16*		
ABL (R46G)	iPS-M7-SeV14	N/A		
	iPS-M7-SeV9	N/A		

N/A: not available. *Detailed cell line information can be found at: http://www.wicell.org/home/stem-cell-lines/catalog-of-stem-cell-lines/collections/nhlbi-next-gen-rader.cmsx