### <u>Supplemental Methods – Sequencing and variant selection</u>

The genomic data presented in this paper is derived from SOLiD 5500XL system (Life Technologies) sequencing data. All sequencing and variant selection was performed at the ISO15189 accredited Genome Diagnostics section of the Department of Genetics, UMC Utrecht (The Netherlands). This laboratory has now moved from SOLiD sequencing to whole exome sequencing on an Illumina HiSeq platform, allowing for all genepanels to be derived from whole exome data (see Supplemental Table 1).

# SOLiD sequencing

For each patient genomic DNA was isolated from a peripheral blood sample. Subsequently, a sequencing library was prepared from the sheared genomic DNA. Each sequencing library, corresponding with a single patient, received a unique 10 nucleotide barcode allowing a cost-effective approach of ~50 samples per single enrichment procedure. Libraries were pooled and target DNA capture was performed with a custom-designed Agilent SureSelectXT assay containing the ~225 gene panel ('RENome', see Supplemental Table 1). All sequencing acquired an average depth of ~100X horizontal coverage to allow for optimal variant calling.

## Variant calling and filtering

Variant calling and filtering was performed using the Cartagenia BENCHlab NGS module (V.3.1.2), with a validated filtering tree. To exclude common variants, variants were compared with our inhouse database, the Exome Variant (6500 exomes), dbSNP, and GoNL (Genome of the Netherlands) databases. Non-synonymous variants, nonsense variants, essential splice site variants or coding frame-shift insertions or deletions were selected. Variants were subsequently analyzed with in silico prediction programs (a.o. Polyphen2, SIFT, GERP and Grantham scores, and multiple splice-site prediction programs) in the Alamut mutation interpretation software program (V.2.6.0) to determine the possible clinical relevance. All probable pathogenic mutations were independently validated by Sanger sequencing.

### Mosaicism analysis

To determine whether a patient was mosaic for a specific variant, genomic DNA was isolated from a peripheral blood sample and a semi-quantitative Sanger analysis was applied. In this analysis the height and intensity of the Sanger sequencing peak at the genomic location of the variant of interest is compared with those in healthy controls and family members who are proven not to be mosaic for that variant. The relative height and intensity provides an estimation of the mosaicism percentage in white blood cells. In this paper, semi-quantitative Sanger analysis was only performed in peripheral blood, not in any other tissues.

# Supplemental Table 1 - Genes included in the genepanels mentioned in this paper\*, in alphabetical order, per targeted genepanel

FSGS	Nephrotic syndrome and FSGS	Broad renal diseases ('RENome')							
ACTN4	ACTN4	ACE	BBS2	CHRM3	FAM58A	IFT140	NPHP1	SARS2	THBD
APOL1	ADCK4	ACTN4	BBS4	CLCN5	FAN1	IFT172	NPHP3	SCARB2	TMEM138
ARHGAP24	ARHGAP24	ADAMTS13	BBS5	CLCNKA	FAT1	IFT43	NPHP4	SCNN1A	TMEM216
CD2AP	ARHGDIA	ADCK4	BBS7	CLCNKB	FGF23	IFT80	NPHS1	SCNN1B	TMEM231
СҒН	CD151	AGT	BBS9	CLDN16	FGFR1	INF2	NPHS2	SCNN1G	TMEM237
CLCN5	CD2AP	AGTR1	BICC1	CLDN19	FH	INPP5E	NR3C2	SDCCAG8	TMEM67
COL4A3	COQ2	AGXT	BSND	CNNM2	FLCN	INVS	OCRL	SEC63	TRIM32
COL4A4	COQ6	AHI1	C3	COL4A3	FN1	IQCB1	OFD1	SIX1	TRPC6
COL4A5	CUBN	ALDOB	C5orf42	COL4A4	FRAS1	ITGA3	PAX2	SLC12A1	TRPM6
GLA	DGKE	ALMS1	CA2	COL4A5	FREM1	ITGA8	PAX8	SLC12A3	TSC1
INF2	FAT1	ANKS6	CACNA1S	COQ2	FREM2	JAG1	PDSS1	SLC22A12	TSC2
LMX1B	INF2	APOL1	CASR	CPT2	FXYD2	KAL1	PDSS2	SLC2A2	TTC21B
МҮН9	ITGA3	APRT	CC2D2A	CSPP1	G6PC	KCNJ1	PHEX	SLC2A9	TTC8
MYO1E	ITGB4	AQP2	CD151	CTNS	GALNT3	KCNJ10	PKD1	SLC34A1	UMOD
NPHS1	LAMB2	ARHGDIA	CD2AP	CUL3	GALT	KIF7	PKD2	SLC34A3	UPK3A
NPHS2	LMX1B	ARL13B	CD46	CYP24A1	GATA3	KLHL3	PKHD1	SLC37A4	VHL

PAX2	MYO1E	ARL6	CDKN1C	DGKE	GDNF	LAMB2	PLCE1	SLC3A1	WDPCP
TRPC6	NPHS1	ARSA	CEP164	DMP1	GLA	LMX1B	PRKCSH	SLC41A1	WDR19
TTC21B	NPHS2	ATP6V0A4	CEP290	DSTYK	GLIS2	LRIG2	PSAP	SLC4A1	WDR35
WT1	PDSS1	ATP6V1B1	CEP41	DYNC2H1	GPC3	LZTFL1	PTPRO	SLC4A4	WDR60
	PDSS2	АТР7В	CFB	EGF	GRHPR	MET	PYGM	SLC7A9	WNK1
	PLCE1	AVP	CFH	EHHADH	GRIP1	MKKS	REN	SLC9A3R1	WNK4
	PTPRO	AVPR2	CFHR1	EVC	HNF1B	MKS1	RET	SMARCAL1	WNT4
	SCARB2	B9D1	CFHR3	EVC2	HOGA1	МҮН9	ROBO2	SOX17	WT1
	SMARCAL1	B9D2	CFHR4	EYA1	HPRT1	MYO1E	RPGRIP1	STX16	XDH
	TRPC6	BBS1	CFHR5	FAH	HPSE2	NEK1	RPGRIP1L	TCTN1	XPNPEP3
	TTC21B	BBS10	CFI	FAHD2A	HSD11B2	NEK8	SALL1	TCTN2	ZNF423
	WT1	BBS12	CHD7	FAM20A	IFT122	NOTCH2	SALL4	TCTN3	

FSGS=focal segmental glomerulosclerosis,

<sup>\*</sup> The panels in this table are the genepanels our facility offered up to December 2017. Currently all genepanels are derived from whole exome sequencing data, although one can still have only a specific genepanel analyzed to reduce the risk of incidental findings. For the full list of up-to-date whole exome sequencing-derived panels see <a href="https://www.umcutrecht.nl/nl/Ziekenhuis/Professionals/Diagnostiek-aanvragen/Genoomdiagnostiek/Aanvraagformulieren">https://www.umcutrecht.nl/nl/Ziekenhuis/Professionals/Diagnostiek-aanvragen/Genoomdiagnostiek/Aanvraagformulieren</a>