

**Cell Reports, Volume 34**

**Supplemental information**

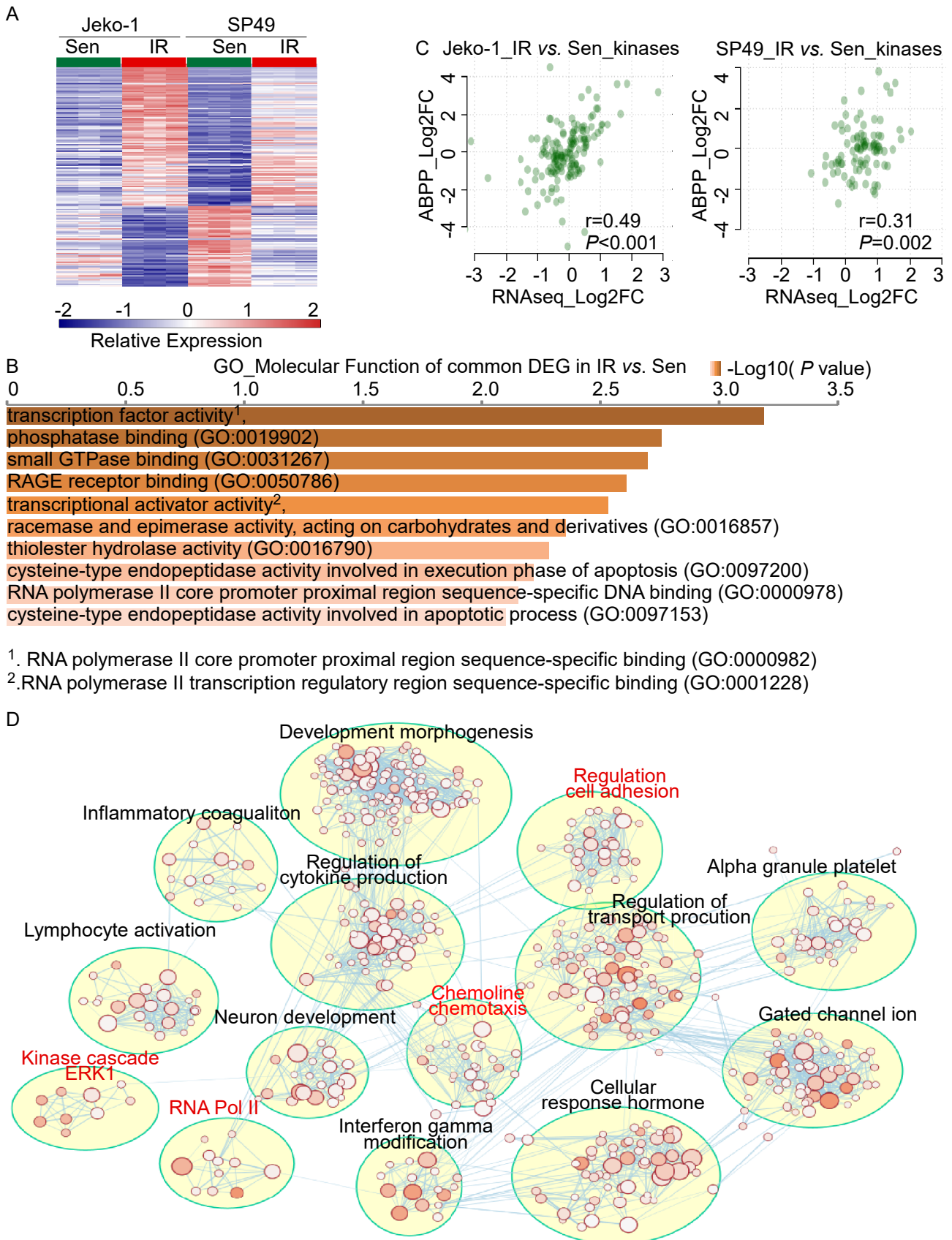
**Transcriptional programming drives**

**Ibrutinib-resistance evolution**

**in mantle cell lymphoma**

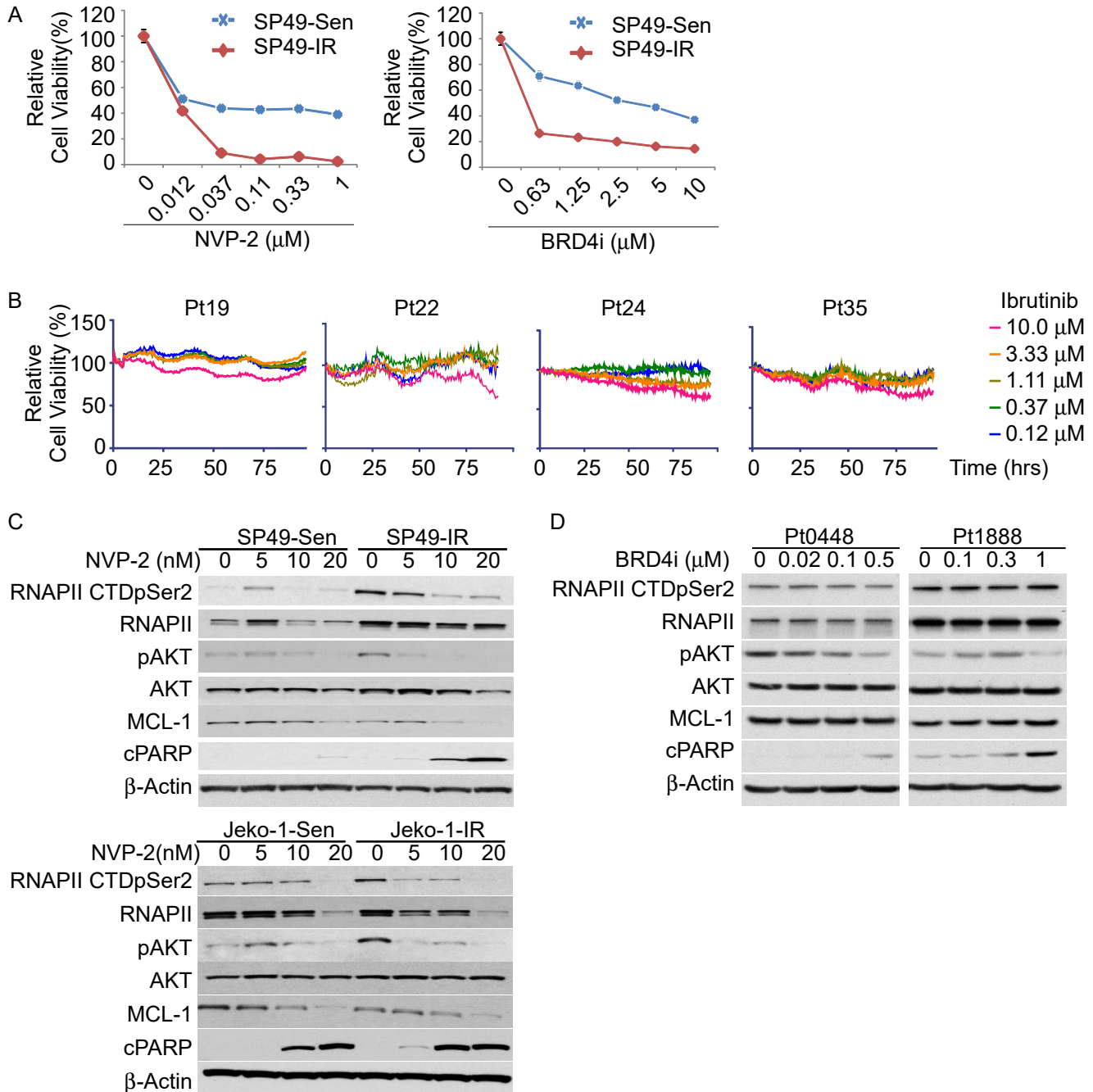
**Xiaohong Zhao, Michelle Y. Wang, Huijuan Jiang, Tint Lwin, Paul M. Park, Jing Gao, Mark B. Meads, Yuan Ren, Tao Li, Jiao Sun, Naima Ahmed Fahmi, Satishkumar Singh, Lalit Sehgal, Xuefeng Wang, Ariosto S. Silva, Eduardo M. Sotomayor, Kenneth H. Shain, John L. Cleveland, Michael Wang, Wei Zhang, Jun Qi, Bijal D. Shah, and Jianguo Tao**

Figure S1



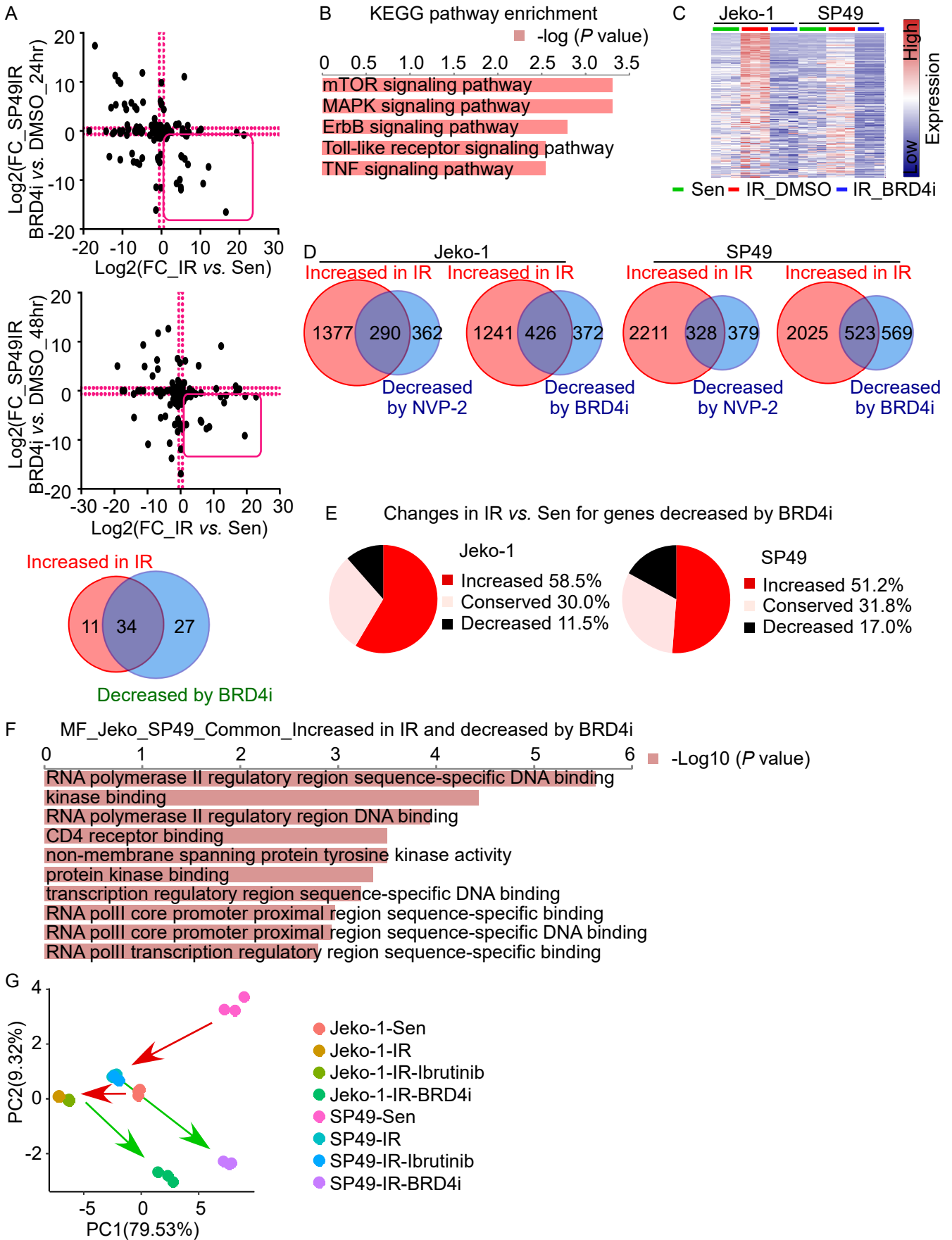
**Figure S1 (Related to Figure 1). Transcriptome Reprogramming Rewires Kinome Signaling in Ibrutinib Resistant (IR) Mantle Cell Lymphoma (MCL).** **A**, Heatmap showing common significant differential gene expression profiles in IR cells (Jeko-1-IR and SP49-IR) vs their Sen parental cell lines in biological triplicate. **B**, GO term Molecular function analysis of common differential expressed genes (from figure S1A). Bar length and top axis represent  $-\log_{10}(P \text{ value})$ . Color bar intensity represents  $-\log_{10}(P \text{ value})$  where the darker colors are indicative of higher significance (lower  $P$  value). **C**, Correlation between differential mRNA expression and kinase activities of IR vs. Sen Jeko-1 and SP49 cells. Log<sub>2</sub> fold change of mRNA and kinase expression between paired IR and Sen Jeko-1 and SP49 cells are shown. RNA-seq data are from triplicate samples and ABPP data are from three or four replicates. **D**, Enrichment map of IR-associated genes in SP49-IR cells. The map displays the enriched gene-sets in SP49-IR cells. Nodes represent gene-sets and edges represent overlap between gene-sets. Gene-sets that did not pass the enrichment significance threshold are not shown. Clusters of functionally related gene-sets were assigned a label using “AutoAnnotate” Add-in in Cytoscape; node color intensity is proportional to enrichment significance, clusters of biological and functional interest for their role in IR are highlighted in red.

Figure S2



**Figure S2 (Related to Figure 2). Ibrutinib Resistant (IR) Mantle Cell Lymphoma (MCL) Cells Are Highly Sensitive to CDK9 Inhibition.** **A**, Cell viability assay shows the dose response of NVP-2 (left) and INCB054329 (right) in paired IR and Sen parental cells. **B**, Drug response assessment of primary MCL specimens treated with the indicated doses of Ibrutinib. **C**, NVP-2 treatment induced more suppression of phosphorylation of the C-terminal repeat domain (CTD) of RNA polymerase II (RNAPII) at the large subunit of RNAPII on Ser2, pAKT, and MCL-1 levels, and induced more PARP cleavage in IR compared to Sen cells. **D**, INCB054329 induced suppression of pAKT and MCL-1 and increased PARP cleavage in primary MCL patient samples (Pt0448, Pt1888). Data in A, C and D are representative of 3 independent experiments.

Figure S3

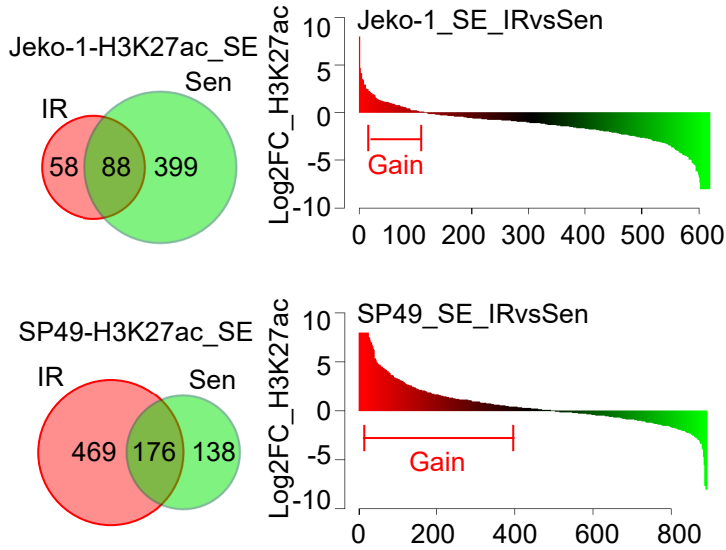


**Figure S3 (Related to Figure 3). CDK9 Is Required to Sustain Transcriptional and Kinase Reprogramming in Ibrutinib Resistant (IR) Mantle Cell Lymphoma (MCL) Cells.**

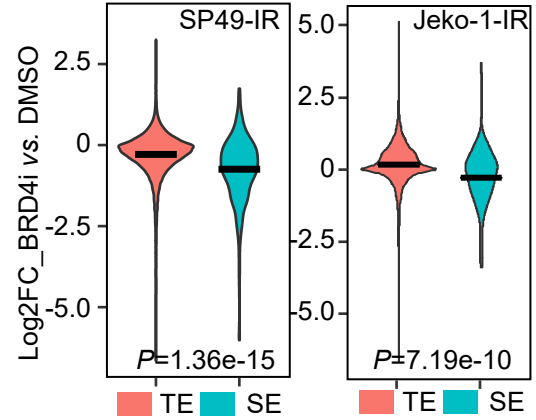
**A**, Fold change in kinase activity in IR vs. Sen SP49 cells (x-axes), and in SP49-IR cells treated with BRD4i INCB054329 (y-axes; 24hrs [top] or 48hr [middle]). Venn diagram at bottom shows the overlap between kinases whose activity is increased in IR cells and decreased by INCB054329 treatment. These overlapped kinases are highlighted by the red box in each scatterplot. Cutoff,  $FC=1.5$ .  $n = 3$  biological replicates. **B**, KEGG pathway enrichment of kinases whose activity is increased in IR compared to Sen MCL cells, and that also decreased by INCB054329 treatment in IR cells. Top axis and bar length represent  $-\log_{10}(P \text{ value})$ . **C**, RNAseq heatmap of genes that are increased in IR compared to Sen and that are decreased by INCB054329 treatment.  $n = 3$  biological replicates. **D**, Venn diagrams show the overlap between IR specific genes and genes decreased by NVP-2 or INCB054329 treatment in IR cells. **E**, Pie chart showing the percentage of gene expression changes (increase/conserved/decrease) in IR compared to Sen cells for INCB054329 decreased genes in IR cells. More than half (58.5% for Jeko-1 and 51.2% for SP49) of the INCB054329 decreased genes are increased in IR cells compared to sensitive cells. **F**, Molecular function enrichment results by Enrichr for genes in (D). Top axis and bar length represent  $-\log_{10}(P \text{ value})$ . **G**, PCA analysis of RNA-seq data showing that IR cells are distinct from Sen cells and that Ibrutinib treated IR cells cluster with IR cells treated with vehicle (DMSO). In contrast, INCB054329 treatment of IR MCL cells provokes a shift towards Sen cell clusters.  $n = 3$  biological replicates.

Figure S4

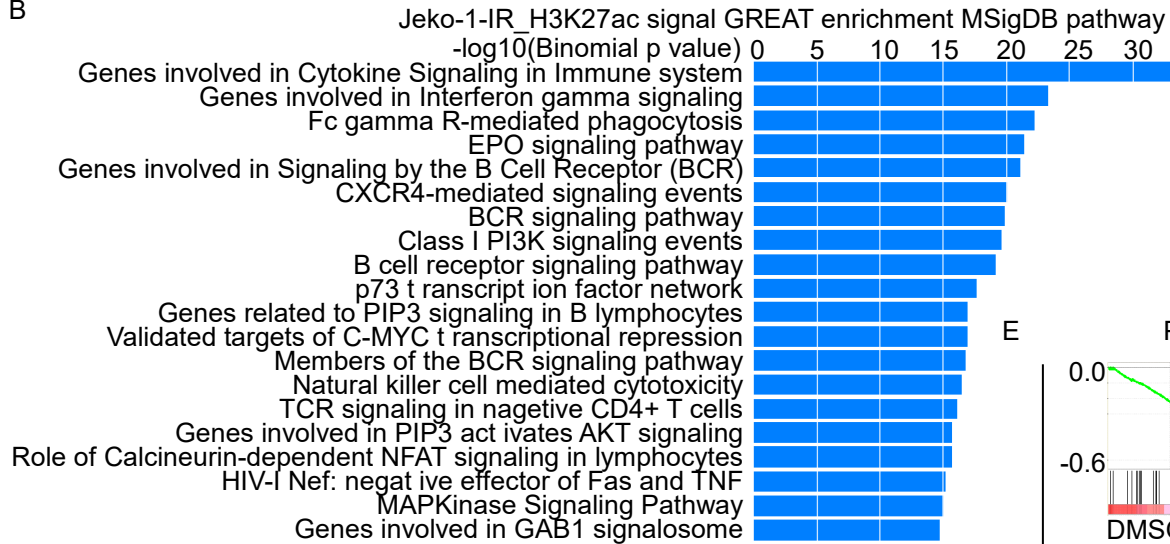
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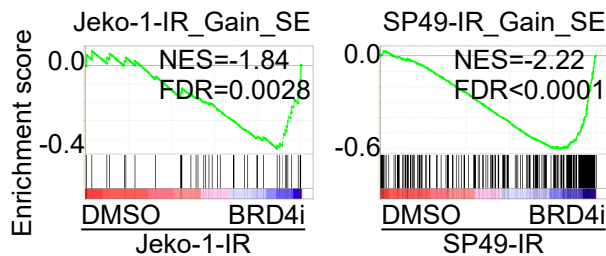
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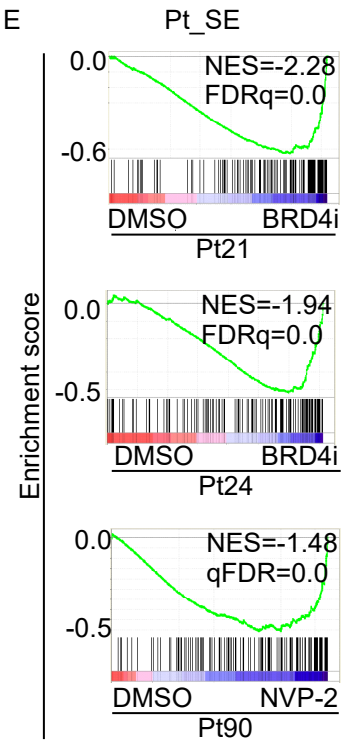
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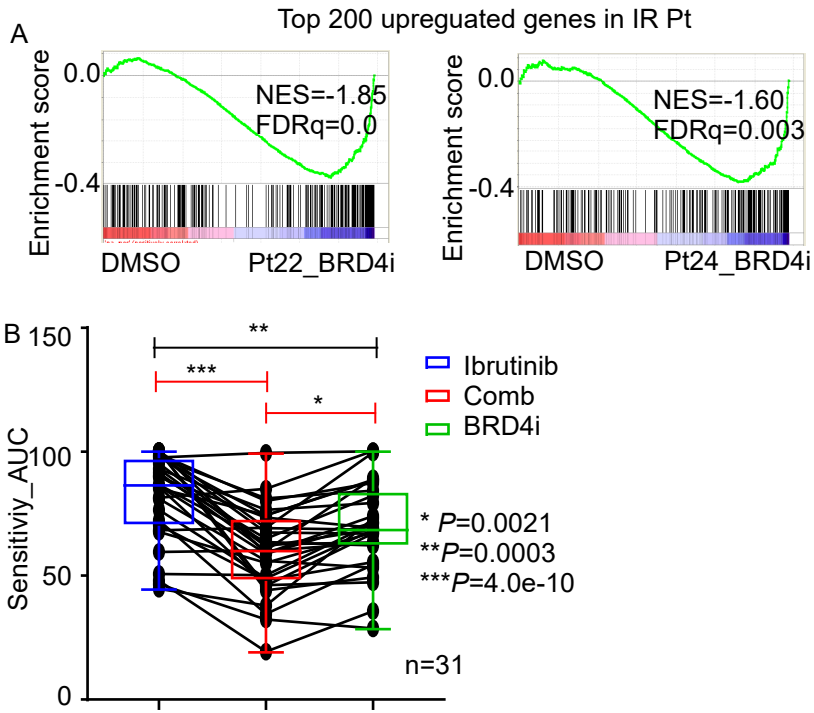
E





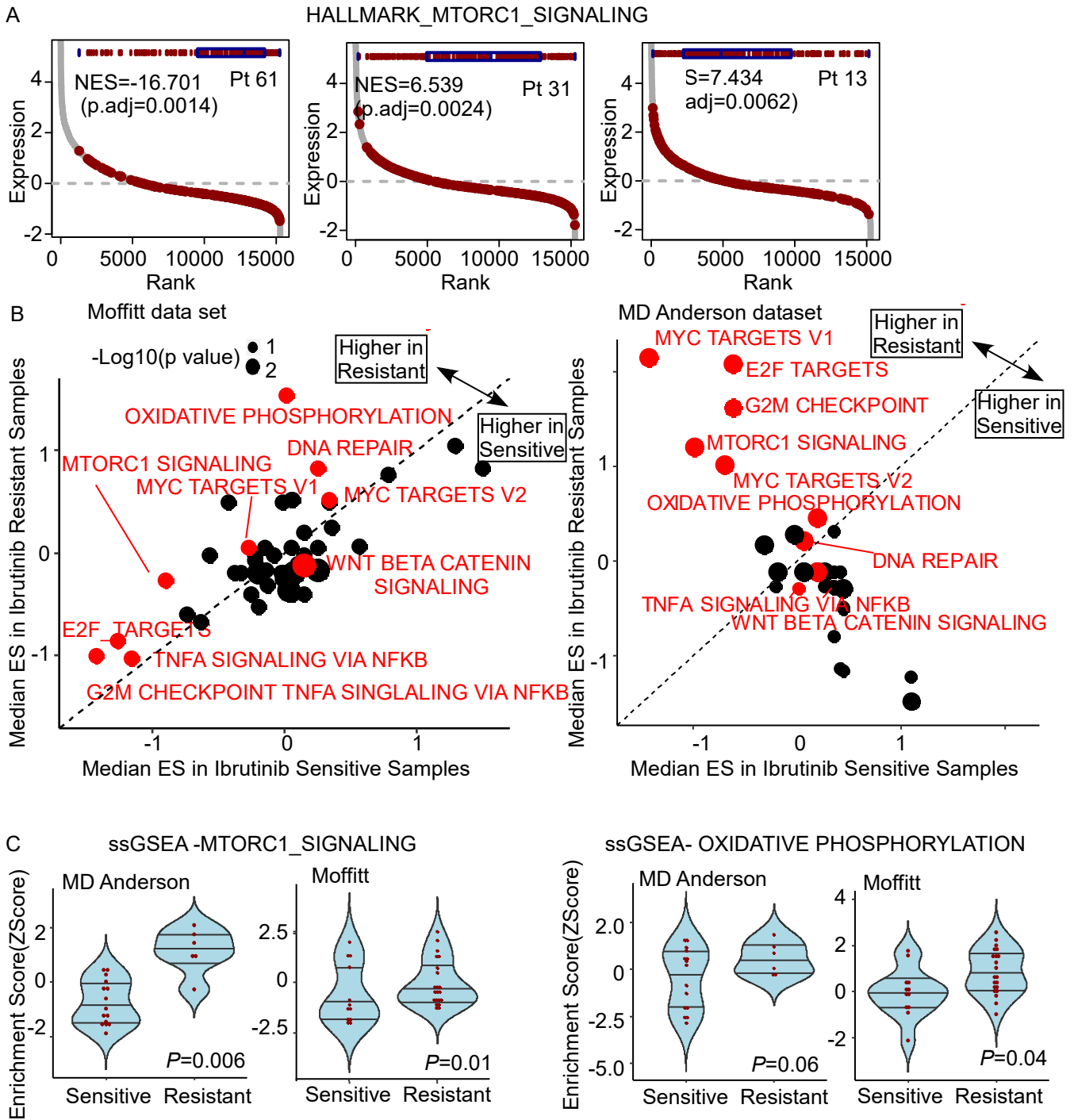
**Figure S4 (Related to Figure 4). Super-Enhancer (SE) Remodeling Drives Transcriptional Programming and Drug Sensitivity to CDK9 Inhibition in Ibrutinib Resistant (IR) Mantle Cell Lymphoma (MCL) lines and Primary Samples. A,** Venn diagram (left) and waterfall (right) plot showing overlap and specific SE in paired IR and Sen parental Jeko-1 (top) and SP49 (bottom) MCL cells. **B,** Genomic Regions Enrichment of Annotations Tool (GREAT) analysis of Jeko-1-IR H3K27ac enrichment. **C,** Gene Set Enrichment Analysis (GSEA) shows gained SE regulated genes are decreased by INCB054329 treatment in Jeko-1-IR and SP49-IR cells. **D,** Box plots showing Log2 fold changes of gene expression following INCB054329 treatment vs. vehicle (DMSO) in Jeko-1-IR and SP49-IR cells. Typical enhancer (TE) or SE associated genes are defined by the density and amplitude of H3K27ac marks from ChIP-seq analyses. Significance was determined using the Kruskal-Wallis test; SP49  $P = 1.36e-15$ ; Jeko-1  $P = 7.19e-10$ . **E,** GSEA shows SE regulated genes are decreased by INCB054329 or NVP-2 treatment in primary IR MCL samples. NES, normalized enrichment score; FDR, false discovery rate.

Figure S5



**Figure S5 (Related to Figure 5). Targeting CDK9 Prevents Emergence and Overcomes Ibrutinib Resistance (IR) in Mantle Cell Lymphoma (MCL) *ex vivo* and *in vivo*.** **A**, Gene Set Enrichment Analysis (GSEA) of differential gene expression shows top 200 upregulated genes in IR primary MCL patient samples are negatively enriched by INCB054329 treatment. NES, normalized enrichment score; FDR, false discovery rate. **B**, Drug response assay of primary MCL patient samples treated with Ibrutinib or INCB054329 alone or the Ibrutinib/INCB054329 combination by AUC measured by cell-based imaging analysis. *P* values were calculated by one-way ANOVA. n = 31 primary MCL patient samples.

Figure S6



**Figure S6 (Related to Figure 6). The EMMA Platform Predicts Clinical Responses and Informs Vulnerabilities in Primary and Ibrutinib Resistant (IR) Mantle Cell Lymphoma (MCL).** **A**, Single-sample gene set enrichment analysis (ssGSEA) of representative primary MCL samples for mTORC1\_SIGNALING Negative enrichment in Ibrutinib sensitive MCL samples (left panel, Pt 61), positive enrichment in IR MCL samples (right panel, Pt 13) and intermediate enrichment (middle panel, Pt 31). **B**, ssGSEA of enriched pathways in IR versus sensitive MCL patients from the MD Anderson (right) and Moffitt (left) datasets were performed, and the resulting enrichment scores were compared between IR and Sen patient groups. The Ibrutinib sensitivity groups were defined by maximal Ibrutinib effect measured by cell-based imaging analysis for Moffitt datasets and clinical response for MD Anderson datasets. Note the red highlighted circles indicate higher enrichment scores for MYC, NF- $\kappa$ B and mTOR pathways in IR MCL patient samples, and higher enrichment scores for WNT and DNA repair pathways in Ibrutinib sensitive MCL patient samples of both datasets. **C**, ssGSEA reveals higher enrichment score for the mTORC1 and OXIDATIVE PHOSPHORYLATION pathway HALLMARK signatures in resistant compared to sensitive primary patient sample for both MD Anderson and Moffitt datasets. Ibrutinib sensitivity groups are defined as in B.