1   **Combinatorial tumor suppressor inactivation efficiently initiates lung adenocarcinoma**
2   **with therapeutic vulnerabilities**
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RUNNING TITLE

Oncogene-negative lung adenocarcinoma: genesis and treatment

CONFLICT OF INTERESTS

S.K.C. receives grant support from Ono Pharma. C.S. acknowledges grant support from Pfizer,

AstraZeneca, Bristol Myers Squibb, Roche-Ventana, Boehringer-Ingelheim, Archer Dx, and Ono

Pharmaceuticals. C.S is an AstraZeneca Advisory Board member and Chief Investigator for the

MeRmaiD1 clinical trial, has consulted for Pfizer, Novartis, GlaxoSmithKline, MSD, Bristol

Myers Squibb, Celgene, AstraZeneca, Illumina, Amgen, Genentech, Roche-Ventana, GRAIL,

Medicxi, Bicycle Therapeutics, and the Sarah Cannon Research Institute, has stock options in

Apogen Biotechnologies, Epic Bioscience, GRAIL, and has stock options and is co-founder of

Achilles Therapeutics. D.A.P. and M.M.W. are founders of, and hold equity in, D2G Oncology

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ABSTRACT

Lung cancer is the leading cause of cancer death worldwide, with lung adenocarcinoma

being the most common subtype. Many oncogenes and tumor suppressor genes are altered in this

cancer type and the discovery of oncogene mutations has led to the development of targeted

therapies and better clinical outcomes. However, a large fraction of lung adenocarcinomas lacks

mutations in known oncogenes, and the genesis and treatment of these oncogene-negative tumors

remain enigmatic. Here, we perform iterative *in vivo* functional screens with quantitative

autochthonous mouse model systems to uncover the genetic and biochemical changes that enable

efficient lung tumor initiation in the absence of oncogene alterations. Through the generation of

hundreds of diverse combinations of tumor suppressor alterations, we demonstrate that

inactivation of suppressors of the RAS and PI3K pathways drive the development of oncogene-

negative lung adenocarcinoma. Pathway-level human genomic data analysis and histology

identified RAS/MAPK and PI3K pathway activation as a common event in oncogene-negative

human lung adenocarcinomas. We demonstrate that oncogene-negative tumors and cell lines

with activated RAS/MAPK and PI3K pathways are vulnerable to pharmacological inhibition of

these signaling axes. Collectively, these results transform our understanding of this prevalent yet

understudied subtype of lung adenocarcinoma.

STATEMENT OF SIGNIFICANCE

Many lung adenocarcinomas do not have mutations in known proto-oncogenes, and as a

result, targeted therapies are unavailable for treating these patients. Here, we uncover driver

pathways in a subset of these oncogene-negative lung adenocarcinomas and demonstrate the

therapeutic value of inhibiting these pathways.

INTRODUCTION

Tumors typically contain driver gene alterations in both proto-oncogenes and tumor

suppressor genes [1]. The classification of cancers based upon their driver oncogenes has

enabled a shift from toxic chemotherapies to less toxic and more effective therapies that often

target the oncogenes [2]. While oncogenes have clear roles in tumor initiation and maintenance

in many cancer types, a significant fraction of tumors lacks identifiable alterations in proto-

oncogenes [3, 4]. Consequently, developing targeted therapies for those tumors remains a major

clinical challenge.

Lung cancer is the leading cause of cancer death worldwide [5]. Lung adenocarcinoma,

the most frequent subtype of lung cancer, has frequent alterations in receptor tyrosine kinase and

RAS/RAF pathway oncogenes, including mutations in *EGFR* and *KRAS* [6]. However,

approximately 30 percent of lung adenocarcinomas are thought to lack a driving oncogene [4, 7,

8]. While oncogene mutations in a very small fraction of these tumors might have been missed

due to technical reasons, recent extensive genomic and transcriptomic studies suggest that

neither technical reasons nor the presence of novel oncogenes likely explain this large and

clinically significant population of lung cancer patients[4-13]. Thus, despite the diagnosis of

more than 150,000 patients per year with oncogene-negative lung adenocarcinomas worldwide,

the events that drive the initiation and growth of these tumors remain almost entirely unknown.

This lack of knowledge has led to the absence of animal models to study this subtype of lung

adenocarcinoma and, more importantly, the lack of drugs to target driver pathway dependencies.

Oncogenes and tumor suppressor genes are parts of broader signaling networks that

generate and sustain the biochemical changes that drive tumor initiation and growth [1, 14-16].

Combinatorial alterations in tumor suppressor genes could co-operate to activate pathways

driving oncogene-negative lung tumors. Genomic analyses of human lung adenocarcinoma have

identified complex patterns of mutations in diverse putative tumor suppressor genes [7].

However, the ability to predict which combinations of genomic alterations drive cancer in the

absence of oncogene activation based on human genomic data alone remains challenging. While

human genomic data can predict combinations of genomic mutations as likely cancer drivers

when the mutations co-occur at very high frequencies [17-20], identifying pathogenic

combinations of less frequently mutated genes poses a nearly insurmountable challenge.

Furthermore, the large numbers of mutations in lung cancers and non-genomic mechanism that

often inactivate tumor suppressor genes, further reduce the ability of human cancer genomic

studies to identify combinatorial alterations that activate drive pathways in lung cancer [21-24].

Determining the specific pathways involved in tumor initiation can be aided by functional

genomic studies in experimental cancer models [25]. Here, we leverage a quantitative mouse

model system to assess the ability of hundreds of combinatorial alterations of tumor suppressor

genes, acting across many different signaling pathways, to generate oncogene-negative lung

tumors *in vivo*. We uncover genetic drivers and pathway-level changes that drive lung cancer in

the absence of oncogene mutations and leverage these findings to identify therapeutic

vulnerabilities.

RESULTS

Clinical features of oncogene-negative and oncogene-positive human lung adenocarcinomas

are broadly similar

To better understand the genomics of lung adenocarcinomas that lack oncogene

mutations, we analyzed data from The Cancer Genome Atlas (TCGA) and AACR Genomics

Evidence Neoplasia Information Exchange (GENIE) [26, 27]. We classified tumors as oncogene-

positive if they had high-confidence oncogenic alterations in previously described proto-

oncogenes, oncogene-indeterminate if they had alterations of unknown significance (variants of

unknown significance, VUS) in known proto-oncogenes, and oncogene-negative if they had no

alterations in known proto-oncogenes (**Methods**). We found that a large fraction (17-18%) of

lung adenocarcinomas had no activating alterations in known proto-oncogenes, consistent with

previous publications (**Figure 1a** and **S1a**) [28-30]. Additionally, 15-27% of lung

adenocarcinomas were oncogene-indeterminate and thus lung adenocarcinomas without known

oncogene mutations accounted for 32-45% of lung adenocarcinoma cases. Patients with

oncogene-negative, oncogene-indeterminate, and oncogene-positive lung adenocarcinomas have

broadly similar mutational burden and clinical characteristics (**Figure S1b-e**).

Combinatorial tumor suppressor gene inactivation enables lung tumor development

Given the widespread genetic and epigenetic alterations in human tumors, genomic analyses have limited ability to delineate causal relationships between genomic alterations and tumor development [1]. To determine whether combinatorial tumor suppressor gene inactivation can drive lung tumor initiation in the absence of oncogene activation, we coupled Cre/*loxP*-based genetically engineered mouse models and somatic CRISPR/Cas9-based genome editing with tumor barcoding and high-throughput barcode sequencing (Tuba-seq) [31-35]. We used Cre/*loxP* to inactivate each of five "core" tumor suppressor genes (*Trp53*, *Lkb1/Stk11*, *Keap1*, *Nf1*, and *Pten)*. These genes operate within diverse pathways and are frequently inactivated in human lung cancers, including oncogene-negative lung adenocarcinomas (**Figure S2a-b**) [35-38]. We used CRISPR/Cas9 to coincidentally inactivate panels of additional tumor suppressor genes in lung epithelial cells in mice with floxed alleles of each of the "core" tumor suppressors, a Cre-reporter allele (*R26^{LSL-Tom}* (*T*) [36])*,* and a Cre-regulated *Cas9* allele (*H11^{LSL-Cas9}* (*C*) [37])*.*

We transduced *Nf1^{f/f};TC, Pten^{f/f};TC, Trp53^{f/f};TC, Lkb1^{f/f};TC, Keap1^{f/f};TC, TC,* and *T* mice with two pre-existing pools of barcoded Lenti-sgRNA/*Cre* vectors that target ~50 putative tumor suppressor genes that we have previously studied in KRAS^{G12D}-driven lung tumors (Lenti-sg*TS*15/*Cre* and Lenti-sg*TS*102/*Cre*; (**Figure 1b, S2c-d**, **S3a**, and **Table S1**) [31, 32, 35]. The mutation frequency of these genes varied, and mutations in some were enriched in oncogene-negative human lung adenocarcinomas (**Table S1) (Figure S2c-d**). The combination of Cre/*LoxP* and CRISPR/Cas9-based genome editing should generate hundreds of combinations of genomic alterations in lung epithelial cells. We previously found that a small percent of lung tumors initiated with Lenti-sgRNA/*Cre* vectors in other lung cancer models contained multiple sgRNAs, consistent with the transduction of the initial cell with multiple Lenti-sgRNA/*Cre*

vectors [31, 32]. Thus, a high titer of Lenti-sgRNA/*Cre* pools in this study increases the potential

of finding higher-order interactions, in addition to pairwise interactions, that increase the growth

advantage of the transduced cells.

One year after transduction with the Lenti-sg*TS15/Cre* or Lenti-sg*TS102/Cre* pools,

Nf1^{f/f};TC, *Pten^{f/f};TC,* and *Trp53^{f/f};TC* mice developed a modest number of tumors (defined as

Tomato^{positive} expansion >0.5 mm in diameter), while *Lkb1^{f/f};TC* and *Keap1^{f/f};TC* mice rarely

developed any tumors (**Figure 1c-d, S3b-c**). Interestingly, *Nf1^{f/f};TC*, *Pten^{f/f};TC,* and *Trp53^{f/f};TC,*

and *TC* mice transduced with the larger Lenti-sg*TS102/Cre* pool developed many more and

larger tumors than the mice transduced with the Lenti-sg*TS15/Cre* pool. These tumors were

positive for TTF1, a marker for lung adenocarcinoma, and negative for P63 and UCHL1,

markers for squamous cell and small cell lung cancer, respectively (**Figure 1e**).

To determine whether some of these tumors contained spontaneous mutations in known

proto-oncogenes, we PCR-amplified and sequenced 10 genomic regions that include the hotspot

oncogenic mutation sites in *Kras, Braf, Nras,* and *Egfr* (**Figure S3d**, **Table S2,** and **Methods**)

[33, 38-46]. Across 29 samples, we detected only one oncogene mutation (a *Kras^{G12V}* mutation in

a tumor from a *Pten^{f/f};TC* mouse). Thus, the majority of these tumors arise in the absence of the

hotspot mutations in the aforementioned proto-oncogenes. This is consistent with the low

mutation rate in mouse models of lung cancer [47] and suggests that the inactivation of

combinations of specific tumor suppressor genes in *Nf1^{f/f};TC*, *Pten^{f/f};TC,* and *Trp53^{f/f};TC* mice

drives the development of lung cancer *in vivo.* Importantly, the overall low number of tumors

indicates that inactivation of the "core" tumor suppressor genes alone, and most combinations of

tumor suppressor genes tested, are insufficient to generate lung tumors.

Identification of top candidate tumor suppressor genes involved in oncogene-negative lung tumor formation

The Lenti-sgRNA/Cre vectors contain two-component barcodes in which an sgID identifies the sgRNA and a random barcode (BC) uniquely tags each clonal tumor. Thus, high throughput sequencing of the sgID-BC region can identify the sgRNA(s) present in each tumor and quantify the number of cells in each tumor (**Figure 1a**). To determine which sgRNAs were present in the largest tumors in mice transduced with Lenti-sg*TS102/Cre* pool, we PCR-amplified the sgID-BC region from genomic DNA from dissected tumors and performed high-throughput sgID-BC sequencing. Most large tumors contained multiple Lenti-sgRNA/*Cre* vectors targeting different tumor suppressors (**Figure S4a-b**). Therefore, we calculated the statistical enrichment of each sgRNA based on their relative representation in the dissected tumors (**Figure 1f** and **S4**, see **Methods**).

To further quantify the impact of inactivating each tumor suppressor gene on clonal expansion of lung epithelial cells, we performed tumor barcode sequencing (Tuba-seq) on bulk DNA from one lung lobe from each *Nf1^(f/f)^;TC*, *Pten^(f/f)^;TC, Trp53^(f/f)^;TC,* and *TC* mouse (**Figure 1c**). Analysis of the number of cells in clonal expansions further nominated tumor suppressor genes that may contribute to tumor initiation and growth (**Figure 1f**, and **S5**). Based on these two analyses, we selected 13 genes for further analysis (**Figure 1f**). The potential importance of these 13 tumor suppressor genes was often supported by both sgRNAs targeting each gene, suggesting on-target effects. Finally, the presence of sgRNAs targeting our "core" tumor suppressors allowed us to cross-validate our screen. For example, Lenti-sg*Pten/Cre* was enriched in tumors in *Nf1^(f/f)^;TC* mice, and Lenti-sg*Nf1/Cre* was enriched in tumors in *Pten^(f/f)^;TC* mice (**Figure 1f** and **S4-5**).

Inactivation of candidate tumor suppressors efficiently generates lung tumors

To determine the potential of the 13 tumor suppressor genes to initiate oncogene-negative

tumors, we generated a pool of Lenti-sgRNA*/Cre* vectors targeting each of these tumor

suppressor genes and one vector with an inert sgRNA (Lenti-sg*TS14/Cre* pool; **Figure 2a**). We

targeted each gene with the sgRNA that produced the most significant effect on tumor growth

and used five times higher titer of each lentiviral vector per mouse than what was used in Lenti-

sg*TS102/Cre* pool, thus increasing the potential for the transduction of the initial cell with

multiple Lenti-sgRNA*/Cre* vectors and detection of higher-order tumor suppressor interactions.

We initiated tumors with Lenti-sg*TS14*/*Cre* in *Nf1^{f/f};TC, Pten^{f/f};TC, Trp53^{f/f};TC, TC,* and

Kras^{LSL-G12D};T (*KT*) mice. Less than four months after tumor initiation, several *Nf1^{f/f};TC* and

Pten^{f/f};TC mice showed signs of extensive tumor burden. These mice developed approximately

four times more tumors than mice of the same genotypes one year after transduction with the

Lenti-sg*TS102/Cre* (compare **Figure 2b-c** with **Figure 1c-d**, and **S10c**). This suggests that these

candidate tumor suppressor genes are enriched for those that generate oncogene-negative lung

tumors.

We performed Tuba-seq on DNA from bulk tumor-bearing lungs to determine the

number and size of each tumor with each barcoded Lenti-sgRNA/*Cre* vector. Inactivation of *Nf1,*

Rasa1, and *Pten* most dramatically increased tumor size and/or tumor number across all mouse

genotypes (**Figure 2d-e**, **S6a-b**, and **Methods**). Inactivation of some of the other ten tumor

suppressor genes less dramatically but significantly increased tumor size and/or tumor number in

a more genotype-specific manner. This suggests that additional molecular pathways altered by

these tumor suppressor genes may also lead to early epithelial expansions.

The largest tumors in *Nf1^{f/f};TC, Pten^{f/f};TC, Trp53^{f/f};TC,* and *TC* mice were frequently

generated through the inactivation of more than two tumor suppressor genes. Vectors targeting

Nf1, Rasa1, and/or *Pten* were often present in the largest tumors, and the coincident targeting of

Nf1, Rasa1, and *Pten* was the most frequent combination (**Figure 2f-g**, **S6c-h**).

To gain greater insight into the contribution of *Nf1, Rasa1,* and *Pten* inactivation to the

generation of oncogene-negative tumors, we transduced *Nf1^{f/f};TC, Pten^{f/f};TC,Trp53^{f/f};TC, TC,*

and *KT* mice with a pool of Lenti-sgRNA*/Cre* vectors that lacked the vectors targeting *Nf1,*

Rasa1, and *Pten (Lenti-sgTS11/Cre)* (**Figure S7a**). Approximately four months after

transduction, these mice had many fewer tumors than mice transduced with Lenti-*sgTS14/Cre*

pool (**Figure S7b-c** and **S10c**). Tuba-seq analysis confirmed a dramatic decrease in tumor burden

relative to mice that received the Lenti-sg*TS14/Cre pool* (**Figure 2h**). Thus, the inactivation of

Nf1, Rasa1, and *Pten* emerged as the most important contributors to the generation of oncogene-

negative lung tumors.

Extensive experiments generating single and pairwise inactivation of several tumor

suppressor genes in individual mice led to the development of very few tumors or hyperplasia

only after mutations of *Nf1-Rasa1, Nf1-Pten,* and *Pten-Rasa1,* even when initiated with high

titers of virus and after long periods of time (**Figure S8-S9**). Thus, single, and pairwise tumor

suppressor gene inactivation is rarely sufficient to generate lung tumors and combinatorial

inactivation of three or more tumor suppressor genes likely increases the efficiency of tumor

development and/or accelerates the growth of oncogene-negative lung tumors.

Combinatorial inactivation of *Nf1, Rasa1,* and *Pten* promotes lung adenocarcinoma

development comparably to oncogenic *Kras* mutation

To dissect the higher-order genetic interactions between *Nf1*, *Rasa1*, and *Pten*, we

transduced *TC* and *Trp53^{f/f};TC* mice with a pool of eight lentiviral vectors that would inactivate

Nf1, Rasa1, and *Pten* individually, in pairwise combinations, and all three simultaneously (Lenti-

sg*TS^{Triple-pool}/Cre*, **Figure 3a**). Three months after tumor initiation, *TC* mice had hundreds of

large tumors that were adenomas and adenocarcinomas (**Figure 3b-c** and **Figure S10a-e**). Tuba-

seq analysis showed that most of the tumor burden arose as a consequence of concomitant

inactivation of all three tumor suppressors, with single and pairwise inactivation of these genes

generating very few tumors consistent with our previous observation in individual mice (**Figure**

3e and **S8**). To compare the tumor initiation potential of combinatorial *Nf1*, *Rasa1*, and *Pten*

mutations with that of a known oncogene, we transduced *Kras^{LSL-G12D};T* (*KT*) mice with Lenti-

sg*TS^{Triple-pool}/Cre* (**Figure 3a**). Strikingly, coincident inactivation of *Nf1, Rasa1,* and *Pten* in *TC*

mice was nearly as potent as oncogenic KRAS^{G12D} in driving lung tumor initiation *in vivo*

(**Figure 3g** and **Methods**). Additional inactivation of *Trp53* in *Trp53^{f/f};TC* mice did not increase

tumor initiation suggesting that *Trp53* is not a major suppressor of oncogene-negative lung

adenocarcinoma at these early stages (compare **Figure 3b-f** and **Figure S10a-h**).

In molecular evolution studies, generating combinatorial genomic alterations and

measuring the fitness of each genotype (growth rate) is often used to infer the possible and the

most probable paths from a wild-type state to a complex genotype [48]. Through the generation

of all the possible combinatorial alterations of *Nf1*, *Rasa1*, and *Pten*, we quantified the fitness

conferred by each mutation and the relative probabilities of different adaptive paths leading from

a wild-type state to the triple mutant genotype (see **Methods**). Our data suggest that inactivation

of these three genes can occur in any order, with each additional alteration further increasing the

fitness (**Figure 3f**). The *Nf1→Rasa1→Pten* mutation sequence emerged as the most probable of

all six possible paths.

Finally, To further analyze tumors driven by inactivation of *Nf1, Rasa1,* and *Pten*, we

initiated tumors in *TC* and *Trp53^{f/f};TC* mice using only the lentiviral vector that targets all three

tumor suppressor genes (Lenti-sg*Nf1*-sg*Rasa1*-sg*Pten*/*Cre*) (**Figure S11a**). In only three months,

these mice developed very large numbers of lung tumors that were almost exclusively lung

adenomas/adenocarcinomas (**Figure S11b-e**). We confirmed the inactivation of *Nf1*, *Rasa1*, and

Pten in these tumors (**Figure S11f**). Whole-exome sequencing uncovered no putative oncogene

mutations and only a few putative tumor suppressor mutations, none of which occurred in more

than one tumor (**Table S3**). Interestingly, at later timepoints after initiation, tumors in

Trp53^{f/f};TC mice progressed into an invasive Nkx2-1^{negative} Hmga2^{positive} state and metastasized to

other organs such as liver similar to what has been reported in KRAS^{G12D};TRP53 mutant lung

adenocarcinoma models (**Figure S12**) [49].

Inactivation of *Lkb1* and *Keap1* reduce initiation of oncogene-negative tumors

In our initial analyses *Lkb1^{f/f};TC* and *Keap1^{f/f};TC* mice rarely developed tumors (**Figure**

1c-d). To directly test the impact of *Lkb1* and *Keap1* inactivation on the ability of combinatorial

inactivation of *Nf1*, *Rasa1*, and *Pten* in generation of oncogene-negative tumors, we initiated

tumors with the Lenti-sg*TS^{Triple-pool}*/Cre pool in *Lkb1^{f/f};TC* and *Keap1^{f/f};TC* mice (**Figure S13a**).

Consistent with our initial observation, *Keap1^{f/f};TC* mice developed many fewer tumors than *TC*

mice (**Figure 1c-d** and **S13b-e**). *Keap1* inactivation reduced tumor number by ~10 fold, while

having almost no effect on tumor size (**Figure S13f**). In contrast, *Lkb1^{f/f};TC* mice transduced

with the Lenti-sg*TS^{Triple-pool}*/Cre pool developed tumors that appeared larger than those in *TC*

mice (**Figure S13b-d**). While *Lkb1^f/f^;TC* mice had approximately the same number of total

neoplastic cells as *TC* mice, *Lkb1^f/f^;TC* mice had greatly reduced tumor number (10-100 fold

depending on the engineered genotype) but increased mean tumor size by ~10 fold (**Figure**

S13e, g). This is consistent with *Lkb1* inactivation being detrimental to initiation and/or very

early growth of this subtype of oncogene-negative lung tumors while greatly increases growth of

a rare subset of these tumors. These findings further underscore the context-specific effects of

tumor suppressor genes across lung adenocarcinoma subtypes.

Oncogene-negative murine lung adenocarcinomas have activated RAS and PI3K pathways

NF1 and RASA1 are negative regulators of RAS, while PTEN is a negative regulator of

the PI3K-AKT pathway. Therefore, we investigated the impact of inactivating these tumor

suppressor genes on RAS and PI3K pathway activation by immunohistochemistry, as well as by

RNA-sequencing (RNA-seq) on FACS-isolated Tomato^positive^ cancer cells. We generated

autochthonous tumors in which *Nf1*, *Rasa1*, and *Pten* were inactivated (*TC* mice with Lenti-

sg*Nf1*-sg*Rasa1*-sg*Pten*/*Cre*; Nf1/Rasa1/Pten tumors), KRAS^G12D^ was expressed (*KT;H11^LSL-Cas9^*

mice with Lenti-sg*Inert*/*Cre*; Kras tumors), or KRAS^G12D^ was expressed and *Pten* was

inactivated (*KT;H11^LSL-Cas9^* mice with Lenti-sg*Pten*/*Cre*; Kras/Pten tumors) (**Figure S14a**, and

Methods).

We examined PI3K and RAS pathway activation by immunohistochemistry on

Nf1/Rasa1/Pten and Kras/Pten tumors. Nf1/Rasa1/Pten tumors had positive staining for pERK

(indicative of RAS pathway activation) and pAKT (indicative of PI3K pathway activation)

(**Figure 4a**). Compared with Kras/Pten tumors, the average pERK staining in Nf1/Rasa1/Pten

tumors was less intense and pAKT staining was similar (**Figure 4b-c**). To compare the

expression of genes downstream of the RAS and PI3K-AKT pathways in Nf1/Rasa1/Pten and

KRAS^{G12D}-driven tumors, we performed single-sample gene set variation analysis (ssGSVA) to

derive enrichment scores for individual tumors based on previously reported gene sets

representing RAS and PI3K-AKT regulated genes [50, 51]. Compared with Kras/Pten tumors,

Nf1/Rasa1/Pten tumors had lower RAS pathway gene signature scores **(Figure S14b)**. PI3K-

AKT pathway gene signature scores were similar in Nf1/Rasa1/Pten and Kras tumors **(Figure**

S14c). Interestingly, the rare tumors that eventually developed after pairwise inactivation of *Nf1*,

Rasa1, and *Pten* also had strong activation of RAS and PI3K pathways (**Figure S8 and S14d**).

This indicates pathway-level biochemical changes, necessary for tumor development, can be

acquired either through combinatorial alterations of *Nf1*, *Rasa1*, and *Pten* in a short period of

time, or through pairwise alterations of these genes and other unknown factor(s) over longer time

periods.

Oncogene-negative human lung adenocarcinomas frequently have activation of RAS and

PI3K pathways

To investigate the activation of RAS and PI3K pathways in human oncogene-negative

lung adenocarcinomas, we analyzed oncogene-negative (N=35) and oncogene-positive (N=18)

lung adenocarcinomas. Immunohistochemistry for pERK and pAKT showed that the average

RAS pathway activation was lower, while PI3K pathway activation was similar in oncogene-

negative tumors compared with oncogene-positive tumors, which is consistent with our

observations from our mouse models (**Figure 4d-g** and **S14e-j**). Over 90% of oncogene-

negative human tumors had moderate to strong activation of either the RAS or PI3K pathways,

while ~45% of these tumors had moderate to strong activation of both RAS and PI3K pathways

(**Figure 4h**).

These tumors were genomically characterized by Stanford's Solid Tumor Actionable

Mutation Panel (STAMP)[52]. However, activation of the RAS and PI3K pathways were rarely

explained by mutations in *NF1*, *PTEN*, or other genes profiled by STAMP (**Table S5 and S6**).

This could be due to the noncomprehensive gene panel characterized by STAMP (only 16 out of

49 RAS pathway-related genes and 8 out of 20 PI3K pathway related genes are partially or fully

analyzed by STAMP) or the presence of additional unknown genetic and/or epigenetic

mechanisms of RAS and PI3K pathway activation.

To assess oncogene-negative lung adenocarcinomas in TCGA and GENIE for genomic

alterations that could potentially lead to the activation of RAS and PI3K pathways, we queried a

set of well-established negative regulators of the RAS and PI3K pathways for alterations in

oncogene-negative tumors in TCGA and GENIE datasets (see **Methods** and **Table S6**).

Consistent with activation of RAS and/or PI3K pathways in a large fraction of oncogene-

negative lung adenocarcinomas, over 60% of oncogene-negative lung adenocarcinomas in

TCGA had alterations in either the RAS or PI3K pathways, and 22% of these tumors had

alterations in components of both pathways (**Figure 4i**). These frequencies were lower in the

GENIE dataset, likely because only a fraction of the known genes in these two pathways were

analyzed (**Figure S15a**).

Consistent with previous reports, *NF1* and *RASA1* alterations were enriched in oncogene-

negative tumors; however, coincident alterations in *NF1*, *RASA1*, and *PTEN* were rare,

supporting the importance of pathway-level analysis of human genomic data (**Figure S15b-c**)

[53, 54]. Considering previous reports on epigenetic silencing and other non-genomic

mechanism of inhibiting tumor suppressor genes such as *PTEN* [22, 23, 55, 56] , we performed

immunohistochemistry for PTEN on 20 oncogene-negative lung adenocarcinomas that did not

have genomic PTEN mutations. Consistent with previous reports, we observed low PTEN

protein levels in 13 out of 20 of these tumors (**Figure S15d-i**) [22]. These observations support a

model in which activation of the RAS and PI3K pathways can be generated by diverse genomic

and/or epigenetic alterations.

Finally, we assessed whether oncogene-negative tumors in our mouse model exhibit

transcriptional features that overlap with those of oncogene-negative human lung

adenocarcinoma. We generated a gene expression signature of oncogene-negative tumors

comprised of genes that are higher in Nf1/Rasa1/Pten tumors relative to Kras tumors in mice. We

then calculated gene signature activity scores for each TCGA lung adenocarcinoma tumor on the

basis of our mouse-derived oncogene-negative gene expression signature using single-sample

GSEA (**Table S4**). Interestingly, upon stratification of TCGA patients on the basis of whether

they harbor oncogene mutations, we found that our oncogene-negative signature was highest in

oncogene-negative human lung adenocarcinomas relative to lung adenocarcinomas driven by

oncogenic *KRAS* or other known oncogenes (**Figure 4j**).

Collectively these data indicate that the molecular and biochemical state of

Nf1/Rasa1/Pten mouse tumors recapitulates that of a substantial fraction of oncogene-negative

human lung adenocarcinomas. These observations underscore the value of *in vivo* functional

genomics in identifying the biochemical changes that drive human tumor development.

Oncogene-negative lung tumors are vulnerable to inhibition of RAS and PI3K-AKT

pathways

Understanding the biochemical changes that drive tumor development can nominate

potential therapeutic strategies [38]. To investigate the therapeutic benefit of targeting key nodes

in oncogene-negative lung cancer, we initiated tumors in *TC* mice with a smaller pool of

barcoded sgRNA viral vectors targeting *Nf1*, *Rasa1*, and *Pten*. We treated these mice with the

SHP2 inhibitor RMC-4550 [57], AKT1/2 inhibitor capivasertib [58, 59], or a combination of the

two (**Figure 5a** and **S16a-b**). These drugs were chosen based on their ongoing clinical

development and ability to reduce activation RAS and PI3K pathways [57, 59].

Direct fluorescence imaging and histology indicated that SHP2 inhibition and combined

SHP2 and AKT1/2 inhibition greatly reduced tumor burden (**Figure 5b-c** and **S16c**). Tuba-seq

analysis provided greater insights into the overall and genotype-specific responses of tumors to

the therapeutic interventions. Capivasertib monotherapy was ineffective while RMC-4550

reduced the total tumor burden. While the inefficiency of capivasertib could have been due to

incomplete target inhibition the combination of RMC-4550 and capivasertib trended towards

being the most efficient therapeutic approach reducing tumor burden by ~24-34% compared with

RMC-4550 alone capivasertib monotherapy was ineffective, while RMC-4550 and the

combination of RMC-4550 and capivasertib reduced the total tumor burden significantly, with

the combination therapy trending towards being the most efficient therapeutic approach (~24-

34% reduction in tumor burden in combination therapy compared with RMC-4550 alone)

(**Figure 5d, S16d-g**).

We confirmed the inhibition of RAS and PI3K pathways in lung tumors in mice treated

with RMC-4550 and capivasertib by immunohistochemistry (**Figure S16h**). Furthermore, global

gene expression analysis confirmed the downregulation of RAS and PI3K-AKT gene expression

signatures after coincident SHP2 and AKT1/2 inhibition (**Figure S17a-d**). Treated tumors tended

to have higher expression of an apoptosis gene expression signature and lower expression of a

G2/M gene expression signature, suggesting that this combination treatment induces broad

cellular changes in oncogene-negative tumors (**Figure S17e-f**).

Inhibition of SHP2 and AKT synergizes to reduce the growth of lung adenocarcinoma cell

lines

405   To more extensively characterize the responses to these SHP2 and AKT inhibitors, we

generated a panel of *Nf1/Rasa1/Pten* deficient cancer cell lines from tumors initiated with Lenti-

sg*Nf1*-sg*Rasa1*-sg*Pten*/*Cre* in *Trp53*$^{flox/flox}$;*TC* mice (**Figure 6a** and **S18a-b**). As anticipated,

RAS and PI3K signaling was reduced in response to treatment with RMC-4550 and capivasertib,

respectively (**Figure S18c**). RMC-4550 and capivasertib each decreased the overall growth of

three oncogene-negative cell lines in a dose-dependent manner (**Figure 6b** and **S18d, f**).

Consistent with our *in vivo* observations, RMC-4550 and capivasertib synergized to inhibit the

growth of oncogene-negative lung adenocarcinoma cell lines (**Figure 6c,** and **S18e, g**). RAS and

PI3K signaling can promote cell growth and survival [58, 59], and RMC-4550 and capivasertib

inhibited proliferation and induced apoptosis to a greater extent than either RMC-4550 or

capivasertib alone (**Figure 6d-e**). RMC-4550 and capivasertib treatment also leads to regression

of subcutaneous allografts generated from these mouse oncogene-negative cell lines (**Figure 6f-g**

and **S18h-j**).

418   Building on these findings, we assessed activation of RAS and PI3K pathways and driver

pathway vulnerabilities in two oncogene-negative human lung adenocarcinoma cell lines, NCI-

H1838 (*NF1*^{LOF}) and NCI-H1623 (*RASA1*^{LOF}). H1838 and H1623 had activation of RAS and

PI3K pathways similarly to oncogene-positive human lung adenocarcinoma cell lines (**Figure**

S18k). Consistent with our findings in mouse oncogene-negative cell lines, RMC-4550

synergizes with capivasertib to inhibit the growth of these oncogene-negative human lung

adenocarcinoma cell lines (**Figure 6h-i and S18l-m**). Collectively, these *in vivo* and cell culture

analyses indicate that oncogene-negative tumors with activated RAS and PI3K pathways are

vulnerable to therapeutic inhibition of these pathways.

DISCUSSION

Lung adenocarcinomas that lack defined oncogene alterations afflict as many patients as

those driven by either oncogenic KRAS or EGFR. To identify whether combinatorial

inactivation of multiple tumor suppressor genes can drive the initiation and growth of lung

adenocarcinoma in the absence of oncogene activation, we performed a series of multiplexed *in*

vivo functional genomic screens. By querying an extensive set of combinatorial tumor suppressor

gene alterations, we discovered that inactivation of single tumor suppressor genes, as well as

pairwise alteration of the majority of tumor suppressors that we assessed, are insufficient to

generate lung tumors. Importantly, we uncovered higher-order interactions between tumor

suppressor genes as key drivers of oncogene-negative lung adenocarcinomas, with combinatorial

inactivation of *Nf1, Rasa1,* and *Pten* being as potent as oncogenic *Kras^{G12D}* in initiating lung

tumors *in vivo.*

Mutations in *NF1*, *RASA1,* and *PTEN* are not strictly mutually exclusive with oncogene

alterations in human lung adenocarcinoma, and their inactivation increases initiation and/or

growth of *Kras^{G12D}*-driven lung tumors [35, 60, 61]. Furthermore, while *NF1* inactivation is

sometimes suggested to be an "oncogenic driver" in lung adenocarcinoma [7, 29, 62], *Nf1*

inactivation alone is insufficient to initiate lung tumors (**Figure S8**). Coincident mutations in

NF1 and *RASA1* are mutually exclusive with other oncogene alterations [53, 54]. However,

pairwise alterations of *Nf1* and *Rasa1* and all other tumor suppressor genes that we tested

generated very few tumors even after long time periods. The potent generation of lung

adenocarcinomas after combinatorial inactivation of *Nf1*, *Rasa1*, and *Pten* suggests that genomic

and/or non-genomic alterations in multiple genes within and across pathways may be required to

surpass the thresholds necessary for tumor initiation and growth. We speculate that these

thresholds may also be influenced by tumor suppressor genes independent from RAS and PI3K

pathways, as well as by environmental factors.

Although cancers harbor diverse genomic and epigenomic alterations, these alterations

often converge on key pathways and generate similar biochemical changes [15, 63]. For

example, myeloid leukemia can be driven by gain-of-function mutations in *KRAS*, *NRAS*, or the

receptor tyrosine kinase *FLT3*, or combined inactivation of multiple negative regulators of RAS

pathway such as *SPRY4* and *NF1* [64, 65]. In contrast to pathway activation generated by

oncogene alterations, pathway activation through inactivation of tumor suppressors, can be very

diverse, precluding the identification of obvious genomic drivers from gene-centric analysis of

human cancer genomic data. Although coincident inactivation of *NF1, RASA1*, and *PTEN* is rare

in human oncogene-negative lung tumors, mutations in different genes that converge on the RAS

and PI3K pathways frequently co-occur in oncogene-negative lung adenocarcinomas (**Figure 4i**

and **S15a**). Furthermore, activation of the RAS and PI3K pathways in human oncogene-negative

lung adenocarcinoma is likely not driven exclusively by genomic alterations in these two

pathways, consistent with previous reports and our observations suggesting non-genomic or

other mechanisms of downregulation of RAS GAPs and PTEN (**Figure 4f-h**) [7, 23, 55, 56]. For

example, *PTEN* is mutated in less than 6% of lung adenocarcinomas but is downregulated in up

to a quarter of early-stage lung adenocarcinomas through promoter methylation [22, 24]. We also

observed low levels of PTEN, in the absence of genetic mutations, in more than half of the

oncogene-negative human lung adenocarcinomas (**Figure S15i**). Thus, despite the ease of DNA

sequencing, genomic alterations should serve as a floor, not a ceiling, in estimating the frequency

of pathway alteration.

473   Selection for molecular alterations during cancer evolution is a non-random and tightly

constrained process that is strongly influenced by molecular network interactions [66]. The

mouse models that we employed are uniquely able to quantify the likely trajectory of selection

for alterations that could lead to the driver pathway activation and their possible evolutionary

paths. Our data suggest that inactivation of *Nf1*, *Rasa1*, or *Pten* each increases cellular fitness,

thus making each next step more likely **(Figure 3f** and **S10g).** Interestingly, within other

evolutionary systems, this is not always the case, and generation of complex genotypes can be

constrained [48, 67-70]. Moreover, given multiple components of RAS and PI3K pathways,

single or combinatorial alterations of many of these components in human lung epithelial cells

might enable diverse paths toward cellular transformation (**Figure 6j**).

483   In this study, we assessed the ability of hundreds of complex tumor suppressor genotypes

to generate lung tumors. While activation of RAS and PI3K pathway emerged as the most potent

driver of oncogene-negative lung adenocarcinomas, our data also suggest that combinatorial

inactivation of tumor suppressor genes outside these two pathways likely has the ability to

initiate tumorigenesis (**Figure 2** and **S6**). Given the mutational diversity and complexity of

oncogene-negative human lung adenocarcinomas [71], there also remain many other mutational

combinations to be investigated. Furthermore, in contrast to previous studies, we did not observe

the emergence of lung squamous cell carcinoma as a result of inactivation of *Lkb1* and *Pten* [72],

the generation of lung adenocarcinoma after inactivation of *Keap1* and *Pten* (**Figure S13**)[73], or

development of small cell lung cancer as a result of *Trp53* and *Rb1* inactivation (**Figure 1e**) [20].

These differences could be driven by the different tropisms of adenoviral vectors (used in all the

studies mentioned above) versus lentiviral vectors (used in our study) [74, 75] and/or lower titer

of individual lentiviral vectors targeting each gene in our screens. Thus, functional genomic

studies across different lung epithelial cell types may be important to comprehensively

understand the genesis and progression of different subtypes of lung cancer including squamous

and small cell lung cancer.

Knowledge of the genes underlying human cancers is a pillar of cancer diagnostics,

personalized medicine, and the selection of rational combination therapies. Our data demonstrate

pathway activation in the absence of oncogene mutations in a sizable fraction of human lung

adenocarcinoma and document the feasibility of treating oncogene-negative lung

adenocarcinomas in mouse and human oncogene-negative lung adenocarcinoma cell lines, and

mouse models using inhibitors that are already being tested clinically. Thus, biochemical

assessment of oncogenic pathways in tumors is a strong foundation for rational selection of

therapies and clinical trial designs. Beyond SHP2 and AKT, extensive efforts have generated

inhibitors for many other components of the RAS and PI3K pathways. Thus, further

investigation of the therapeutic targeting of key nodes within the RAS pathway (*e.g.,* SOS,

MEK, ERK) and PI3K pathway (*e.g.,* PI3K, mTOR), could contribute to the development of the

most effective and least toxic therapies.

Our model and findings enable a detailed analysis of tumorigenic mechanisms and

clinical manifestations of oncogene-negative lung adenocarcinomas, help to identify biomarkers

and new therapeutic targets, and aid in preclinical testing of drugs for the treatment of these

tumors. Generating comprehensive molecular and pharmacogenomic maps of oncogene-negative

lung adenocarcinomas will transform our basic and translational understanding of this prevalent

cancer subtype.

ACKNOWLEDGEMENTS

We thank the Stanford Shared FACS Facility for flow cytometry and cell sorting

services, the Stanford Veterinary Animal Care Staff for expert animal care, Human

Pathology/Histology Service Center, Stanford Protein and Nucleic Acid Facility; A. Orantes and

S. Mello for administrative support; Stanford's Molecular Genetic Pathology Laboratory and

Henning Stehr for their help in providing genetically profiled tumor tissues. David Feldser,

Joseph Lipsick, Eric Collisson, Christopher McFarland, and members of the Winslow and Petrov

laboratories for helpful discussions and reviewing the manuscript. We thank Florent Elefteriou

and Alejandro Sweet-Cordero for providing mouse strains. M.Y. was supported by a Stanford

University School of Medicine Dean's fellowship, an American Lung Association senior

research training grant, and an NIH Ruth L. Kirschstein National Research Service Award (F32-

CA236311). G.B., H.C., and J.D.H. were supported by a Tobacco-Related Disease Research

Program (TRDRP) Postdoctoral Fellowships (T31FT-1772, 28FT-0019, and T31FT-1619).

C.W.M. was supported by the NSF Graduate Research Fellowship Program and an Anne T. and

Robert M. Bass Stanford Graduate Fellowship. W-Y.L. was supported by an American

Association of Cancer Research Postdoctoral fellowship (17-40-18-LIN). C.L. was the Connie

and Bob Lurie Fellow of the Damon Runyon Cancer Research Foundation (DRG-2331). E.L.A

and C.I.C were supported by PHS Grant Number CA09302, awarded by the National Cancer

Institute, DHHS. E.L.A. was also supported by HHMI Gilliam Fellowship for Advanced Study

(GT14928). This work was supported by NIH R01-CA231253 (to M.M.W and D.A.P), NIH

R01-CA230919 (to M.M.W.) and NIH R01-CA234349 (to M.M.W and D.A.P.), as well as by

the Stanford Cancer Institute, an NCI-designated Comprehensive Cancer Center.

METHODS

Analysis of human lung adenocarcinoma datasets

Somatic mutation data (SNPs and indels, including silent mutations) for 513 TCGA lung

adenocarcinoma (LUAD) tumors were downloaded from the UCSC Xena Browser

(http://xena.ucsc.edu/) (Link 1 below). TCGA-LUAD clinical and exposure data were

downloaded from the GDC Data Portal (https://portal.gdc.cancer.gov/projects/TCGA-LUAD)

and the UCSC Xena Browser (Link 2 below). GISTIC2 thresholded copy number variation

(CNV) data were downloaded from the UCSC Xena Browser (Link 3 below). Amplifications

were defined as "2" and deletions as "-2". Genes with conflicting CNV values within a single

tumor were ignored. Fusion data were obtained from [76]. Fusion and CNV data were filtered to

include only data from the 513 samples within the somatic mutation set. Duplicate fusions were

collapsed into single fusions. MET-exon skipping data were taken from [77]. Curated survival

data from [78] were downloaded from the UCSC Xena Browser (Link 4 below).

Links:

1. https://tcga.xenahubs.net/download/mc3/LUAD_mc3.txt.gz

2. https://tcga.xenahubs.net/download/TCGA.LUAD.sampleMap/LUAD_clinicalMatrix

3. https://tcga.xenahubs.net/download/TCGA.LUAD.sampleMap/Gistic2_CopyNumber_Gi

stic2_all_thresholded.by_genes.gz

4.   https://tcga.xenahubs.net/download/survival/LUAD_survival.txt.gz

Data from AACR Project GENIE (hereinafter referred to as GENIE) v8 were downloaded

from https://www.synapse.org/#!Synapse:syn22228642 [78], specifically: somatic mutations,

copy number alteration (CNA) data, fusion data, panel information (genomic_information.txt),

and clinical data (both sample- and patient-level). All data were filtered to only include LUAD

tumors. A single tumor was kept for patients with multiple different tumor samples, with priority

for earlier sequenced samples and those from primary tumors. If tumor samples appeared

identical within the clinical meta-data, the related patient data were excluded.

Determination of oncogenes

To have a conservative estimate of the fraction of lung adenocarcinomas without known

oncogenic drivers (oncogene-negative tumors), we generated a list of oncogenes that included

any gene that met at least one of these criteria: 1) Genes that have hotspot mutations or specific

alterations where cancers or cancer cells with that mutation respond to therapies targeted to the

protein product of that mutant gene in patients, 2) The particular alteration in that gene can

generate lung adenocarcinoma in genetically-engineered mouse models, 3) The altered gene can

generate tumors in other tissues in genetically-engineered mouse models, and 4) Alteration of the

indicated gene can lead to the transformation of cells or predicts response to targeted therapies *in*

vitro. Additionally, we excluded genes if their supposed oncogenic alterations co-occur with

alterations in other proto-oncogenes (**Table S1**) in more than 50% of cases.

Classification of mutations and tumors

582   Mutations (somatic mutations, fusions, CNVs, and MET exon skipping [TCGA only])

583 were classified as within proto-oncogenes (described above) or not. Mutations within these

584 proto-oncogenes were classified as "accepted oncogenic" mutations if those alterations met at

585 least one of the criteria described above. Any tumor with one accepted oncogenic alteration was

586 classified as "*oncogene-positive*". Tumors with accepted oncogenic mutations in more than one

587 gene were classified as "multiple oncogenes mutated". Any tumor with alterations in a proto-

588 oncogene that was not considered an accepted oncogenic alteration based on the four criteria

589 above was classified as "*oncogene-indeterminate*". Thus, these tumors contain variants of

590 unknown significance (VUS) in proto-oncogenes [79]. The remaining tumors, without any

591 mutations in any proto-oncogene, were classified as "*oncogene-negative*".

592 Tumor type counts per database:

593 **TCGA** (Total: 513, Oncogene-negative: 91, Oncogene-positive: 283, and Oncogene-

594 indeterminate: 139)

595 **GENIE** (Total: 9,099, Oncogene-negative: 1,645, Oncogene-positive: 6,041, Oncogene-

596 indeterminate: 1,413)

597   Oncogene-positive tumors were further classified by the type of oncogenic mutation they

598 had (**Figure 1a** and **S1a**).

600 **Clinical characteristics**

601   We divided patients into males or females based on the sex reported by either TCGA or

602 GENIE, if provided. For TCGA, the arithmetic mean for age at diagnosis was computed and

603 reported with a standard error of the mean (SEM). Non-smokers were defined as having tobacco

604 smoking history values of 1 (see public ID 2181650 at https://cdebrowser.nci.nih.gov), while

smokers were defined as anything > 1 (current or reformed smokers). The arithmetic mean pack-

years smoked for smokers, if reported, was described, along with SEM.

Pan-cancer tumor suppressor genes

We generated a list of tumor suppressor genes based on two previously published reports

to compare the number of altered tumor suppressor genes in oncogene-negative tumors with

oncogene-positive and oncogene-indeterminate tumors [15, 80]. We manually removed genes

with conflicting evidence as a tumor suppressor gene in LUAD. The final list of TSGs is in

Table S1.

Calculation of mutation frequencies and absolute number of genes mutated

In general, mutation frequencies for a given gene were calculated as the number of

tumors with that gene mutated, divided by the number of tumors screened for mutations in that

gene (for TCGA: all tumors were screened for all genes, for GENIE: the panel sequencing

information was obtained from genomic_information.txt to determine which tumors were

screened for which genes). Mutation frequencies were calculated for point mutations (PM),

insertion/deletions (indels), and deletions separately. Additionally, the frequency for a

combination of PMs, indels, and deletions was also calculated. The screened set of tumors in

GENIE for the latter included only those tumors which were screened for both PMs/indels as

well as CNVs for each gene. Reported in **Figure S2b** are oncogene-negative tumors with either

point mutations, indels, or deletions in the indicated gene. In **Figure S2c-d**, for each gene, a ratio

of enrichment of mutations in oncogene-negative over oncogene-positive tumors was calculated

as:

$$\frac{\text{mutation frequency}_{\text{oncogene-negative}}}{\text{mutation frequency}_{\text{oncogene-positive}}}$$

The *p*-values for enrichments were calculated using the two-sided Fisher's Exact test as implemented by SciPy. For a given set of genes with at least a single tumor screened, the false discovery rate (FDR) was calculated using the Benjamini-Hochberg method on the Fisher's Exact *P*-values.

To measure the total number of genes mutated (**Figure S1d**), a gene was considered mutated if it had at least one point mutation or indel. All these mutations in a tumor were collated, and the number of the unique set of genes was counted as the total number of genes mutated. For counting the number of individual tumor suppressors mutated (**Figure S1e**), deletions were also included, and the list of pan-cancer tumor suppressors as defined above was used. The Mann-Whitney U test was conducted on the number of respective genes mutated in either oncogene-negative or oncogene-positive tumors.

Survival Analysis

Survival data from [78] were obtained as described above. Kaplan-Meier analysis was performed to estimate probability curves for overall survival (OS) and disease-specific survival (DSS). The logrank test was used to compare oncogene-negative and oncogene-positive tumors.

Gene and pathway alteration co-occurrences

For analysis of simultaneous pairwise alterations of *NF1*, *RASA1*, or *PTEN* within oncogene-negative tumors, we determined the number of tumors with no mutation in *NF1*, *RASA1*, or *PTEN,* with mutation(s) in one gene, or mutations in two genes. Point mutations,

indels, and deletions in each gene were included. A tumor needed to have one or more mutations

in that gene to be considered mutated. For GENIE, only those tumors screened for both genes for

point mutations and indels (according to the panel information file) were investigated. For

TCGA, all oncogene-negative tumors were considered. A one-sided Fisher's exact test was

conducted to determine if there were more than the expected number of tumors with both genes

mutated.

657   Gene lists and their acceptable alterations (*i.e.*, not known to be an oncogene alteration)

were generated as being in RAS or PI3K pathways [15, 55, 80-98] (**Table S6**). We determined

the list of all tumors screened for each gene in each pathway for the respective type of mutation

(point mutation/indel, amplification, deletion, or fusion). For each alteration within each

pathway, we determined whether it could activate the corresponding pathway or not according to

the above list. A gene was considered mutated if it had at least one accepted mutation within it.

A tumor was considered mutated in a given pathway if it had at least one gene mutated in that

pathway.

Animal Studies

667   The use of mice for the current study has been approved by Institutional Animal Care and

Use Committee at Stanford University, protocol number 26696. *Kras$^{LSL-G12D/+}$* (Jax # 008179

(K)), *R26$^{LSL-tdTomato}$(ai9)* (Jax # 007909 (T)), and *H11$^{LSL-Cas9}$* (Jax # 026816 (C)), *Keap1^{flox}, Pten

^{flox}* (Jax # 006440), *Lkb1^{flox}* (Jax # 014143), *Nf1^{flox}* (Jax # 017640), and *Trp53^{flox}* (Jax # 008462)

mice have been previously described [36, 37, 41, 99-103]. All mice were on a C57BL/6:129

mixed background except the mice used for derivation of oncogene-negative *Nf1, Rasa1, Pten,*

and Trp53 mutant cell-lines, those used for allograft studies, and some of the *Trp53$^{flox/flox}$;TC*

mice that were used for metastasis analysis (**Figure S12a**), which were on a pure C57BL/6

background.

Tumor initiation and selection of Lenti-sgRNA*/Cre* pools

Tumors were initiated by intratracheal delivery of pooled or individual Lenti-sgRNA*/Cre*

vectors. Barcoded Lenti-sgRNA*/Cre* vectors within each viral pool are indicated in each figure.

Tumors were initiated with the indicated titers and allowed to develop tumors for between 3 and

12 months after viral delivery, as indicated in each figure.

In **Figure 1** and **Figure S3**, we transduced *Nf1^{f/f};TC, Pten^{f/f};TC, Trp53^{f/f};TC, Lkb1^{f/f};TC,*

Keap1^{f/f};TC, TC, and *T* mice with two pre-existing pools of barcoded Lenti-sgRNA/Cre vectors

that target ~50 putative tumor suppressor genes. These two pools have been previously used to

studied the effect of these putative tumor suppressor genes in KRAS^{G12D}-driven lung tumors

(Lenti-sg*TS*15*/Cre* [31, 32] and Lenti-sg*TS*102*/Cre* [35]).

Lenti-sg*TS*15*/Cre* contained vectors targeting 11 tumor suppressors with one sgRNA per

gene in addition to four inert sgRNAs (Lenti-sg*TS*15*/Cre)* [31, 32]. Lenti-sg*TS*102*/Cre* included

vectors targeting 48 tumor suppressors, including all five of the "core" tumor suppressors and

most of the tumor suppressors targeted in Lenti-sg*TS*15*/Cre* with two or three sgRNAs per gene

in addition to five inert sgRNAs (102 sgRNA in total, Lenti-sg*TS*102*/Cre)* [35] (See **Table S1**).

We determined the alteration frequency of many putative tumor suppressor genes,

including those targeted using our Lenti-sg*TS*15*/Cre* and Lenti-sg*TS*102*/Cre* pools, in oncogene-

positive and oncogene-negative tumors from TCGA and GENIE [15, 80]. Alterations in only 17

tumor suppressor genes were significantly enriched in oncogene-negative tumors in GENIE and

most (12/17) were targeted by the Lenti-sg*TS*15*/Cre* and Lenti-sg*TS*102*/Cre* pools (**Table S1**).

We previously found that a small percent of lung tumors initiated with Lenti-sgRNA/*Cre*

vectors in other lung cancer models contained multiple sgRNAs, consistent with the transduction

of the initial cell with multiple Lenti-sgRNA/*Cre* vectors [31, 32]. Thus, from tumor suppressor

genes that were found to be mutated in the largest tumors and expansions of experiment in

Figure 1, we selected 7 tumor suppressor genes that showed up in *Nf1^{f/f};TC, Pten^{f/f};TC,*

Trp53^{f/f};TC mice in addition to 6 other tumor suppressor genes that showed significant effect in

at least one of these three backgrounds. For Studies in **Figure 2** and **Figure S7**, we used higher

titers of Lenti-sgRNA/*Cre* vectors to increase the potential of finding higher-order interactions

that generate lung tumors. We found that simultaneous alterations of *Nf1*, *Rasa1*, and *Pten* was

one of the most frequent co-occurring alterations in the largest tumors. Thus, we focused on

studying these three tumor suppressor alterations using Lenti-sg*TripleTS8/Cre*, Lenti-

sg*TripleTS6/Cre,* and Lenti-sg*Nf1-sgRasa1-sgPten/Cre* in the following figures.

The sgRNA sequences used in each experiment are summarized below. For a more

detailed description see **Table S1**:

Lenti-sg*TS15/Cre*: The exact pool used in [88, 89]

Lenti-sg*TS102/Cre*: The exact pool used in [90]

Lenti-sg*TS14/Cre*: Version 1 of sg*EP300*, sg*Kmt2c*, sg*Ncoa6*, sg*Rbm10*, sg*Neo*, sg*Nf1*, and

sg*Pten*, and version 2 of sg*Arid1a*, sg*Cdkn2a*, sg*Dnmt3a*, sg*Kdm6a*, sg*Rb1*, sg*Tet2*, sg*Rasa1*

from [90]

Lenti-sg*TS11/Cre*: Lenti-sg*TS14/Cre* pool excluding sg*Nf1*, sg*Rasa1*, and sg*Pten*

Lenti-sg*TripleTS8/Cre*: Version 1 of sg*Nf1*, sg*Neo*, and sgNT, and version 2 of sg*Rasa1*,

sg*Pten,* and sg*Neo* from [90]

Lenti-sg*TripleTS6/Cre*: Version 1 of sg*Nf1*, sg*Neo*, and sgNT, and version 2 of sg*Rasa1*,

sg*Pten*, and sg*Neo* from [90]. Vectors targeting only *Nf1* and only *Rasa1* were removed from this

pool.

Lentiviral generation, barcoding, and packaging

The sgRNA sequences, cloning, and barcoding of Lenti-sg*RNA/Cre and* Lenti-

Triplesg*RNA/Cre* vectors have been previously described [31, 35, 104]. To generate lentivirus,

Lenti-sg*RNA/Cre* vectors were individually co-transfected into 293T cells with pCMV-VSV-G

(Addgene #8454) envelope plasmid and pCMV-dR8.2 dvpr (Addgene #8455) packaging plasmid

using polyethylenimine. Supernatants were collected 36 and 48 hours after transfection, passed

through a 0.45μm syringe filter (Millipore SLHP033RB) to remove cells and cell debris,

concentrated by ultracentrifugation (25,000 g for 1.5 hours at 4°C) and resuspended in PBS

overnight. Each virus was titered against a standard of known titer using LSL-YFP Mouse

Embryonic Fibroblasts (MEFs) (a gift from Dr. Alejandro Sweet-Cordero/UCSF). All lentiviral

vector aliquots were stored at -80°C and were thawed and pooled immediately prior to delivery

to mice.

Tumor barcode sequencing and analysis

For DNA extraction from single dissected tumors to generate libraries for Tuba-seq,

targeted sequencing of selected oncogenes, and whole-exome sequencing, we used Qiagen

AllPrep DNA/RNA Micro kit. For Tuba-seq on bulk lungs, genomic DNA was isolated from

bulk tumor-bearing lung tissue from each mouse as previously described [31]. Briefly,

benchmark control cell lines were generated from LSL-YFP MEFs transduced by a barcoded

Lenti-sgNT3/*Cre* vector (NT3: an inert sgRNA with a unique sgRNA identifying barcode (sgID)

and a random barcode (BC)) and purified by sorting YFP$^+$ cells using BD FACS Aria™ II Cell

Sorter. Three cell lines (100,000 to 500,000 cells each) were added to each mouse lung sample

before lysis to enable the calculation of the absolute number of neoplastic cells in each tumor

from the number of sgID-BC reads. Following homogenization and overnight protease K

digestion, genomic DNA was extracted from the lung lysates using standard phenol-chloroform

and ethanol precipitation methods. Subsequently, Q5 High-Fidelity 2x Master Mix (New

England Biolabs, M0494X) was used to amplify the sgID-BC region from 50 ng of DNA from

dissected tumors or 32 μg of bulk lung genomic DNA. The unique dual-indexed primers used

were Forward: AATGATACGGCGACCACCGAGATCTACAC- 8 nucleotides for i5 index-

ACACTCTTTCCCTACACGACGCTCTTCCGATCT-6 to 9 random nucleotides for increasing

the diversity-GCGCACGTCTGCCGCGCTG and Reverse:

CAAGCAGAAGACGGCATACGAGAT-6 nucleotides for i7 index-

GTGACTGGAGTTCAGACGTGTGCTCTTCCGATCT-9 to 6 random nucleotides for

increasing the diversity-CAGGTTCTTGCGAACCTCAT. The PCR products were purified with

Agencourt AMPure XP beads (Beckman Coulter, A63881) using a double size selection

protocol. The concentration and quality of the purified libraries were determined using the

Agilent High Sensitivity DNA kit (Agilent Technologies, 5067-4626) on the Agilent 2100

Bioanalyzer (Agilent Technologies, G2939BA). The libraries were pooled based on lung weights

to ensure even reading depth, cleaned up again using AMPure XP beads, and sequenced (read

length 2x150bp) on the Illumina HiSeq 2500 or NextSeq 500 platform (Admera Health

Biopharma Services).

Tuba-seq analysis of tumor barcode reads

The FASTQ files were parsed to identify the sgID and barcode (BC) for each read. Each

read is expected to contain an 8-nucleotide sgID region followed by a 30-nucleotide barcode

(BC) region (GCNNNNNTANNNNNGCNNNNNTANNNNNGC), and each of the 20 Ns

represents random nucleotides. The sgID region identifies the putative tumor suppressor gene

being targeted, for which we require a perfect match between the sequence in the forward read

and one of the forward sgIDs with known sequences. Note that all sgID sequences differ from

each other by at least three nucleotides. Therefore, the incorrect assignment of sgID due to PCR

or sequencing error is extremely unlikely. All cells generated from the clonal expansion of an

original cell transduced with a lentiviral vector carry the same BC sequence. To minimize the

effects of sequencing errors on calling the BC, we require the forward and reverse reads to agree

completely within the 30-nucleotide sequence to be further processed. In our pipeline, any tumor

that is within a Hamming distance of two from a larger tumor is assigned as a "spurious tumor",

which likely results from sequencing or PCR errors and the tumor is removed from subsequent

analysis. Reads with the same sgID and barcode are assigned to be the same tumor. The tumor

size (number of neoplastic cells) is calculated by normalizing the number of reads to the three

benchmarks "spike-in" cell lines added to each sample prior to lysis of the lung and DNA

extraction step. The median sequencing depth was ~ 1 read per 4.8 cells, and the minimum

sequencing depth is ~1 read per 16.5 cells. We have high statistical power in identifying tumors

with more than 200 cells, which was used as the minimum cell number cutoff for calling tumors.

A minimum cell number of 50 was used for calling expansions in **Figures S5** and **S6**).

Minimizing the influence of GC amplification bias on tumor-size calling was done as previously

described [31].

Measures of tumor size and growth

We used several metrics of tumor number, burden and size (see Supplemental Figure 4 in [35] for additional details on the calculation of these metric).

Surface tumor size (Methodology: visual inspection), Tomato-positive expansions larger than 0.5 mm in diameter

Relative tumor size / expansion size (Methodology: Tuba-seq): Tumor/expansion size at the indicated percentile was calculated using tumors (clonal cell populations >200 cells) or expansions (clonal cell populations >50 cells) merged from all mice and normalized to the same percentile of sgInert tumors/expansions.

Relative tumor burden (Methodology: Tuba-seq): Tumor burden was calculated as the sum of neoplastic cells per mouse averaged over all mice and normalized to the tumor burden of sgInert tumors.

Relative tumor number (Methodology: Tuba-seq): Tumor numbers above a given size threshold (e.g., 1000 cells) were determined by calculating the number of tumors above the threshold per mouse averaged over all mice and normalized to the tumor number of sgInert tumors.

Relative frequency (Methodology: Tuba-seq): The relative frequency of each sgRNA was calculated in each sample (one sample can contain multiple sgRNAs due to multiple transduction or multiple tumors being present in the sample) and averaged for each sgRNA over all samples for a given mouse genotype.

Frequency in large tumors (Methodology: Tuba-seq): To find synergistic combinations in our data, we ranked all possible combinations of targeted genes by their frequency of co-mutation in

the largest tumors. See Method section "Multiple transduction" for how largest tumors and co-

mutations of genes were defined.

Tumor burden and tumor number are affected linearly by the titer of each Lenti-

sgRNA/Cre vector in the pool. When applicable, we used data on the number of tumors from *KT*

mice (which lack Cas9) to quantify the representation of each Lenti-sgRNA/Cre vectors in the

lentiviral pool. Therefore, when calculating tumor burden and tumor number metrics, we

normalized the metric to the effective titer based on data from *KT* mice to account for the viral

titer differences among different Lenti-sgRNA/Cre vectors. Tumor/expansion size percentiles,

tumor burden, and tumor number were normalized to the values of the same metric for tumors

with inert sgRNAs, thus the expression "relative" is used.

For relative tumor/expansion size, relative tumor burden and relative tumor number,

confidence intervals and p- values were calculated by a nested bootstrap resampling approach to

account for variation in sizes of tumors of a given genotype both across and within mice. First,

tumors of each mouse were grouped, and these groups (mice) were resampled. Second, all

tumors of a given mouse resampling were bootstrapped on an individual basis (10,000

repetitions). For relative frequency, tumors were bootstrap resampled 10,000 times, and the

distribution of inert sgRNA frequencies was used to calculate p-values for enrichment of all

other sgRNAs. For "frequency in large tumors", a permutation test was used to calculate p-values

(see section **Multiple transduction** for details).

Multiple transduction

A fraction of lung tumors initiated with Lenti-sg*RNA*/*Cre* vectors contained multiple barcoded

Lenti-sgRNA/Cre vectors. If multiple barcodes (sgID-BCs) have unexpectedly similar read

counts (**Figure S4a,b**), we suspect transduction of the initial cell with multiple Lenti-sg*RNA/Cre*

vectors.

To capitalize on these multiple transductions as a way to find higher-order interactions

between tumor suppressor genes, we developed a method to identify the combinations of sgRNA

that appear to cooperate as potent drivers of tumor growth. Accurate identification of coinfected

tumors and grouping of barcodes without over grouping was not a trivial task. We developed

methods to identify tumors with likely multiple transductions (*i.e.*, those tumors with complex

genotypes with multiple tumor suppressor genes inactivated). For each sgID-BC, we listed all

other sgID-BCs from the same sample with read counts within 10% as possible multiple

transduction events. A tumor with multiple transductions can be most easily identified among the

largest tumors in each mouse as smaller tumors of similar sizes are too abundant. Multiple

transductions that lead to synergistic combinatorial tumor suppressor alterations would confer a

growth advantage. Thus, synergistic combinatorial alterations of tumor suppressor genes would

be expected to be overrepresented among the largest tumors.

To have a dataset with a higher signal-to-noise ratio, we analyzed the largest tumors that

were co-infected with up to 6 Lenti-sgRNA/*Cre* vectors. With this method, for each tumor, we

assembled a list of genes that were possibly co-mutated. We then ranked all possible

combinations of genes by their frequency in the largest tumors (**Figure 2f-g** and **S6c-h**).

An inherent problem with this analysis is that the genotypes that increase tumor growth

will be overrepresented amongst the largest tumors even without multiple transductions and

specific synergistic interactions. To account for the different number of tumors with different

sgIDs, we performed a permutation test, where we control for the number of tumors of each

genotype but randomize the sizes of tumors by randomly matching the genotypes with tumor

sizes (10,000 repetitions). Synergistic tumor suppressor combinations will occur at significantly

higher than expected frequencies based on this permutation test (**Figure 2f-g** and **S6c-h**).

Reassuringly, while our analysis resulted in significant enrichment of complex genotypes based

on the permutation test, a control analysis performed on smaller tumors within the same mice

with high noise to signal ratio resulted in a loss of statistical significance, this shows that our

permutation test controls for the bias of different frequency of sgIDs among the tumors.

Fitness landscape and adaptive paths

To investigate the possible adaptive steps that can lead to the complex genotype of

coincident inactivation of *Nf1*, *Rasa1*, and *Pten*, we first measured the fitness of all possible

combinations of *Nf1*, *Rasa1*, and *Pten* mutations (**Figure 3f** and **S10g**). Relative (Malthusian)

fitness was calculated based on the number of individuals (cells) at the end (N_1) and the

beginning of (N_0) of a time period [105]. For each genotype, the overall sum of neoplastic cells

at the end of the experiment (N_1) was calculated as the sum of cells from all tumors in each

mouse. As we use *KT* mice (which lack Cas9 and all sgRNAs have no effect) to approximate the

effective titer of our virus pool (see section Measures of tumor size and growth), the initial

number of cells transduced (N_0) was calculated from the number of tumors generated in control

KT mice. Next, the relative fitness for genotype A compared to wild type (wt) was calculated as:

875
$$\frac{log2\,\dfrac{N_{1,A}}{N_{0,A}}}{log2\,\dfrac{N_{1,wt}}{N_{0,wt}}}$$

Fitness values relative to wild type are displayed as nodes on the adaptive landscape

(**Figure 3f** and **S10g**), where genotypes one mutation away from each other are connected by

arrows that represent mutations. In the case of the *Nf1;Rasa1;Pten* triple mutant state, six

adaptive paths can lead from wild type to that triple mutant genotype (**Figure 3f** and **S10g**).

Arrows are shown if the mutation increases the fitness. In **figure 3f** and **S10g** all arrows are

shown since all mutations increase fitness.

Next, we set out to approximate the relative probabilities of different adaptive paths

leading from wild type to the triple mutant genotype with a simple population genetic model. In

the model, cell populations start from the wild-type genotype, and they can acquire any of the

three mutations present in the triple genotype. In the population of cells, a mutation can arise and

then change in frequency until one of two outcomes happens: (i) the frequency of the mutation

drops to zero, and the mutation is lost from the population or (ii) the frequency of the mutation

reaches 1, when it is present in all the cells and hence is fixed in the population. When a

mutation fixes in a population, we consider the genotype of the population to change and that

constitutes a "step" on the fitness landscape. We assume a "strong selection weak mutation"

regime, where there is no more than one mutation simultaneously present with a frequency less

than 1. We also assume that mutations appear randomly and with equal probabilities. Mutations

can appear and get lost multiple times in a population, and as long as populations have at least

one mutation that increases fitness, one of those mutations will fix in the population eventually.

With the model we are estimating the probability of each adaptive step given that the

population starts from the wild-type state. Therefore, the probability of each adaptive step will be

influenced by the probabilities of previous step(s) and the sum of probabilities of adaptive steps

originating from a given genotype must equal the sum of probabilities of all adaptive steps

terminating in the given genotype. If there are multiple adaptive steps originating from the same

genotype, they will have probabilities proportional to the fixation probabilities of their respective

mutations. The fixation probability of a mutation is proportional to its selective advantage

($\frac{fitness\ after\ mutation}{fitness\ before\ mutation} - 1$) [106]. As an example, if there are two adaptive steps originating

from a genotype with fitness 1.00, one terminating in a genotype with fitness 1.1, the other in a

genotype with fitness 1.2, then they have 10% and 20% selective advantage, respectively.

Therefore, one adaptive step will happen half as likely as the other, as the selective advantages

and therefore the relative fixation probabilities are in a ratio of 1:2.

Targeted sequencing of oncogenic loci for potential spontaneous oncogenic mutation

To determine whether the tumors that develop contained spontaneous oncogenic

mutations, we performed Sanger Sequencing and Illumina sequencing (HiSeq 2500 platform;

read length 2x150 bp, Admera Health Biopharma Services) on select regions of *Kras, Egfr, Braf,*

and *Nras* (the 4 frequently mutated oncogenes in lung adenocarcinoma).

PCR products were obtained through amplification with primers listed below on DNA

extracted from dissected tumors (**Table S2**) and cleaned up using ExoSAP (ThermoFisher

Scientific, Cat# 78-201) treatment before Sanger.

Kras Codon 12+13 Forward Primer:

ACACTCTTTCCCTACACGACGCTCTTCCGATCTNNNNNNTTATTTTTATTGTAAGGCC

TGCT

Kras Codon 12+13 Reverse Primer:

GTGACTGGAGTTCAGACGTGTGCTCTTCCGATCTNNNNNNNTTACAAGCGCACGCAG

A

Kras Codon 61 Forward Primer:

ACACTCTTTCCCTACACGACGCTCTTCCGATCTNNNNNNNNCCTGTCTCTTGGATATT

CTCGAC

Kras Codon 61 Reverse Primer:

GTGACTGGAGTTCAGACGTGTGCTCTTCCGATCTNNNNNNNNNCAGTTCTCATGTAC

TGGTCCCT

Egfr Codon 721 Forward Primer:

ACACTCTTTCCCTACACGACGCTCTTCCGATCTNNNNNNNNCCAGCGGAGAAGCTCC

AAAC

Egfr Codon 721 Reverse Primer:

GTGACTGGAGTTCAGACGTGTGCTCTTCCGATCTNNNNNNNNNNATACACTGTGCCAA

ATGCTCCC

Egfr Codon 734-756 Forward Primer:

ACACTCTTTCCCTACACGACGCTCTTCCGATCTNNNNNNTCTTCTTAATCTCAGGGTC

TCTGG

Egfr Codon 734-756 Reverse Primer:

GTGACTGGAGTTCAGACGTGTGCTCTTCCGATCTNNNNNNNCACGTCAAGGATTTCT

TTGTTGGC

Egfr Codon 764-793 Forward Primer:

ACACTCTTTCCCTACACGACGCTCTTCCGATCTNNNNNNNNTTACCCAGAAAGGGAT

ATGCGTG

Egfr Codon 764-793 Reverse Primer:

GTGACTGGAGTTCAGACGTGTGCTCTTCCGATCTNNNNNNNNNGGCAACCGTAGGG

CATGAG

Egfr Codon 860+863 Forward Primer:

ACACTCTTTCCCTACACGACGCTCTTCCGATCTNNNNNNGTGAAGACACCACAGCAT

GTCAAG

Egfr Codon 860+863 Reverse Primer:

GTGACTGGAGTTCAGACGTGTGCTCTTCCGATCTNNNNNNNGCTTCCTGATCTACTC

CCAGGAC

Braf Codon 503-509 Forward Primer:

ACACTCTTTCCCTACACGACGCTCTTCCGATCTNNNNNNNNGACTGGGAGATTCCTG

ATGGAC

Braf Codon 503-509 Reverse Primer:

GTGACTGGAGTTCAGACGTGTGCTCTTCCGATCTNNNNNNNNNcgtgttatacataccatgtcccca

c

Braf Codon 637 Forward Primer:

ACACTCTTTCCCTACACGACGCTCTTCCGATCTNNNNNNGACCTCACGGTAAAAATA

GGTGAC

Braf Codon 637 Reverse Primer:

GTGACTGGAGTTCAGACGTGTGCTCTTCCGATCTNNNNNNNAACTGTTCAAACTGAT

GGGACC

Nras Codon 12+13 Forward Primer:

ACACTCTTTCCCTACACGACGCTCTTCCGATCTNNNNNNNTTCTACAGGTTTTTGCT

GGTGTG

Nras Codon 12+13 Reverse Primer:

GTGACTGGAGTTCAGACGTGTGCTCTTCCGATCTNNNNNNNNNGATTAGCTGGATCG

TCAAGGC

Nras Codon 61 Forward Primer:

ACACTCTTTCCCTACACGACGCTCTTCCGATCTNNNNNNCGAAAGCAAGTGGTGATT

GATGG

Nras Codon 61 Reverse Primer:

GTGACTGGAGTTCAGACGTGTGCTCTTCCGATCTNNNNNNNAAATACACAGAGGAA

CCCTTCG

N: random nucleotides added to increase the diversity of PCR products for Illumina Sequencing.

Illumina sequencing was performed on pools of amplicons. The libraries were pooled

based on band intensity to ensure even read depth and cleaned up using Sera-Mag Select beads

(Thermo Fisher Scientific, Cat# 09-928-107) before undergoing a second round of PCR to attach

the sequencing adaptors needed for the HiSeq platform. Second round PCR products were then

purified with Sera-Mag Select beads before sequencing.

P5 adapter with i5 Index:

AATGATACGGCGACCACCGAGATCTACACNNNNNNNNacactctttccctacacgac

P7 adapter with i7 Index:

CAAGCAGAAGACGGCATACGAGATNNNNNNgtgactggagttcagacgtg

N's represent i5 and i7 indices.

Analysis of targeted DNA-sequencing of *Kras*, *Egfr*, *Braf*, and *Nras* oncogenic loci

Sequenced reads were analyzed using Genome Analysis Toolkit (GATK, Broad Institute

[107]). "Somatic short variant discovery" best practices pipeline for tumor samples similarly as

for whole exome sequencing (see below). However, for targeted sequencing, identification of

duplicate reads (Picard MarkDuplicates algorithm) was omitted as that would result in the loss of

reads with matching start and end position, which is normal in targeted sequencing and is not a

sign of duplicate artifacts. A mean coverage of 6665-7584 reads was achieved for all samples

with 90% of regions having a coverage over 275 reads in all samples. Variant calls made and

filtered by GATK Mutect2 function were annotated with Ensembl Variant Effect Predictor [108].

Pick-allele-gene option was used to filter results on the most relevant transcript for each

variation. We filtered the results for the known oncogenic codons listed above and variants with

a minimum of 5% allele frequency.

1001

Whole exome sequencing

DNA was extracted from 4 individual tumors from *TC* mice transduced with Lenti-sg*Nf1*-

sg*Rasa1*-sg*Pten*, three months after tumor initiation, using Qiagen AllPrep DNA/RNA Micro kit.

Whole-exome sequencing library preparation was performed by Admera Health using SureSelect

XT Mouse All Exon Kit (Agilent).

Sequenced reads on autosomes were analyzed using Genome Analysis Toolkit (GATK,

Broad Institute [107]) "Somatic short variant discovery" best practices pipeline for tumor

samples. Mean coverage of 50-72 reads was achieved for all samples, with 90% of regions

having coverage over 20 reads in all samples. Variant calls made and filtered by GATK Mutect2

function and were annotated with Ensembl Variant Effect Predictor (VEP [108]). The pick-

allele-gene option was used to filter results on the most relevant transcript for each variant. The

same exact variants appearing in multiple tumor samples were flagged as germline variant and

were removed. We filtered the results for protein-coding variation, variants with a minimum of

5% allele frequency, and removed variations in the olfactory OLFR gene family that are likely

germline variations.

1017

Analysis of insertion and deletions

Indel analysis was performed to confirm that insertion and deletions (indels) were generated at

the targeted loci as follows: gDNA was isolated from at oncogene-negative mouse cell lines or

FACS-sorted Tomato^{positive} cancer cells using either the AllPrep DNA/RNA(Qiagen) or the

DNeasy Blood and Tissue Kit. PCR primers were designed to amplify sgRNA-targeted loci,

resulting in 500 to 1000 bp amplicons specific to each locus. Amplicons were purified using

PCR purification kit (Qiagen) and sequenced by Sanger sequencing. Cutting efficiency was

determined by ICE analysis (https://ice.synthego.com/#/)

Nf1-Amplification Forward primer: GCAATTTTGGGGGAACGCCT

Nf1-Amplification Reverse primer: AAAACCAAGAGAGGTCAGAGCC

Nf1-Sequencing primer: CAGCGATTCTAAAATACCAATGC

Rasa1-Amplification Forward primer: GGAGCACGGTATGTGTCGTT

Rasa1-Amplification Reverse primer: TCCTCTTTAGCGTAGCCAGGAA

Rasa1-Sequencing primer: TTGGTGAAAGCGACGTCTC

Pten-Amplification Forward primer: TGAATACACAGTGGCCTTTGCTT

Pten-Amplification Reverse primer: CAGAGACTGCATCTGGTGGTT

Pten-Sequencing primer: CATTGGGTTAGCTTTCTTAACC

1035

Histology and immunohistochemistry

Lung lobes were inflated with 4% formalin and fixed for 24 hours, stored in 70% ethanol, paraffin-embedded, and sectioned. 4 μm thick sections were used for Hematoxylin and Eosin (H&E) staining and immunohistochemistry (IHC).

Primary antibodies used for IHC were anti-RFP (Rockland, 600-401-379), anti-TTF1(Abcam, ab76013), anti-UCHL1(Sigma, HPA005993), anti-TP63 (Cell Signaling Technology, 13109), anti-phospho-S6 (Cell Signaling Technology, 4858), anti-PTEN (Cell Signaling Technology, 9559), anti-phospho-ERK (Cell Signaling Technology, 4370), anti-phospho-AKT (Thermo Fisher Scientific, 44-621G), and anti-HMHGA2 (Biocheck, 59170AP). IHC was performed using Avidin/Biotin Blocking Kit (Vector Laboratories, SP-2001), Avidin-Biotin Complex kit (Vector Laboratories, PK-4001), and DAB Peroxidase Substrate Kit (Vector Laboratories, SK-4100) following standard protocols.

Images of the H&E-stained slides were analyzed with ImageJ. Tumor areas were converted from pixels to mm^2 via a ruler. To quantify the positivity of phospho-ERK and phospho-AKT stained slides, H-scores were calculated using Qupath. The H-score is determined by adding the results of multiplication of the percentage of cells with staining intensity ordinal value (scored from 0 for "no signal" to 3 for "strong signal") with possible values ranging from 0 to 300 [109]. To normalize potential variations between different rounds of immunohistochemistry, one patient sample was included and stained for both pERK and pAKT in all rounds of staining as a control.

Immunoblotting

3×10^5 cells were seeded into 6-well plates and allowed to adhere overnight in regular

growth media and cultured in the presence or absence of 10 µM of Capivasertib, RMC-4550, or

a combination of both drugs. After 24 hours, the protein was extracted using RIPA lysis buffer

(Thermo Fisher Scientific, 89900) and proteinase/phosphatase inhibitor cocktail (Thermo Fisher

Scientific, 78442). Protein concentration was measured using BCA protein assay kit (Thermo

Fisher Scientific, 23250). Proteins (30 µg from each sample) were separated by SDS-PAGE and

immunoblotted and transferred to polyvinyl difluoride (PVDF) membranes (BioRad, 162-0177)

according to standard protocols. Membranes were immunoblotted with antibodies against

phosphor-ERK (Cell Signaling Technology, 4370), ERK (Cell Signaling Technology, 9102),

phosphor-AKT (Thermo Fisher Scientific, 44-621G), AKT (Cell Signaling Technology, 4691),

phospho-S6 (Cell Signaling Technology, 4858), S6 (Cell Signaling Technology, 2217), anti-

RASA1 (Abcam, ab2922), anti-PTEN (Cell Signaling Technology, 9559), and HSP90 (BD

Bioscience, 610418). Immunoblots were developed using Supersignal® West Dura Extended

Duration Chemiluminescent Substrate (Thermo Fisher Scientific, 37071). Initially, the

membranes were immunoblotted against non-phosphorylated targets, and after stripping these

antibodies using Western Blot Stripping Buffer (Thermo Fisher Scientific, 46430), they were

immunoblotted against phosphorylated antibodies. Developing the signal was done using Dura

Extended Duration Chemiluminescent Substrate (Thermo Fisher Scientific, 37071). All

immunoblots were performed at least three times independently.

1077

Cell Lines and Reagents

Mouse oncogene-negative cell lines were generated from tumors initiated in

Trp53$^{flox/flox}$;TC BL6 mice four months after transduction with Lenti-sg*Nf1*-sg*Rasa1*-sg*Pten*/*Cre.*

After dissociation of tumors (described below), cells were cultured in DMEM supplemented with

10% FBS, 1% penicillin/streptomycin (Gibco), and 0.1% Amphotericin (Life Technologies).

HC494 and MMW389T2 ($Kras^{G12D}$ and $Trp53$ mutant) lung adenocarcinoma cells were

previously generated in the Winslow Lab. Human oncogene-negative cell lines (NCI-H1838,

NCI-H1623) and oncogene-positive cell lines (A549, H2009, NCI-H2009, SW1573, HOP62,

NCI-H358, NCI-H1792) were purchased from ATCC and cultured in RPMI supplemented with

5%FBS, 1% penicillin/streptomycin (Gibco), and 0.1% Amphotericin (Life Technologies). We

performed mycoplasma testing using MycoAlert™ Mycoplasma Detection Kit (Lonza). Cell

were maintained at 37°C in a humidified incubator at 5% CO_2. Mutations in components of RAS

and PI3K pathways of NCI-H1838, NCI-H1623 (based on **Table S6**) are indicated below

(extracted from DepMap):

NCI-H1838 (RAS pathway): *NF1* (p.N184fs), *IQGAP2* (p.P780L)

NCI-H1623 (RAS pathway): *RASA1*(p.A47fs), *FGFR2*(p.A355S), *ERF*(p.G255C)

1094

1095   **Clonogenic, apoptosis, and proliferation assays**

1096   For clonogenic assays, mouse cells were seeded in triplicate into 24-well plates (4000

cells per well) and allowed to adhere overnight in regular growth media. Cells were then cultured

in the absence or presence of the drug as indicated on each figure panel in complete media for 4

days. Growth media with or without drugs was replaced every 2 days. The remaining cells were

stained with 0.5% crystal violet in 20% methanol and photographed using a digital scanner.

Relative growth was quantified by densitometry after extracting crystal violet from the stained

cells using 100% methanol [110].

Clonogenic assay of human oncogene-negative lung adenocarcinoma cell lines were done

in spheroids [57]. 400-5000 cells/well were seeded in round bottom ultra-low attachment 96-well

plates (Corning) in growth media and incubated for 72 hours at 37°C in 5% CO_2. Spheroid

formation was confirmed visually, and spheroids were treated in triplicate with dilutions of

RMC-4550 and capivasertib in complete growth media. Following drug exposure for five days,

cell viability in spheroids was determined using the CellTiter-Glo 3D assay kit (Promega),

following the manufacturer's instructions. Luminescence was read in a Plate Reader. Assay data

was normalized to DMSO values.

Drug synergism was analyzed using SynergyFinder (https://synergyfinder.fimm.fi) web

application [111]. The degree of combination synergy, or antagonism, was quantified by

comparing the observed drug combination response against the expected response, calculated

using Loewe's model that assumes no interaction between drugs [112].

For apoptosis and proliferation assays, 3×10^5 cells were seeded into 6-well plates, and

allowed to adhere overnight in regular growth media, and cultured in the presence or absence of

10 µM of Capivasertib, RMC-4550, or a combination of both drugs. After 24 hours, apoptosis

and cell proliferation were determined through staining with Fixable Viability Dye eFluor™ 450

(Thermo Fisher Scientific, 65-0863-14), cleaved caspase 3 Antibody (Cell Signaling

Technology, 9669), and Click-iT™ EdU Alexa Fluor™ 647 Flow Cytometry Assay Kit (Thermo

Fisher Scientific, C-10424) according to the manufacturer's instructions. Data were acquired

using a BD LSR II Flow Cytometer. All experiments were performed independently two times

on 3 different cell lines.

1124

In vivo **drug response studies**

For drug efficacy studies in autochthonous mouse models, *TC* mice (8-12 weeks old)

were divided into 4 groups randomly 3.5 months after tumour initiation. They received the

vehicle, capivasertib (100 mg/kg, MedChemExpress), RMC-4550 (30 mg/kg,

MedChemExpress), or a combination of both dissolved in 10% DMSO, 40% PEG, 5% Tween

80, and 45% PBS through a gavage needle. Mice were treated daily with drugs for eight days,

and the treatment was stopped for two days for recovery, and it continued for two more days

before the tissue harvest. The last two doses of combination therapy were half of the initial

doses.

Cell line-derived allografts were generated through subcutaneous injection of 300,000 of

MY-C3 (*Nf1*, *Rasa1*, *Pten*, and *Trp53* mutant) oncogene-negative mouse cell line in 200 µl of

PBS in male (6–8 week old) BL6 mice (two tumors per mouse). Once tumors reached an average

size of ~100 mm^3 administration of RMC-4550 and capivasertib was started. They received the

vehicle, and combination of capivasertib (100 mg/kg, MedChemExpress) and RMC-4550 (30

mg/kg, MedChemExpress) (5 days on, 2 days off) for 17 days.

1140

Tumor dissociation, cell sorting, and RNA-sequencing

Primary tumors were dissociated using collagenase IV, dispase, and trypsin at 37 °C for

30 min. After dissociation, the samples remained continually on ice, were in contact with ice-

cold solutions, and were in the presence of 2 mM EDTA and 1 U/ml DNase to prevent

aggregation. Cells were stained with antibodies to CD45 (BioLegened, 103112), CD31

(BioLegend, 303116), F4/80 (BioLegend, 123116), and Ter119 (BioLegend, 116212) to exclude

hematopoietic and endothelial cells (lineage-positive (Lin$^+$) cells). DAPI was used to exclude

dead cells. FACS Aria sorters (BD Biosciences) were used for cell sorting.

RNA was purified using RNA/DNA All Prep kit (Qiagen, 80284). RNA quality of each tumor

sample was assessed using the RNA6000 PicoAssay for the Agilent 2100 Bioanalyzer as per the

manufacturer's recommendation. 4.4 ng total RNA per sample was used for cDNA synthesis and

library preparation using Trio RNA-Seq, Mouse rRNA kit (Tecan, 0507-32), according to the

manufacturer's instructions. The purified cDNA library products were evaluated using the

Agilent bioanalyzer and sequenced on NextSeq High Output 1x75 (Admera Health Biopharma

Services).

1156

Analysis of mouse model-derived RNA-seq datasets

Paired-end RNA-seq reads were aligned to the mm10 mouse genome using STAR

(v2.6.1d) 2-pass mapping and estimates of transcript abundance were obtained using RSEM

(v1.2.30) [113, 114]. The differentially expressed genes between different tumor genotypes and

treatment groups were called by DESeq2 using transcript abundance estimates via tximport [115,

116]. The DESeq2-calculated fold changes were used to generate ranked gene lists for input into

GSEA [117].

The upregulated genes with absolute log2 fold change greater than 1 and a false

discovery rate less than 0.05 in the comparison of *Nf1*, *Rasa1*, and *Pten* mutant oncogene-

negative tumors with Kras^{G12D}-driven tumors (*KTC*+sg*Inert* and *KTC*+sg*Pten)*

were compiled into a signature reflecting the oncogene-negative adenocarcinoma state. This gene

signature was utilized in the analysis of human oncogene-positive and oncogene-negative

tumors. Scaled estimates of transcript abundance for TCGA LUAD samples were obtained from

the GDC data portal (gdc-portal.nci.nih.gov). Each expression profile was then scored on the

basis of the mouse-derived gene signature using single-sample GSEA within the Gene Set

Variation Analysis (GSVA) package [118].

1173

Data availability

Tuba-seq barcode sequencing and RNA-seq data have been deposited in NCBI's Gene

Expression Omnibus (https://www.ncbi.nlm.nih.gov/geo/) and are accessible through GEO

Series accession number GSE174393. Whole exome sequencing data generated in our study are

publicly available in SRA-NCBI (www.ncbi.nlm.nih.gov/sra), under BioProject accession

number PRJNA769722.

1180

1181   **Acknowledgments**

1182   The results in Figures 1 and 4 are in part based upon data generated by the TCGA Research

1183   Network (https://www.cancer.gov/tcga) and Genomics Evidence Neoplasia Information

1184   Exchange (GENIE).

1185

Figure 1. Combinatorial tumor suppressor inactivation enables lung tumor development in

the absence of engineered oncogenes.

a. Frequency of human lung adenocarcinomas with likely oncogenic alterations in proto-

oncogenes (oncogene-positive), with alterations of unknown effects in proto-oncogenes

(oncogene-indeterminate), and without any alterations in proto-oncogenes (oncogene-negative).

Data from TCGA. PM: point mutation, indel: insertion and deletion, amp: amplification,

multiple: multiple alterations in the same gene.

b. Combined Cre/lox and CRISPR/Cas9-mediated tumor suppressor gene inactivation to generate

lung epithelial cells with diverse genotypes. The number of mice in each group is indicated.

c. Representative light and fluorescence images of lung lobes from the indicated genotypes of

mice one year after transduction with the Lenti-sg*TS102/Cre* pool. Lung lobes are outlined with

white dotted lines. Scale bar = 4 mm

d. The number of surface tumors (defined as Tomato-positive expansions greater than 0.5 mm in

diameter) quantified by direct counting. Each dot represents a mouse, and the bar is the mean.

e. Representative Hematoxylin and Eosin (H&E), TTF1, and TP63 stained sections of the

indicated genotypes of mice. Scale bar = 100 μm

f. Heatmap showing two measures of tumor suppressor strengths in each genotype detected using

Tuba-seq analysis: (1) in rows labeled as "Tumors" we assessed the occurrence of tumor

suppressor gene targeting vectors in dissected tumors. $p < 0.001$ (red), $p < 0.1$ (pink) (see **Figure**

S4) (2) In rows labeled as "Lung" we measured increases in median sizes of clonal expansions in

the presence of indicated tumor suppressor alterations in bulk single lung lobe samples. Gene

mutations showing significant increases ($p<0.05$) in sizes of clonal expansions using all sgRNAs

are shown in red, and those with only one significant sgRNA are shown in pink (see **Figure S5**).

Gray boxes indicate redundant targeting of genes by both Cre/*loxP* and CRISPR/Cas9.

1210

Figure 2. *Nf1*, *Rasa1*, and *Pten* emerge as potent key drivers of oncogene-negative lung

adenocarcinoma.

a. Combined Cre/lox and CRISPR/Cas9-mediated tumor suppressor gene inactivation to generate

lung epithelial cells with diverse genotypes. The number of mice in each group is indicated.

b. Representative light and fluorescence images of lung lobes from the indicated genotypes of

mice. Lung lobes are outlined with white dotted lines. Scale bar = 4mm

c. The number of tumors (defined as Tomato-positive expansions larger than 0.5 mm in diameter)

quantified by direct counting. Each dot represents a mouse, and the bar is the mean.

d,e. The number of tumors with a minimum size of 1000 neoplastic cells relative to the inert

sgRNA containing expansions is shown as blue bars. 90th percentile of tumor sizes relative to the

inert sgRNAs is shown as a red bar. sgRNAs resulting in significantly different tumor number or

size (p<0.05) are shown in darker colors. Whiskers show 95% confidence intervals. Mouse

genotypes are indicated.

f,g. Barcodes with the highest counts in each mouse were investigated for coinfection with

multiple Lenti-sg*TS/Cre* vectors (i.e., tumors initiated from cells transduced with multiple

viruses, which result in complex tumor suppressor genotypes, see **Methods**). The top 10 pairs of

tumor suppressors that were most frequently co-mutated are shown. Combinations of sgRNAs

that lead to the generation of *Nf1*, *Rasa1*, and *Pten* mutant cancer cells are in bold. *p<0.05,

**p<0.01, ***p<0.001 based on a permutation test.

h. Total number of neoplastic cells in clonal expansions with more than 200 cells in the indicated

genotypes of mice after receiving Lenti-*sgTS14/Cre* or Lenti-*sgTS11/Cre,* which lacks lentiviral

vectors containing sg*Nf1*, sg*Rasa1*, and sg*Pten.* The magnitude of neoplastic cell number

reduction in each group is indicated.

1234

Figure 3. Inactivation of *Nf1*, *Rasa1*, and *Pten* allows a stepwise acquisition of growth

advantage during lung adenocarcinoma development.

a. 8 barcoded triple sgRNA vectors for CRISPR/Cas9-mediated inactivation of all combinations

of *Nf1*, *Rasa1*, and *Pten* in *TC* and *Trp53^{flox/flox};TC* mice to assess genetic interactions between

these tumor suppressors. sg*Neo1* and sg*Neo2* are active cutting, but inert sgRNAs that target *Neo^R* in

the *R26^{LSL-tdTomato}* allele. *sgNT* is a non-targeting inert sgRNA. Mouse genotype, mouse number,

and titer of virus delivered to each mouse are indicated. Tuba-seq was performed on tumor-

bearing lungs 3 months after tumor initiation.

b. Bright-field and fluorescence images of lungs from the indicated mouse genotypes. Lung lobes

are outlined with a dashed white line. Scale bar = 4 mm

c. The number of surface tumors (defined as Tomato-positive expansions larger than 0.5 mm in

diameter) quantified by direct counting. Each dot represents a mouse, and the bar is the mean.

d. Representative H&E and Tomato stained sections of lungs from *TC* and *Trp53^{flox/flox};TC* mice 3

months after transduction with Lenti-sg*TS^{Triple-pool}/Cre*. Scale bar = 500 μm

e. Numbers of tumors (with >1000 neoplastic cells) relative to the Inert sgRNA containing

expansions. sgRNAs resulting in a significantly higher number of tumors than the inert vector

($p<0.05$) are shown in a darker color. Mean +/- 95% confidence interval is shown.

f. Adaptive landscape of *Nf1*, *Rasa1*, and *Pten* inactivation in *TC* mice is shown. Nodes represent

genotypes shown as a string of +(wild-type) and - (inactivated) symbols representing *Nf1*, *Rasa1*,

and *Pten*. Numbers in the nodes indicate fitness increase compared to wild-type. The relative

probability of each beneficial mutation is shown as arrow widths (see **Methods**).

g. Quantification of the ability of combined *Nf1/Rasa1/Pten* inactivation in *TC* mice and

oncogenic *Kras^{G12D}* in *KT* mice to initiate tumors. The number of tumors (with >1000 neoplastic

cells) per infectious unit (ifu) is shown. The bar is the median, the box represents the interquartile

range, and the whiskers show minimum and maximum values. ns: non-significant

1260

Figure 4. Oncogene-negative mouse and human lung adenocarcinomas have frequent

activation of RAS and PI3K pathways.

a-c. Representative immunohistochemistry for pERK and pAKT to determine activation of RAS

and PI3K pathway in tumors with the indicated genotypes and quantification of these stainings.

The bar is the mean. n.s: non-significant, ****<p<0.0001 using Mann–Whitney U test. Scale

bars= 50µm

d,e. Representative p-AKT and p-ERK-stained sections of oncogene-negative human tumors. H-

scores for the whole section are indicated for each representative image. Scale bar= 200 µM

(right), 50 µm (left)

f, g. Quantification of pAKT and pERK staining on 35 oncogene-negative and 18 oncogene-

positive human lung adenocarcinomas. Genotypes of oncogene-positive tumors with the lowest

pERK and pAKT staining intensities are highlighted in red. Significance between groups was

determined using Mann-Whitney U test, ns: non-significant, ****p<0.0001

h. pERK and pAKT H-scores for oncogene-negative human tumors are replotted from **Figure**

4f-g. Red dotted lines: the thresholds for low versus medium pERK and pAKT stains based on

the lowest pERK staining intensity of oncogene-positive lung adenocarcinomas and the lowest

pAKT staining level of EGFR mutant lung adenocarcinomas. Black dotted lines: the thresholds

for medium versus high pERK and pAKT staining based on the mean pERK and pAKT H-scores

in oncogene-positive tumors. The number of tumors in each staining intensity group (low,

medium, high) is indicated on each axis of the plot.

i. Alteration frequency of well-established components of RAS and PI3K pathways (see **Table**

S6) and assessment of their co-occurrences based on TCGA data sets. p-value calculated by two-

sided Fisher's Exact Test.

j. Cumulative distribution function (CDF) plot of the signature scores for human tumors

stratified by genes upregulated in mouse oncogene-negative tumors generated by inactivation of

Nf1, *Rasa1*, and *Pten* (**Figure S15a** and see **Table S4**). The cohort size and the P-value

calculated by Kolmogorov–Smirnov test are indicated on the plot.

1288

Figure 5. SHP2 and AKT inhibition synergize to reduce the growth of autochthonous

oncogene-negative lung tumors.

a. Barcoded triple sgRNA vectors for CRISPR/Cas9-mediated inactivation of combinations of

Nf1, *Rasa1*, and *Pten* in *TC* mice to determine the response of oncogene-negative tumors to

pharmacological inhibition of RAS and PI3K pathways. Indicated numbers of mice were treated

with RMC-4550 (SHP2 inhibitor), capivasertib (AKT inhibitor), or combination of these two

drugs for two weeks 3.5 months after tumor initiation. Tuba-seq and histological analysis were

performed on tumor-bearing lungs followed by analysis of tumor response to therapies.

b. Bright-field and fluorescence images of lungs from the indicated mice. Lung lobes are outlined

with a dashed white line. Scale bars = 4 mm

c. Representative H&E and Tomato-stained sections of tumors from *TC* mice 3.5 months after

transduction with Lenti-sg*TripleTS6/Cre* and two weeks after treatment with the indicated drugs.

Scale bars = 100 μm

d. Relative tumor burden in mice after treatment with capivasertib, RMC-4550, and combination

of these two drugs compared with tumor burden in vehicle-treated mice. ns: non-significant,

***p< 0.001. Drug response is shown for all the tumors.

1305

Figure 6. RMC-4550 and capivasertib synergize to inhibit the growth of oncogene-negative

lung adenocarcinoma cell lines.

a. Cell line generation from oncogene-negative tumors developed in $Trp53^{flox/flox};TC$ mice.

b. Drug dose-response matrix depicting % growth inhibition of an oncogene-negative murine

cell line after four days of treatment with the indicated doses of RMC-4550 and capivasertib. The

average responses of three to four replicates are shown for each drug/drug combination. (see also

Figure S18d-g)

c. Loewe's synergy score calculated based on drug responses in **Figure 6b**. Synergy scores

indicate the percentage of response beyond expectation.

d,e. Cell proliferation and apoptosis analysis using EdU incorporation, cleaved caspase 3

staining, and flow-cytometry analysis. Three independent oncogene-negative cell lines were

treated with 10 μM of the indicated drug/drugs for 2 days before the analysis.

f. Volumes of cell-line derived allografts from one of the mouse oncogene-negative cell lines

(MY-C3). 6 mice were initially injected with $3x10^5$ MY-C3 cells subcutaneously (two tumors

per mouse). 17 days after subcutaneous transplantation, 3 mice were treated with vehicle and 3

mice received RMC-4550 and capivasertib. **p<0.001, ***p<0.0001

g. Weights of subcutaneous tumors at the endpoint of the experiment. *p<0.05

h. Drug dose-response matrix depicting % growth inhibition of H1838 human oncogene-negative

cell line.

i. Loewe's synergy score calculated based on drug responses in **Figure 6h**.

j. Model of biochemical progression and molecular drivers of oncogene-negative tumors.

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Figure 1. Combinatorial tumor suppressor inactivation enables lung tumor development in the absence of engineered oncogenes.
a. Frequency of human lung adenocarcinomas with likely oncogenic alterations in proto-oncogenes (oncogene-positive), with alterations of unknown effects in proto-oncogenes (oncogene-indeterminate), and without any alterations in proto-oncogenes (oncogene-negative). Data from TCGA. PM: point mutation, indel: insertion and deletion, amp: amplification, multiple: multiple alterations in the same gene.
b. Combined Cre/lox and CRISPR/Cas9-mediated tumor suppressor gene inactivation to generate lung epithelial cells with diverse genotypes. The number of mice in each group is indicated.
c. Representative light and fluorescence images of lung lobes from the indicated genotypes of mice one year after transduction with the Lenti-sg*TS102/Cre* pool. Lung lobes are outlined with white dotted lines. Scale bar = 4 mm
d. The number of surface tumors (defined as Tomato-positive expansions greater than 0.5 mm in diameter) quantified by direct counting. Each dot represents a mouse, and the bar is the mean.
e. Representative Hematoxylin and Eosin (H&E), TTF1, and TP63 stained sections of the indicated genotypes of mice. Scale bar = 100 μm
f. Heatmap showing two measures of tumor suppressor strengths in each genotype detected using Tuba-seq analysis: (1) in rows labeled as "Tumors" we assessed the occurrence of tumor suppressor gene targeting vectors in dissected tumors. p < 0.001 (red), p < 0.1 (pink) (see **Figure S4**)
(2) In rows labeled as "Lung" we measured increases in median sizes of clonal expansions in the presence of indicated tumor suppressor alterations in bulk single lung lobe samples. Gene mutations showing significant increases (p<0.05) in sizes of clonal expansions using all sgRNAs are shown in red, and those with only one significant sgRNA are shown in pink (see **Figure S5**). Gray boxes indicate redundant targeting of genes by both Cre/*loxP* and CRISPR/Cas9.

Figure 2. *Nf1*, *Rasa1*, and *Pten* emerge as potent key drivers of oncogene-negative lung adenocarcinoma.

a. Combined Cre/lox and CRISPR/Cas9-mediated tumor suppressor gene inactivation to generate lung epithelial cells with diverse genotypes. The number of mice in each group is indicated.

b. Representative light and fluorescence images of lung lobes from the indicated genotypes of mice. Lung lobes are outlined with white dotted lines. Scale bar = 4mm

c. The number of tumors (defined as Tomato-positive expnsions larger than 0.5 mm in diameter) quantified by direct counting. Each dot represents a mouse, and the bar is the mean.

d,e. The number of tumors with a minimum size of 1000 neoplastic cells relative to the inert sgRNA containing expansions is shown as blue bars. 90th percentile of tumor sizes relative to the inert sgRNAs is shown as a red bar. sgRNAs resulting in significantly different tumor number or size (p<0.05) are shown in darker colors. Whiskers show 95% confidence intervals. Mouse genotypes are indicated.

f,g. Barcodes with the highest counts in each mouse were investigated for coinfection with multiple Lenti-sg*TS/Cre* vectors(i.e., tumors initiated from cells transduced with multiple viruses, which result in complex tumor suppressor genotypes, see **Methods**). The top 10 pairs of tumor suppressors that were most frequently co-mutated are shown. Combinations of sgRNAs that lead to the generation of *Nf1*, *Rasa1*, and *Pten* mutant cancer cells are in bold. *p<0.05, **p<0.01, ***p<0.001 based on a permutation test.

h. Total number of neoplastic cells in clonal expansions with more than 200 cells in the indicated genotypes of mice after receiving Lenti-*sgTS14/Cre* or Lenti-*sgTS11/Cre,* which lacks lentiviral vectors containing sg*Nf1*, sg*Rasa1*, and sg*Pten*. The magnitude of neoplastic cell number reduction in each group is indicated.

Figure 3. Inactivation of *Nf1*, *Rasa1*, and *Pten* allows a stepwise acquisition of growth advantage during lung adenocarcinoma development.

a. 8 barcoded triple sgRNA vectors for CRISPR/Cas9-mediated inactivation of all combinations of *Nf1*, *Rasa1*, and *Pten* in *TC* and *Trp53^flox/flox^;TC* mice to assess genetic interactions between these tumor suppressors. sg*Neo1* and sg*Neo2* are active cutting, but inert sgRNAs that target *Neo^R^* in the *R26^LSL-tdTomato^* allele. *sgNT* is a non-targeting inert sgRNA. Mouse genotype, mouse number, and titer of virus delivered to each mouse are indicated. Tuba-seq was performed on tumor-bearing lungs 3 months after tumor initiation.

b. Bright-field and fluorescence images of lungs from the indicated mouse genotypes. Lung lobes are outlined with a dashed white line. Scale bar = 4 mm

c. The number of surface tumors (defined as Tomato-positive expansions larger than 0.5 mm in diameter) quantified by direct counting. Each dot represents a mouse, and the bar is the mean.

d. Representative H&E and Tomato stained sections of lungs from *TC* and *Trp53^flox/flox^;TC* mice 3 months after transduction with Lenti-sg*TS^Triple-pool^/Cre*. Scale bar = 500 μm

e. Numbers of tumors (with >1000 neoplastic cells) relative to the Inert sgRNA containing expansions. sgRNAs resulting in a significantly higher number of tumors than the inert vector (p<0.05) are shown in a darker color. Mean +/- 95% confidence interval is shown.

f. Adaptive landscape of *Nf1*, *Rasa1*, and *Pten* inactivation in *TC* mice is shown. Nodes represent genotypes shown as a string of +(wild-type) and - (inactivated) symbols representing *Nf1*, *Rasa1*, and *Pten*. Numbers in the nodes indicate fitness increase compared to wild-type. The relative probability of each beneficial mutation is shown as arrow widths (see **Methods**).

g. Quantification of the ability of combined *Nf1/Rasa1/Pten* inactivation in *TC* mice and oncogenic *Kras^G12D^* in *KT* mice to initiate tumors. The number of tumors (with >1000 neoplastic cells) per infectious unit (ifu) is shown. The bar is the median, the box represents the interquartile range, and the whiskers show minimum and maximum values. ns: non-significant

Figure 4. Oncogene-negative mouse and human lung adenocarcinomas have frequent activation of RAS and PI3K pathways.

a-c. Representative immunohistochemistry for pERK and pAKT to determine activation of RAS and PI3K pathway in tumors with the indicated genotypes and quantification of these stainings. The bar is the mean. n.s: non-significant, ****<p<0.0001 using Mann–Whitney U test. Scale bars= 50μm

d,e. Representative p-AKT and p-ERK-stained sections of oncogene-negative human tumors. H-scores for the whole section are indicated for each representative image. Scale bar= 200 μM (right), 50 μm (left)

f, g. Quantification of pAKT and pERK staining on 35 oncogene-negative and 18 oncogene-positive human lung adenocarcinomas. Genotypes of oncogene-positive tumors with the lowest pERK and pAKT staining intensities are highlighted in red. Significance between groups was determined using Mann-Whitney U test, ns: non-significant, ****p<0.0001

h. pERK and pAKT H-scores for oncogene-negative human tumors are replotted from **Figure 4f,g**. Red dotted lines: the thresholds for low versus medium pERK and pAKT stains based on the lowest pERK staining intensity of oncogene-positive lung adenocarcinomas and the lowest pAKT staining level of *EGFR* mutant lung adenocarcinomas. Black dotted lines: the thresholds for medium versus high pERK and pAKT staining based on the mean pERK and pAKT H-scores in oncogene-positive tumors. The number of tumors in each staining intensity group (low, medium, high) is indicated on each axis of the plot.

i. Alteration frequency of well-established components of RAS and PI3K pathways (see **Table S6**) and assessment of their co-occurrences based on TCGA data sets. p-value calculated by two-sided Fisher's Exact Test.

j. Cumulative distribution function (CDF) plot of the signature scores for human tumors stratified by genes upregulated in mouse oncogene-negative tumors generated by inactivation of *Nf1*, *Rasa1,* and *Pten* (**Figure S15a** and see **Table S4**). The cohort size and the P-value calculated by Kolmogorov–Smirnov test are indicated on the plot.

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Figure 5. SHP2 and AKT inhibition synergize to reduce the growth of autochthonous oncogene-negative lung tumors.
a. Barcoded triple sgRNA vectors for CRISPR/Cas9-mediated inactivation of combinations of *Nf1*, *Rasa1*, and *Pten* in *TC* mice to determine the response of oncogene-negative tumors to pharmacological inhibition of RAS and PI3K pathways. Indicated numbers of mice were treated with RMC-4550 (SHP2 inhibitor), capivasertib (AKT inhibitor), or combination of these two drugs for two weeks 3.5 months after tumor initiation. Tuba-seq and histological analysis were performed on tumor-bearing lungs followed by analysis of tumor response to therapies.
b. Bright-field and fluorescence images of lungs from the indicated mice. Lung lobes are outlined with a dashed white line. Scale bars = 4 mm
c. Representative H&E and Tomato-stained sections of tumors from *TC* mice 3.5 months after transduction with Lenti-sg*TripleTS6/Cre* and two weeks after treatment with the indicated drugs. Scale bars = 100 *µm*
d. Relative tumor burden in mice after treatment with capivasertib, RMC-4550, and combination of these two drugs compared with tumor burden in vehicle-treated mice. ns: non-significant, ***p< 0.001. Drug response is shown for all the tumors.

Figure 6. RMC-4550 and capivasertib synergize to inhibit the growth of oncogene-negative lung adenocarcinoma cell lines.

a. Cell line generation from oncogene-negative tumors developed in *Trp53^flox/flox^;TC* mice.

b. Drug dose-response matrix depicting % growth inhibition of an oncogene-negative murine cell line after four days of treatment with the indicated doses of RMC-4550 and capivasertib. The average responses of three to four replicates are shown for each drug/drug combination. (see also **Figure S18d-g)**

c. Loewe's synergy score calculated based on drug responses in **Figure 6b**. Synergy scores indicate the percentage of response beyond expectation.

d,e. Cell proliferation and apoptosis analysis using EdU incorporation, cleaved caspase 3 staining, and flow-cytometry analysis. Three independent oncogene-negative cell lines were treated with 10 μM of the indicated drug/drugs for 2 days before the analysis.

f. Volumes of cell-line derived allografts from one of the mouse oncogene-negative cell lines (MY-C3). 6 mice were initially injected with 3x10^5 MY-C3 cells subcutaneously (two tumors per mouse). 17 days after subcutaneous transplantation, 3 mice were treated with vehicle and 3 mice received RMC-4550 and capivasertib.**p<0.001, ***p<0.0001

g. Weights of subcutaneous tumors at the endpoint of the experiment. *p<0.05

h. Drug dose-response matrix depicting % growth inhibition of H1838 human oncogene-negative cell line.

i. Loewe's synergy score calculated based on drug responses in **Figure 6h**.

j. Model of biochemical progression and molecular drivers of oncogene-negative tumors.

a GENIE

b

c

	TCGA		GENIE	
	Oncogene-positive	Oncogene-negative	Oncogene-positive	Oncogene-negative
Male (%)	44.9	44.0	35.5	51.0
Female (%)	55.1	56.0	64.5	49.0
Age at diagnosis (years mean +/- SEM)	65.8 +/- 0.6	68.2 +/-1.0	N/A	N/A
Never -smokers (%)	18.3	12.4	N/A	N/A
Smokers (%)	81.7	87.6	N/A	N/A
Pack years smoked* (mean among smokers +/- SEM)	39.3 +/- 2.0	45.8 +/- 4.0	N/A	N/A

d

e

Figure S1. Clinical and molecular features of oncogene-negative human lung adenocarcinomas.
a. Frequency of human oncogene-positive, oncogene-indeterminate, and oncogene-negative lung adenocarcinomas based on GENIE data sets. PM: point mutation, indel: insertion and deletion, amp: amplification, multiple: multiple oncogenic alterations in the same gene (see **Methods**)
b. Overall survival and disease-specific survival of oncogene-positive (Onc[Pos]), oncogene-indeterminate (Onc[Ind]), and oncogene-negative (Onc[Neg]) lung adenocarcinoma patients based on TCGA data.The numbers below the plots are the numbers of patients alive at each time point.
c. Clinical characteristics of oncogene-positive and oncogene-negative patients based on TCGA and GENIE data sets. SEM - standard error of the mean. N/A - information not present in this dataset. The p-values were calculated using Mann Whitney U test, * p<0.05 .
d,e. The number of mutated genes (**d**,by point mutations (PMs) and indels) and number of mutated tumor suppressor genes (**e**, by point mutations, indels, or deletions) in oncogene-positive, oncogene-indeterminate, and oncogene-negative tumors based on TCGA and GENIE data sets. The mean is represented by the dashed line and the median by the straight line. ****p<0.0001, p-values were calculated using Mann Whitney U test.

b

Gene	GENIE	TCGA
TP53	447/816 (54.8%)	41/91 (45%)
NF1	123/8111 (15.2%)	17/91 (18.7%)
KEAP1	201/731 (27.5%)	15/91 (16.5%)
LKB1/STK11	201/814 (24.7%)	13/91 (14.3%)
PTEN	30/812 (3.7%)	5/91 (5.5%)

c

TCGA

Mutation frequency in Oncogene-neg/Oncogene-pos ($\log_2$)

RNF43, PTEN, NF1, DOT1L, ARHGAP35, ERCC4, NF2, SMAD4, APC, LATS1, RASA1, SMARCA4, MGA, CMTR2, UBR5, KEAP1, LRP1B, ARID2, LKB1, TP53, DNMT3A, FAT1, BRCA2, ATF7IP, RB1, PTPRD, KMT2C, STAG2, KMT2D, SETD2, EP300, FBXW7, POLE, CDKN2A, ARID1B, KDM6A, ARID1A, BAP1, NCOA6, ATM, WRN, NCOR1, GATA3, ATRX, RBM10

d

GENIE

Mutation frequency in Oncogene-neg/Oncogene-pos ($\log_2$)

RASA1, NF1, BAP1, KEAP1, DOT1L, NF2, APC, KMT2C, ARID2, KMT2D, LKB1, CDKN2C, GATA3, LATS1, TSC1, CIC, BRCA2, SMARCA4, PTEN, TET2, PTPRD, DNMT3A, ARID1B, RB1, RNF43, ARID1A, ATRX, FAT1, TP53, FBXW7, KDM6A, EP300, STAG2, POLE, SETD2, MGA, ATM, CDKN2A, SMAD4, LRP1B, ERCC4, RBM10, WRN, NCOR1, ARHGAP35

Figure S2. Tumor suppressor gene alterations in oncogene-negative lung adenocarcinoma.
a. Schematic of the pathways controlled by the five tumor suppressor genes inactivated using floxed alleles ("core" tumor suppressor genes) in this study. The tumor suppressors represent different key cancer pathways.
b. Alteration frequency of "core" tumor suppressor genes (number of tumors with potentially inactivating missense or nonsense mutations or focal DNA copy number losses/ total tumor number) in oncogene-negative lung adenocarcinomas based on GENIE and TCGA data sets.
c,d. The ratio of the frequency of inactivating alterations of tumor suppressor genes (point mutations, indel, and copy number loss) of the genes in the Lenti-sg*TS102/Cre* and Lenti-sg*TS15/Cre pools* in oncogene negative versus oncogene-positive lung adenocarcinomas. Data from TCGA (**c**) and GENIE (**d**) data sets are shown. The dotted line represents equal frequency in oncogene-negative and oncogene-positive lung adenocarcinomas. The "Core" tumor suppressors are in bold. *FDR<0.05

a

b

Figure S3. Most tumors in *Nf1^f/f^;TC, Pten^f/f^;TC*, and *Trp53^f/f^;TC* mice arise in the absence of mutations in the proto-onco-genes.

a. Schematic of combined Cre/lox and CRISPR/Cas9-mediated tumor suppressor gene inactivation to generate lung epithelial cells with diverse genotypes.

b. Representative light and fluorescence images of lung lobes from the indicated genotypes of mice. Lung lobes are outlined with white dotted lines. Scale bar = 4 mm

c. The number of tumors (defined as Tomato-positive expansions greater than 0.5 mm in diameter) was quantified by direct counting. Each dot represents a mouse, and the bar is the mean.

d. Exons in known proto-oncogenes that were analyzed by targeted sequencing. Key codons are those in which mutations are associated with oncogenic activity. Mutation frequency is the number of tumors with putative oncogenic mutations over the total number of samples analyzed. Putative oncogenic mutations are defined in **Methods**.

Figure S4. Identification of tumor suppressor genes that constrain lung tumor formation *in vivo.*
a,b. Example plots indicating strong evidence of transduction with multiple barcoded lentiviral vectors. 10 sgID-BCs with the highest read counts from two excised tumors are shown. Each dot represents a sgID-BC, the y-axis shows read count, and the sgID-BCs are sorted on the x-axis by decreasing read counts (the first 5 nucleotides of the random barcode are shown with the targeted gene symbol). The first two and three barcodes (sgID-BC) in subpanels a and b, respectively, that have very similar read counts likely represent a single clonal tumor initiated from a cell transduced with multiple barcoded Lenti-sgRNA/Cre vectors (see **Methods** Multiple transduction section).
c-f. Relative frequency of sgRNAs targeting each tumor suppressor gene in tumors harvested from the indicated genotypes of mice. Tumors were dissected under a fluorescence microscope based on their tdTomato fluorescent signal and were subjected to genomic DNA extraction. The sgID-BC region was PCR amplified and sequenced using Illumina high-throughput sequencing. The dotted lines represent the frequency of the inert sgRNA (average of all inert sgRNAs). Genes significantly overrepresented compared to the inert sgRNA are shown as: *** $p < 0.001$, * $p < 0.05$, · $p < 0.1$. Light gray bars indicate sgRNAs targeting the "core" tumor suppressor gene that is inactivated with floxed alleles in each plot and the inert sgRNAs.

Figure S5. *In vivo* lung epithelial cell expansion is suppressed by diverse tumor suppressor genes.
a-d. Median cell-expansion sizes (normalized to the sizes of inert sgRNA containing cell expansions) for each putative tumor suppressor targeting sgRNAs in one lung lobe harvested from the indicated mouse genotype are shown. Dotted lines indicate the median value for inert sgRNAs. Cell expansions are defined as clonal expansions containing a minimum of 50 cells. Bootstrap 95% confidence intervals are shown as whiskers. sgRNAs with median sizes significantly (p < 0.05) higher than the median effect for all sgRNAs are shown in red. Gene with significant effect upon inactivation using both sgRNAs are in bold.

Figure S6. *Nf1*, *Rasa1*, and *Pten* are frequently targeted in the largest tumors of *Nf1^{f/f};TC*, *Pten^{f/f};TC*, *Trp53^{f/f};TC*, and *TC* mice.

a, b. The number of tumors with a minimum size of 1000 cells relative to the inert guide is shown as a blue bar. 90th percentile of tumor sizes relative to the inert sgRNA is shown as a red bar. sgRNAs resulting in a significantly higher number or larger tumors than the inert sgRNA (p<0.05) are shown in color. Whiskers show 95% confidence intervals. Mouse genotypes are indicated on each plot.

c-h. Depiction of the top 10 most frequently co-occurring tumor suppressor alterations in each indicated genotype. Barcodes with the highest cell count in each mouse were investigated for coinfection for multiple viruses (see **Methods**). The top 10 pairs of tumor suppressors found co-mutated in the largest tumors are shown. *p<0.05, **p<0.01, ***p<0.001 based on a permutation test. Combinations of sgRNAs that lead to the generation of *Nf1*, *Rasa1*, and *Pten* mutant cancer cells in a statistically significant manner are in bold.

a

b

c

Figure S7. Very few tumors develop in *Nf1^{f/f};TC, Pten^{f/f};TC, Trp53^{f/f};TC,* and *TC* mice after delivery of the Lenti-sg*TS*11/*Cre* pool.

a. Schematic of tumor initiation with a pool of 11 barcoded Lenti-sgRNA/Cre vectors (Lenti-sgTS11/Cre) similar to Lenti-sg*TS*14/*Cre* but excluding the Lenti-sgRNA/Cre vectors with sg*Nf1*, sg*Rasa1* and sg*Pten*. Each gene is targeted with a single sgRNA. Mouse genotype, mouse number, and titer of virus delivered to each group are indicated. Tuba-seq was performed on each tumor-bearing lung 4.5 months after tumor initiation.

b. Representative light and fluorescence images of lung lobes from the indicated genotypes of mice. Lung lobes are outlined with white dotted lines. Scale bars=4mm

c. The number of surface tumors (defined as Tomato-positive expansions larger than 0.5 mm in diameter) quantified by direct counting. Each dot represents a mouse, and the bar is the mean.

Figure S8. Pairwise and single tumor suppressor gene inactivation is rarely sufficient to generate lung tumors.
a. Schematic of experiments to assess the potential of single or paired tumor suppressor inactivation to generate lung tumors.
b,d,f. Representative light and fluorescence images of lung lobes from the indicated genotypes of mice. Lung lobes are outlined with white dotted lines. Scale bar=4mm
c,e,g. The numbers of tumors (defined as Tomato-positive cell expansions greater than 0.5mm in diameter) was quantified by direct counting. Each dot represents a mouse, and the bar is the mean. The genotypes of the recipient mice and the gene targeted by sgRNA are indicated.

Figure S9. Pairwise inactivation of tumor suppressor genes rarely generates lung adenocarcinomas.
Representative H&E, Tomato, TTF1, TP63, and UCHL1-stained sections of tumors from *Nf1^f/f^;TC* and *Ptenf^f^;TC* mice 10 months after transduction with Lenti-*sgRasa1/Cre* or Lenti-*sgNf1/Cre*. Scale bars= 100 *µm*

Figure S10. The relative contribution of *Nf1, Rasa1*, and *Pten* inactivation to oncogene-negative lung tumor development is not impacted by *Trp53* inactivation.

a. Tumor burden, represented by lung weight. Each dot represents a mouse and the bar is the mean.

b. Quantification of tumor burden based on H&E images. Each dot represents one lung lobe from each mouse, and the bar is the mean.

c. Schematic of the increase in the number of oncogene-negative lung tumors generated in mice by enriching sgRNAs targeting the most potent tumor suppressor genes in each round of functional genomic screening *in vivo*. The viral titer, number of months after tumor initiation, and average number of tumors are indicated.

d. Representative H&E and Tomato stained sections from *TC* and *Tp53flox/flox;TC* mice 3 months after transduction with Triple-Lenti-sg*Nf1*-sg*Rasa1*-sg*Pten/Cre.* Scale bar= 500μm

e. Representative H&E, Tomato, TTF1, TP63, and UCHL1-stained sections of tumors from *TC* and *Trp53flox/flox;TC* mice 3 months after transduction with Lenti-sg*TS^Triple-pool^/Cre.* Scale bar = 100 μm

f. Numbers of tumors (with >1000 neoplastic cells) are shown relative to Inert sgRNA. sgRNAs resulting in a significantly higher number of tumors than sgInert (p<0.05) are shown in color. Mean +/- 95% confidence interval is shown.

g. Adaptive landscape of *Nf1, Rasa1*, and *Pten* inactivation in *Trp53flox/flox;TC* is shown. Nodes represent genotypes shown as a string of +(wild-type) and - (inactivated) symbols representing *Nf1, Rasa1*, and *Pten*. Numbers in the nodes indicate fitness increase compared to wild-type. The relative probability of each beneficial mutation is shown as arrow widths (see **Methods**).

h. Quantification of the ability of combined *Nf1/Rasa1/Pten* inactivation in *TC* mice and oncogenic Kras^G12D^ in *KT* mice to initiate tumors. Number of tumors (with >1000 neoplastic cells) per infectious unit (ifu) is shown. The bar is the median, the box represents the interquartile range, and the whiskers show minimum and maximum values. n.s: non-significant

Figure S11. Oncogene-negative lung tumors driven by inactivation of *Nf1*, *Rasa1*, and *Pten* are almost exclusively adenomas/adenocarcinoma.

a. Schematic of inactivation of *Nf1*, *Rasa1*, and *Pten* in *TC* and *Trp53^flox/flox;TC* mice utilizing triple guide vectors and CRISPR/Cas9-mediated gene-inactivation. Mouse genotype, mouse number, and titer of virus delivered to each mouse are indicated. ifu, infection unit
b. Bright-field and fluorescence images of lungs from the indicated mice 3 months after tumor initiation with Lenti-sg*Nf1*-sg*Rasa1*-sg*Pten/Cre* virus. Lung lobes are outlined with a dashed white line. Scale bars=4 mm
c. Tumor burden, represented by lung weight. Each dot represents a mouse, and the bar is the mean.
d. Quantification of tumor number based on H&E images of one lung lobe from each mouse. Each dot represents one lung lobe from each mouse, and the bar is the mean.
e. Representative H&E, Tomato, TTF1, TP63, UCHL1, SYNAPTOPHYSIN (SYP), and CGRP-stained tumor sections from *TC* and *Trp53^flox/flox;TC* mice 3 months after transduction with Lenti-*sgNf1-sgRasa1-sgPten/Cre*. Squamous cell lung cancer was only rarely observed in *Trp53^flox/flox;TC* mice (3 out 264 tumors). Scale bars= 100 μm
f. Analysis of insertion and deletion in genomic DNA from FACS sorted tumors of 19 TC mice 4 months after transduction with 5x10⁴ ifu of Lenti-*sgNf1-sgRasa1-sgPten/Cre*. sgRNA targeted regions were PCR amplified, and knockout scores, representing the proportion of cells that have either a frameshift-inducing indel or a large indel in a protein-coding region, were calculated using Synthego's ICE.

Figure S12. Inactivation of *Nf1*, *Rasa1*, and *Pten* generates lung tumors with the ability to metastasize to other oragans.
a. Schematic of inactivation of *Nf1*, *Rasa1*, and *Pten* in *Tp53^flox/flox^;TC* mice utilizing *Lenti-sgNf1-sgRasa1-sgPten/Cre* vector. Mouse genotype, mouse number, and titer of virus delivered mice are indicated. ifu, infection unit
b. Bright-field and fluorescence images of lungs, diphragm, and liver from the *Trp53^flox/flox^;TC* mice 12 months after tumor initiation with Lenti-sg*Nf1*-sg*Rasa1*-sg*Pten*/*Cre* virus. Lung lobes are outlined with a dashed white line. Scale bars=5 and 0.5 mm (4 out of 32 mice indicated metastasis to other organs).
c. Representative H&E, Tomato, TTF1, HMGA2, TP63, UCHL1, SYNAPTOPHYSIN (SYP), and CGRP-stained tumor sections from*Trp53^flox/flox^;TC* mice 9-12 months after transduction with Lenti-*sgNf1-sgRasa1-sgPten/Cre*. Scale bars= 100 *μ*m.
d. H&E and tdTomato staining of liver sections from one of the *Trp53^flox/flox^;TC* mice with metastasis. Scale bars= 100 *μ*m.

Figure S13. *Lkb1* and *Keap1* mutations suppress the initiation of oncogene-negative lung tumors from cells targeted by Lentiviruses.

a. Schematic of 8 barcoded triple sgRNA vectors for CRISPR/Cas9-mediated inactivation of all combinations of *Nf1*, *Rasa1*, and *Pten* in *Lkb1*[flox/flox]*;TC*, *Keap1*[flox/flox]*;TC*, and *TC* mice to assess genetic interactions between these tumor suppressors. Mouse genotype, mouse number, and titer of virus delivered to each mouse are indicated. Tuba-seq was performed on tumor-bearing lungs 3 months after tumor initiation, followed by analysis to quantify the effect of tumor suppressor mutations and their interactions. ifu, infection unit

b. Bright-field and fluorescence images of lungs from the indicated mouse genotypes. Lung lobes are outlined with a dashed white line. Scale bars= 4 mm

c. The number of surface tumors (defined as Tomato-positive expansions larger than 0.5 mm in diameter) quantified by direct counting. Each dot represents a mouse, and the bar is the mean.

d. Representative H&E and Tomato stained sections of lungs from *Lkb1*[flox/flox]*;TC* and *Keap1*[flox/flox]*;TC* mice 3 months after transduction with Lenti-sg*TS*[Triple-pool]*/Cre.* Scale bars= 500 μm

e. Total number of neoplastic cells in clonal expansions with more than 200 cells per mouse in Lkb1f/f;TC, Keap1f/f;TC, and TC mice after receiving Lenti-sgTSTriple-pool/Cre. Wilcoxon-test p values: n/s: not significant (p > 0.05), *: p<0.05, **: p<0.01.

f,g. The number of tumors per mouse with a minimum size of 200 neoplastic cells relative to TC genotype mice is shown as blue bars. 90th percentile of tumor sizes relative to TC genotype mice is shown as a red bar. sgRNAs resulting in significantly different tumor numbers or sizes than in TC genotype mice (p<0.05, bootstrap test) are shown in darker colors. Whiskers show 95% confidence intervals. Mouse genotypes are indicated.

h. H&E, Tomato, TTF1, TP63, and UCHL1-stained sections of tumors from *Lkb1*[f/f]*;TC* mice described in **Figure S13a**. Scale bars= 100 μm

Figure S14. Oncogene-negative lung adenocarcinomas activate RAS and PI3K pathways biochemically.

a. Summary of the mouse tumors sorted using FACS and analyzed by RNA-sequencing and immunohistochemistry.

b,c. RAS and PI3K-AKT pathway gene-set profiles estimated by single-sample Gene Set Enrichment Analysis (ssGSVA). Tumors from *Kras^G12D;TC* (*KTC*+ sg*Inert* and *KTC*+sg*Pten:* Kras and Kras/Pten) mice are compared with *Nf1*, *Rasa1*, and *Pten* mutant tumors(Nf1/Rasa1/Pten). The bar is the mean. ns: non-significant, *p<0.05 using Mann–Whitney U test.

d. Representative immunohistochemistry for pERK and pAKT to determine activation of RAS and PI3K pathway in tumors with the indicated genotypes. The first gene is mutated using floxed alleles, and the second gene is inactivated using sgRNA/Cas9 (see **Figure S8** for more details). Scale bar = 50 *μm*

e-i. Representative p-AKT and p-ERK-stained sections of tumors from human oncogene-negative and oncogene-positive tumors. H-score for the whole section is indicated on each representative image. Scale bar= 200 *μM* (right), 50 *μm* (left)

j. Replotting of pAKT and pERK staining on 35 oncogene-negative and 18 oncogene-positive human lung adenocarcinomas (**Figure 4f, g**). The tumors shown as IHC examples in **Figure 4d,e**, and **S14e-i** are labeled on this plot.

a GENIE

PI3K pathway

		WT	Mut
RAS pathway	WT	1,227 74.6%	181 11%
	Mut	193 11.7%	44 2.7%

odds ratio = 1.545
P-value = 0.0241

b TCGA

NF1

		WT	Mut
RASA1	WT	73 80.2%	15 16.5%
	Mut	1 1.1%	2 2.2%

odds ratio = 9.73
P-value = 0.088

PTEN

		WT	Mut
RASA1	WT	83 91.2%	5 5.5%
	Mut	3 3.3%	0 0%

odds ratio = 0
P-value = 1.0

PTEN

		WT	Mut
NF1	WT	70 77%	4 4.4%
	Mut	16 17.6%	1 1.1%

odds ratio = 1.09
P-value = 0.65

c GENIE

NF1

		WT	Mut
RASA1	WT	419 79.8%	81 15.4%
	Mut	17 3.2%	8 1.5%

odds ratio = 2.43
P-value = 0.045

PTEN

		WT	Mut
RASA1	WT	483 92%	17 3.2%
	Mut	24 4.6%	1 0.2%

odds ratio = 1.18
P-value = 0.59

PTEN

		WT	Mut
NF1	WT	820 82.4%	31 3.1%
	Mut	140 14.1%	4 0.4%

odds ratio = 0.76
P-value = 0.77

d Onc^{Neg} Tumor#21 — PTEN, H=60, 200µm, 50µm

e Onc^{Neg} Tumor#17 — PTEN, H=0, 200µm, 50µm

f Onc^{Neg} Tumor#3 — PTEN, H=145, 200µm, 50µm

g Onc^{Neg} Tumor#9 — PTEN, H=0, 200µm, 50µm

h Onc^{Neg} Tumor#11 — PTEN, H=10, 200µm, 50µm

i H-score (PTEN), Onc^{Neg}

Figure S15. Alterations in RAS and PI3K pathways are enriched in oncogene-negative human lung adenocarcinomas.

a. Frequency of alteration of well-established components of RAS and PI3K pathways (**Table S6**) queried in GENIE data set and their co-occurrences, the p-value calculated by two-sided Fisher's Exact Test.

b, c. Alteration frequencies of *NF1*, *RASA1*, and *PTEN* (point mutation, CNV, and indel) and assessment of their co-occurrences, the p-values were calculated by two-sided Fisher's Exact Test. 91 oncogene-negative tumors were from the TCGA datasets. 525, 995, and 525 tumors were analyzed for *RASA1/PTEN*, *NF1/PTEN*, and *RASA1/NF1* alterations from the GENIE dataset.

d-h. Representative PTEN-stained sections of oncogene-negative human tumors. H-score for the whole section is indicated for each representative image. Scale bar= 200 *µ*M (right), 50 *µ*m (left)

i. PTEN H-scores for oncogene-negative human lung adenocarcinoma tumors.

Figure S16. *Nf1*, *Rasa1*, and *Pten* mutant oncogene-negative lung tumors respond to inhibition of PI3K and RAS pathways.
a. RAS and PI3K pathways are activated by alterations of *Nf1*, *Rasa1*, and *Pten* and targeted by SHP2 and AKT inhibitors.
b. Drugs used to inhibit RAS and PI3K pathways *in vivo* and their dosages.
c. Lung weight of mice described in **Figure 5a-b**.
d-g. Relative tumor burden in mice after treatment with capivasertib, RMC-4550, and combination of these two drugs compared with tumor burden in vehicle-treated mice. ns: non-significant, ***p< 0.001. Drug response is shown for tumors driven by inactivation of different combinations of *Nf1*, *Rasa1*, and *Pten*.
h. Representative pERK and pS6-stained sections of tumors from *TC* mice described in **S17** after treatment with the indicated drugs. The mice were injected with one last dose of indicated drugs 4 hours before tissue harvest. Scale bars= 100 *µ*m

a

Figure S17. RMC-4550 and capivasertib treatment induce apoptosis gene signature and suppress G2/M gene signature in oncogene-negative tumors

a. Generation of *Nf1*, *Rasa1*, and *Pten* mutant lung tumors in *TC* mice to determine gene expression changes to pharmacological inhibition of RAS and PI3K pathways. Indicated number of mice were treated with vehicle or combination of RMC-4550 and capivasertib 4.5 months after tumor initiation for three days. RNA-sequencing was performed on sorted Tomato[positive] epithelial cells in tumors.

b. Volcano plots depicting a global overview of differential gene expression in *Nf1*, *Rasa1*, *Pten* mutated tumors in the absence and presence of treatment with RMC-4550 and capivasertib for three days as described above. Significant differential expression is defined as an absolute log2(Fold Change) > 1 and FDR < 0.01. The numbers of significantly differentially expressed genes are indicated on the plot.

c-f. Comparison of RAS, PI3K-AKT, apoptosis, and G2M gene-set profiles estimated by single-sample Gene Set Enrichment Analysis (ssGSVA) in mouse tumors from *TC* mice with inactivation of *Nf1*, *Rasa1*, and *Pten* after treatment with vehicle or RMC-4550 and capivasertib for three days. Each dot represents one tumor. ssGSVA data points shown for vehicle-treated tumors are the same as **Figure 14b, c** as Nf1/Rasa1/Pten. The bar is mean. ns: non-significant, *p<0.05 using Mann–Whitney U test.

Figure S18. RMC-4550 synergizes with capivasertib to inhibit proliferation and induce cell death in oncogene negative lung adenocarcinoma cell lines.

a. indel analysis of 3 distinct mouse oncogene-negative cell lines described in **Figure 6a**. Regions targeted by sg*Nf1*, sg*Rasa1*, and sg*Pten* were PCR amplified and analyzed using Synthego ICE after sanger sequencing. Knockout score represents indels causing frameshift mutations.

b. Immunoblot of 2 oncogene-positive mouse cell lines (MMW398T2 and HC494: *Kras^G12D* and *Trp53* mutant and *Nf1*, *Rasa1*, and *Pten* wild type) and 3 oncogene-negative mouse cell lines to assess loss of Rasa1 and Pten in oncogene-negative cell lines.

c. Immunoblot of 3 distinct oncogene-negative cell-lines treated with 10uM of indicated drugs for 24 hours.

d,f. Drug dose-response matrix depicting % growth inhibition after treatment with various doses of RMC-4550 and capivasertib indicated on the plots. The cell-line used for the generation of each matrix is noted on top of each heatmap.

e,g. Loewe's synergy score was calculated for each drug dose combination shown in **d** and **f**. Synergy score indicates the percentage of inhibition beyond what is expected if there is no interaction between the drugs.

h. Schematic of allograft generation and drug treatment for a mouse oncogene-negative cell line (MY-C3).

i. Appearance of individual subcutaneous tumors after 17 days of vehicle or RMC-4550 and capivasertib treatment.

j. Spider plot indicating growth of individual subcutaneous tumors in response to vehicle or RMC-4550 and capivasertib treatments.

k. Immunoblot of 6 human oncogene-positive and 2 human oncogene-negative cell lines for markers of RAS and PI3K pathway activation.

l. Drug dose-response matrix depicting % growth inhibition of H1623 human oncogene-negative cell line.

m. Loewe's synergy score calculated based on drug responses in **Figure S18l**.