The invasive lobular cancer cell line encyclopedia (ICLE) for studying potential biomarkers and

exploring therapeutic opportunities

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Abstract

Invasive lobular carcinoma (ILC), the most common histological "special type" of breast cancer, accounts for ~10-15% of all breast cancer diagnoses and is characterized by unique clinical features and metastatic spread. Despite the unique pathobiology of ILC, studies of how its molecular alterations can be linked to new treatments have been hindered by the scarcity of well-characterized cell line models. To address this, we generated the ILC Cell Line Encyclopedia (ICLE), a comprehensive multi-omic characterization of cell lines derived from ILC or cell lines referred to as ILC-like derived from unannotated tumors with features of ILC such as loss of E-cadherin. Using consensus multi-omic subtyping, we confirmed the luminal status of previously established ILC cell lines and uncovered additional ILC/ILC-like cell lines with luminal features and RNA/DNA copy number similarity to ILC tumors. ICLE cell lines retained molecular alterations in key ILC genes at a similar frequency to both primary and metastatic ILC tumors. Importantly, ICLE cell lines recapitulated the *CDH1* alteration landscape of ILC tumors including enrichment of truncating mutations and biallelic inactivation of *CDH1*. Optical genome mapping uncovered novel genomic rearrangements including structural variations in *CDH1* and other functional gene fusions and revealed breast cancer specific patterns of chromothripsis in chromosomes 8, 11 and 17. Aberrant DNAm events and integrative analysis with RNA expression revealed epigenetic activation of *TFAP2B*, an emerging biomarker preferentially expressed in lobular disease. Finally, towards the goal of identifying novel druggable vulnerabilities in ILC, publicly available RNAi loss of function breast cancer cell line datasets revealed numerous putative vulnerabilities cytoskeletal components, focal adhesion and

46   PI3K/AKT pathway in ICLE vs NST cell lines. We addressed the lack of suitable models to study E-

47   cadherin deficient breast cancers by comprehensively characterizing multi-omic features of

48   both established and putative ILC models and showed their similarity to tumors and

49   highlighting novel druggable vulnerabilities.

Introduction

Invasive lobular carcinoma (ILC), the most common histological "special type" of breast cancer (BC), accounts for approximately 10-15% of all BC diagnoses. It is characterized by unique features such as E-cadherin loss/deficiency, lower grade, hormone receptor positivity, larger diffuse tumors, distinctive metastatic patterns and unique molecular alterations (1–7). Despite ILC being acknowledged as a disease with distinct biology that necessitates specialized and precision medicine treatments, the identification of new treatments has been hindered by the scarcity of well-characterized cell line models (8–10).

Pioneering large-scale cancer cell line characterization studies, including those by Ghandi et al (11), Marcotte et al (12), Iorio et al (13), and others (14,15), have revealed multi-omic molecular attributes and gene dependencies of diverse cancer cell lines. These investigations have facilitated a systematic selection of preclinical models that mirror the molecular characteristics of human cancers, enabling a more precise modeling of specific subtypes of breast cancer (such as the claudin-low and HER2-enriched types) and the exploration of their unique molecular alterations within the context of tumor initiation, progression, metastasis, resistance to treatments, and the development of new therapies (12–14,16). Comprehensive multi-omic characterization of cancer cell lines has been invaluable in advancing precision medicine research (14,16–23). However, a mere eight ILC cell lines have been established and made publicly available, of which only four (namely MDAMB134VI, MDAMB330, SUM44PE and BCK4) are established ER+ cell lines and are frequently utilized for modeling human-ILC disease (8,9,24–27). The remaining ILC cell lines have been inadequately

characterized with only a few literature reports mentioning their use (8,9). Several factors can

explain this limited availability and poor characterization including the lower incidence of ILC,

the fewer number of ILC cases enrolled in clinical trials, the recent understanding of ILC as a

unique disease, the fact that certain ILC cell lines are not yet publicly available/purchasable

(including MA11 and WCRC25), and the intrinsic characteristics of ILC that make it challenging

to culture them as cell lines (2,8,9,28).

The RATHER consortium previously noted that a number of breast cancer cell lines

annotated as "carcinoma", "adenocarcinoma" or "ductal carcinoma" harbor genomic loss of

CDH1 or its binding partner *CTNNA1* (29). These cell lines were labeled as "ILC-like" cell lines

and proposed as potential models to study ILC. However, since many of these ILC-like cell lines

were established before ILC was recognized as a unique disease, it remains unclear whether

these cell lines originated from ILC tumors or could serve as faithful models of this disease.

To address this, we generated the ILC Cell Line Encyclopedia (ICLE), a comprehensive

multi-omic characterization of ILC and ILC-like cell lines. ICLE cell lines exhibited pathognomonic

E-cadherin deficiency and retained key ILC molecular alterations seen in tumors. Through

optical genome mapping, we characterized chromothripsis events and discovered novel

genomic rearrangements, including new structural deletions in *CDH1* and other functional gene

fusions. Additionally, we systematically analyzed aberrant DNAm events and integrative

analysis with RNA expression revealed the epigenetic regulation of *TFAP2B*, a putative lobular

biomarker. Analysis of RNAi/CRISPR screens revealed druggable targets in PI3K/mTOR and focal

adhesion pathways. Finally, we propose a qualitative and quantitative scheme to aid in rational

selection of ICLE cell lines for modeling human ILC disease. In summary, we generated ICLE the

first ILC cell line encyclopedia, highlighting key molecular features, cataloging druggable targets

and presenting a scheme for rational model selection.

Materials and Methods

Multi-omic Profiling of ILC and ILC-like Cell Lines

<u>ILC/ILC-like Cell Line Collection, Culturing and Extraction of RNA, DNA and protein lysates:</u>

All known *CDH1*/E-cadherin or *CTNNA1*/α-catenin deficient ILC/ILC-like cell lines have been

reported in the literature (ILC-like cell lines were reported in Michaut et al study (29))

(Supplementary Table S1). Two ILC-like cell lines (SKBR5 and ESVA-T) were not purchasable at

the time of collection and were excluded from the study. WCRC25, an ILC cell line established

and reported in our previous study (30) was also included in this study. The final panel

comprising of 17 ILC/ILC-like cell lines, that were either purchased from a vendor or acquired

through material transfer agreement (MTA), included BCK4 (Asterand), CAMA1 (ATCC),

MDAMB134VI (ATCC), HCC2185 (ATCC), IPH926 (DSMZ), MDAMB330 (ATCC), SUM44PE

(Asterand), UACC3133 (ATCC), WCRC25 (inhouse), 600MPE (Asterand), HCC1187 (ATCC),

HCC2218 (ATCC), MDAMB453 (ATCC), MDAMB468 (ATCC), SKBR3 (ATCC), OCUBM (MTA - Riken)

and Z7530 (ATCC). All cell lines were cultured using the vendor recommended media conditions

and underwent STR profiling based authenticated at the Arizona genetics core. All cell lines

were routinely (after every few passages and before extraction of RNA, DNA and protein

lysates) assayed to avoid Mycoplasma contamination using Lonza MycoAltert mycoplasma

detection kit (Cat # LT07-118) and/or ABM mycoplasma PCR detection kit (Cat # G238) as per

manufacturer's instructions. Cell lines were grown in 150mm plates and used for RNA, DNA,

and protein lysate collection when at ~70% confluency. DNA extraction was performed using

Qiagen QIAamp DNA mini kit (Cat # 56304) and RNA extraction using Qiagen RNeasy kit (Cat #

74004) as per vendor recommendations. All DNA/RNA samples showed high quality (260/280

ratio ~1.8 for DNA and ~2.0 for RNA) using NanoDrop (Cat # ND-2000). Protein lysates were

prepared in accordance with the MD-Anderson RPPA core facility

(https://www.mdanderson.org/research/research-resources/core-facilities/functional-

proteomics-rppa-core/antibody-information-and-protocols.html) (31).

RNA sequencing (RNAseq) and data analysis: Extracted total RNA for all cell lines was sent

to the UPMC Genome Center for RNAseq library preparation and sequencing. Briefly, RNA

concentrations were quantified by ThermoFisher Qubit (Cat # Q33238) and their size

distribution measured by Agilent TapeStation (Cat # G2991AA). Paired-end RNAseq libraries

were prepared using KAPA poly A RNA hyperPrep kit (Cat # 8098093702), and sequenced with

NovaSeq 6000 for a target of 100 million reads/sample using S1 reagents for 300 cycles, 0.8

billion reads and total output of 250G (Cat # 20028317). Quality control of fastq files was

performed using FastQC v0.11.9 (32) and summarized with multiQC (33). fastq files were

aligned to hg38 reference transcriptome using STAR v2.7.5a (34) and gene count files generated

using subread v2.0.1 featureCounts function (35). Gene counts were converted to counts per

million (CPM) and log2 normalized using EdgeR (36) for downstream analyses in R (37). Ghandi

et al 2019 (CCLE study) (11) RNAseq files were reprocessed using the pipeline described above

and then gene counts merged with ICLE dataset to generate an integrated breast cancer cell

line gene count matrix. Sensitivity to endocrine therapy was predicted using difference

between ERpos and ERneg gene signatures as described previously (38).

<u>Whole-exome sequencing (WES) and data analysis</u>: Extracted DNA for all cancer cell lines

(plus two control blood lines HCC1187BL and HCC2218BL) was sent to the UPMC Genome

Center for WES library preparation and sequencing. Paired end libraries were prepared using

Roche KAPA Hyper Plus Kit (Cat # 09075810001). Briefly, 500 ng of DNA was processed by

fragmentation, enzymatic end repair, A-tailing and ligation. Quality control was done using

Agilent Fragment analyzer. Exonic regions were captured using IDT xGen Exome Research Panel

v1.0 (Cat # 1056114) with xGen Universal Blockers (Cat # 1075474) and Roche KAPA HyperCap

workflow 3.0 (Roche) according to manufacturer protocol. The library size assessment was

done using Fragment Analyzer (Agilent). Libraries with an average size of 400 bp (range: 200-

600bp) were quantified by qPCR on the LightCycler 480 (Roche) using the KAPA qPCR

quantification kit (Roche). The libraries were normalized and pooled as per manufacturer

protocol (Illumina). Sequencing was performed using NovaSeq 6000 platform (Illumina) with

151 paired-end reads to an average target depth of 30-50X for germline and 125X coverage for

somatic samples using S1 reagents for 300 cycles, 0.8 billion reads and total output of 250G (Cat

20028317). Quality control of fastq files was performed using FastQC tool (32) and aligned to

hg38 using BWA MEM tool (39). Variant calling was performed as per GATK best practices

([Somatic short variant discovery (SNVs + Indels) – GATK (broadinstitute.org)](#)). Briefly, GATK v4

MuTect2 pipeline (40) was used for calling single nucleotide variations (SNV) and indels with

default parameters using HCC1187BL and HCC2218BL blood lines as normal control. All

mutations were annotated using Ensemble variant effect predictor (VEP) (41) and converted to

MAF format. Common polymorphisms (present in 1000genome database (42)), silent mutations

and mutations with allele frequency < 10% were removed before further analyses. Ghandi et al

2019 (CCLE study) MAF files filtered in similar way and merged with ICLE dataset to generate an

integrated breast cancer cell line MAF file for downstream use. Tumor mutation burden (TMB)

was computed using R package Maftools (43). Exonic deletions in *CDH1* and *CTNNA1* gene

canonical isoforms were identified using samtools bedcov function.

Bionano optical genome mapping (OGM): Frozen cell pellets containing at least 1.5

million cells were sent to Bionano Genomics Core, CA for OGM. Briefly, high molecular weight

DNA (≥ 150 kbp) was extracted using Bionano SP Blood and Cell Culture DNA Isolation Kit (Cat #

80042). DNA concentrations were measured using Qubit Broad Range assay (Cat # Q32850) and

labelled using Bionano Direct Label and Stain (DLS) labelling kit (Cat # 80005). Labelled DNA was

transferred to a flow cell of a Saphyr G2.3. chip (Cat # 20366) and scanned repeatedly using a

Saphyr System with Bionano Access Server (Cat # 90067). The resulting images of molecules

were converted to digital molecules. These molecules were aligned to reference genome maps

to result in consensus whole-genome maps. Bionano solve v3.5 rare variant analysis and copy

number analysis pipelines were used to detect structural variations, copy number variations

and fusions at a minimum lower resolution of 5KB. The resulting structural variations were

filtered against a panel of controls to remove pipeline artifacts and germline variations using

Bionano Access Software v1.7. Filtered data was downloaded and further analyzed in R. All

structural variations were categorized as one of the following: deletions (Del), insertions (Ins),

inversions (Inv), duplications (Dup), inter-chromosomal translocations (Transloc-inter), and

intra-chromosomal translocations (Transloc-intra). Correlation between structural variation

count, mutation count and chromosome size were performed using Pearson correlation.

Chromothripsis events were characterized using shatterseek tool using default parameters (44).

Circos plots were generated using interacCricos (45).

Reverse Phase Protein Array (RPPA): Protein lysates were sonicated and centrifuged at

14000rpm. Protein concentrations were determined by BCA. Then lysates were mixed with 4X

SDS to have final concentration of 1ug/ml and then sent to RPPA core facility at MD Anderson

Cancer Center, TX for RPPA. Briefly, the lysate was diluted and arrayed on nitrocellulose-coated

slides and probed with antibodies to recognize signaling molecules. Signals are captured by DAB

colorimetric reaction followed by spots are detection, background correction (using internal

controls) and spot quality control. Curve fitting is used to quantify net relative concentrations

and data is normalized for loading differences and other sources of variations. Final data

comprised of ~450 proteins and phospho-proteins. Marcotte et al 2016 (Neel Lab) (12)

normalized RPPA dataset was merged with normalized ICLE RPPA dataset to generate an

integrated breast cancer cell RPPA dataset for downstream use.

Illumina DNA Methylation (DNAm) Array: Extracted DNA for all cell lines (except SKRB-3)

was sent to University of Pittsburgh Genomic Research Core for DNA methylation profiling

using Illumina Infinium Methylation EPIC BeadChip Kit (Cat # WG-317-1001). Briefly, DNA was

quantified by Qubit and 500ng of DNA per sample was bisulfite converted using Zymo EZ DNA

methylation kit (Cat # D5003) following vender recommendations. Bisulfite-converted DNA was

hybridized to BeadChips and analyzed on an Illumina iScan as per vender recommendations.

Resulting raw IDAT files underwent quality control and preprocessing to result in B-values for

850K methylation probes using R package SeSAMe (46). B values were defined as SM/(SM + SU)

for each methylation probe, where SM and SU represent signal intensities for methylated and

unmethylated alleles. Probes with P value > 0.05 were masked as NA before downstream

analysis. Probes were annotated for genomic context using Infinium annotations (47). Iorio et al

2016 (Sanger) (13) Infinium Methylation 450K array dataset was reprocessed using the pipeline

described above and merged with ICLE EPIC array dataset to generate an integrated breast

cancer DNAm dataset for downstream use.

Illumina CytoSNP Array: Extracted DNA for all cell lines (except SKRB-3) was sent to

University of Pittsburgh Genomic Research Core for SNP profiling using Illumina Infinium

CytoSNP-850K v1.2 BeadChip Kit (Cat # 20025644). Briefly, DNA was quantified using Qubit and

750 ng of DNA was amplified, fragmented, precipitated and hybridized to BeadChips and then

analyzed on an Illumina iScan as per vendor protocol. Resulting raw IDAT files underwent

quality control and preprocessing using Illumina Genome Studio version 2.0. Copy number (CN)

analysis was performed using its CNVpartition v3.2.0 plugin. Copy number logR-ratio, B-allele

frequencies (BAF) and genotype calls were exported and further analyzed in R. Copy number

data was segmented using R package DNAcopy (48) and significantly amplified and deleted

regions across samples were identified using GISTIC analysis (49). Marcotte et al 2016 (Neel

Lab) (12) Illumina Omni Quad CN and SNP dataset was reprocessed using above pipeline and

merged with ICLE CN and SNP dataset to generate integrated breast cancer cell line CN and SNP

dataset. Fraction of genome altered (FGA) was computed using R package CINmeterics (50) by

using segmented copy number.

The generated ICLE dataset data types are summarized in Supplementary Table S2, and

the public datasets used for integration are summarized in Supplementary Table S3. The

overlapping cell lines between ICLE and other public datasets showed strong genotyping

similarity (Supplementary Figure S1). Mutations and copy number alterations were combined to

define a single molecular/genomic alterations matrix for use in downstream analyses. All

alterations were summarized into the following categories: mutation (MUT), mutation + LOH

(MUT;LOH), mutation + single copy gain (MUT;GAIN), amplification (AMP) and deletions (DEL).

Molecular Subtypes

PAM50 subtyping was performed using R package genefu (51). This tool uses the method

established in the Parker et al study (52). Briefly, Parker et al identified 50 genes that define

transcriptional subtypes of breast cancer. Based on this training cohort of N=139, genefu

computes PAM50 scores for a given input data. The PAM50 scores represent the correlation

strength of each input sample to each PAM50 centroid in the training dataset. Final PAM50

subtype is defined as the one to which a given input sample has the strongest correlation score.

Consensus Clustering was performed individually on each integrated dataset to identify

mRNA, RPPA and DNAm subtypes using ConsensusClusterPlus R (53). Briefly,

ConsensusClusterPlus function was run on top 10% variable features with 1000 repeats and K =

9. Resulting clusters were evaluated based on their molecular features including E-cadherin, ER-

A, PR, HER2, Cluadin-7 protein levels and ERpos/ERneg gene signature (adapted from Symmans

et al (38)) scores. ERpos/ERneg signature scores were defined as mean expression of CPM

values of each gene in the signature. Clusters with similar molecular features were combined

into a single cluster. Final subtypes were defined as following; Luminal (Lum) subtype

comprised of cell lines with high ER-A/PR and low HER2/phospho-HER2 expression and had high

ERpos gene signature score, HER2 subtype comprised of cell lines with low ER-A/PR and very

high HER2/phospho-HER2 protein expression (due to HER2/ERBB2 gene amplifications) and had

low ERpos gene signature score, Luminal/HER2 (Lum/HER2) subtype comprised of cell lines with

high HER2/phospho-HER2 expression (due to HER2/ERBB2 gene amplifications) but unlike HER2

subtype showed similarity to Lum cluster and also had medium to high ERpos gene signature

score, Basal subtype comprised of low ER-A/PR/HER2 cell lines and finally Claudin low

(ClaudinLow) subtype comprised of basal cell lines which also had low levels of Claudin-7, a

subset of ClaudinLow subtype cells showed down-regulation of E-cadherin and epithelial to

mesenchymal (EMT) phenotype and were referred to as ClaudinLow/EMT. The results are

shown in Supplementary Figure S2-S4 A-D and Figure 1B.

Molecular Resemblance to Tumors & *CDH1* Alteration Landscape

The molecular resemblance of ILC/ILC-like cell lines to ILC tumors was assessed by

comparing copy number profiles and molecular alteration frequency in key ILC genes. TCGA

Primary ILC tumor (3) and MSK Metastatic ILC tumor (54) genome-wide segmented copy

number, gene-level GISTIC values and mutation MAF datasets were acquired from cbioportal

(55). Genome-wide segmented copy number profiles were visualized using integrative

genomics viewer (IGV) (56) and key copy number events were visually compared between

tumors and with cell lines. For a more quantitative comparison, we quantified similarity of

tumor and cell line copy number profiles by Pearson correlation. Since there is a strong

association between copy number values for genomically proximal loci the required data

independence assumptions are invalidated. Instead, we used a sampling approach by randomly

selecting 5 genes per genomic cytoband. Copy number values for these randomly selected

genes in all cell lines were correlated with mean copy number profiles of TCGA ILC tumors

(Figure 6B). Similarly, we quantified similarity of tumors and cell lines RNA expression using

Pearson correlation. Since tumors also comprise of stroma, only the top 100 highly and lowly

expressed genes in ILC tumors were used for correlation between all cell lines with mean

expression of TCGA ILC tumors (Figure 6B).

Molecular/genomic alteration matrix for primary and metastatic ILC tumors was defined

as described above for ILC/ILC-like cell lines. Frequency of molecular alterations (MUT,

MUT;LOH, MUT;GAIN, AMP, and DEL) in ILC and other clinically actionable breast cancer genes

defined by ESCAT (ESMO Scale for Clinical Actionability of Molecular Targets) (6,57) were

compared between tumors and cell lines. Enrichment of specific gene molecular alterations in

tumors vs ILC/ILC-like cell lines was computed using fisher exact test. Key oncogenic pathways

used in Supplementary Figure S12 were adapted from a previous study (58).

To evaluate *CDH1* alteration landscape in tumors and cell lines, we performed

integrative analysis multi-omic datasets including RNA expression, RPPA, mutations and copy

number. TCGA ILC and NST tumors datasets were acquired from cbioportal (3,55) and

integrated breast cell line datasets generated above were analyzed together. RNA and RPPA

values were row normalized in and cell lines datasets separately. Only truncating (non-sense,

nonstop, frame shift and splice site mutations) and missense mutations were considered in this

analysis. *CDH1* mutation lollipop plot was generated using protein paint webtool

(https://proteinpaint.stjude.org/) (59). Enrichment of *CDH1* biallelic alterations (MUT+LOH and

Dual Loss) in ILC tumors and ILC/ILC cell lines vs NST tumors and NST cell lines was computed

using fisher exact test.

E-cadherin and p120-catenin Immunofluorescence

ILC/ILC-like cell line immunofluorescent analysis using E-cadherin and p120-catenin was

performed as described in our previous study (60). Briefly, cells were plated at a density of

100,000–200,000 cells/well on glass coverslips in 24-well plates, fixed on ice in ice-cold

methanol for 30 minutes and blocked in blocking buffer (0.3% Triton X-100, 5% BSA, 1X DPBS)

for 1 hour at room temperature. Primary antibody incubation was performed overnight at 4°C:

Cell Signaling Technology E-cadherin (Cat # 3195) and BD Biosciences p120 catenin (Cat #

610134). Secondary antibody incubation was done for 1 hour at room temperature followed by

Thermo Fisher Scientific Hoechst 33342 (Cat # 62249) staining. Coverslips were mounted with

Polysciences Aqua-Poly/Mount (Cat # 18606–20) and images were taken on a Nikon A1

confocal microscope. This experiment was performed by Dr. Laura Savariau.

Aberrant DNA Methylation Events and Epigenetic Activation of *TFAP2B* Gene

To evaluate DNA methylation (DNAm) in breast cancer tumors, we utilized TCGA

HM450K array dataset that was preprocessed using Sesame tool (46) by Silva et al in their

recent publication (61). The DNAm instability (DMI) index per sample was computed by

cumulative addition of DNAm deviations from control samples (tumor adjacent normal tissue).

Briefly, DMI per sample was computed by adding all the differences between B-value of each

probe compared that probes mean B-value in tumor adjacent normals. The resulting DMI

scores were normalized against the tumor adjacent normals resulting in DMI z-scores.

To identify aberrant DNAm events in breast cancer tumors. Briefly, for each tumor the

methylation intensity i.e., B-values of probe were compared to its distribution in tumor

adjacent normal population. This allowed us to identify aberrantly methylated probes i.e.,

hyper- or hypo- methylated in tumor samples compared to normal samples. Hyper- and hypo-

methylated probe frequency was compared between luminal A ILC vs NST tumors to identify

aberrantly methylated probes in lobular disease (Figure 4C).

DNAm of all probes mapping to *TFAP2B* promoter region, defined as +/- 300bp of the

transcription start site (TSS), and their effect on *TFAP2B* gene expression was investigated using

Pearson correlation. Two probes mapping to *TFAP2B* gene TSS/exon 1 (cg25593948) and exon 2

(cg27260772) showed the strongest negative correlation with gene expression. Same probes

were evaluated in TCGA HM450 dataset. Differential methylation analysis of TCGA Luminal-A

ILC vs NST tumors using DNAm B-values was performed using R package Limma (62). Significant

differentially methylated probes were defined as effect size > 0.1 and adjusted p-value < 0.05.

These probes were mapped to genes using Infinium annotations (47). *TFAP2B* was the only

gene with the highest number of differentially methylated probes (N = 12) as shown in

Supplementary Figure S6B,C.

Identification of Functional Fusions

Putative fusions identified from OGM were further evaluated to see whether they had

any gain or loss of expression of one or both fused genes. This resulted in fusions that had

functional effects on the fused genes, hereafter referred to as functional fusions. Association of

specific structural variation types (Del, Ins, Inv, Dup, Transloc-inter and Transloc-intra) and

chromothripsis events with presence of functional fusions was computed using fisher exact

test. Frequency of functional fusions in cell lines was compared those in tumor fusions using

tumorfusion dataset (https://www.tumorfusions.org/) (63).

Differential Gene Dependencies

To identify gene dependencies in ILC/ILC-like cell lines we utilized Marcotte el al 2016

(Neel Lab) RNAi loss of function screen dataset. There was data available for the following 10

ILC/ILC-like cell lines; MDAMB330, MDAMB134VI, CAMA1, HCC2218, OCUBM, SKBR3,

MDAMB453, 600MPE, HCC2185 and SUM44PE and 12 luminal NST cell lines (Figure 19A). To

perform differential dependency analysis, we utilized a consensus approach where differential

dependencies were identified using three different algorithms. The original RNAi comprised of

zGARP values. Same RNAi dataset reprocessed using DEMETER2 was acquired from DepMap

(DepMap: The Cancer Dependency Map Project at Broad Institute) (16). Both zGARP and

DEMETER2 values underwent differential analysis using R package Limma (62). The final tool

used for processing and differential analysis was R package siMEM (12) using default

parameters. Consensus differential dependencies were curated from individual differential

analyses (p-value < 0.05) using zGARP, DEMETER2 and siMEM. Consensus differential

dependencies showing higher dependency in ILC/ILC-like cell lines were defined as high

dependency and vice versa as low dependency genes. Geneset enrichment of high and low

dependency genes using hypergeometric test was performed using R package hypeR (64).

Druggable dependencies were identified by queries high and low dependency genes in drug

gene interaction database (dgidb.org/) (65).

Data Availability

All data generated in this study is available in the supplementary files and on our local

cbioportal instance (https://cbioportal.crc.pitt.edu/).

Figures & Illustrations

Most bioinformatic analysis visualizations were generated using R packages

ComplexHeatmap (66) and ggplot2 (67). Mutational lollipop plot was made using

proteinpaint.stjude.org (59). These visualizations were aesthetically improved in power point to

produce the final figures. Some illustrations including an overview of ICLE were prepared using

BioRender.com.

Results

Multi-omic Characterization of ILC and ILC-like Cell Lines

We initiated the ILC cell line encyclopedia (ICLE) by collection of all available *CDH1*/E-cadherin or *CTNNA1*/α-catenin deficient ILC and ILC-like cell lines. Two ILC-like cell lines (SKBR5 and ESVA-T) were not publicly purchasable at the time of project initiation. The final ICLE cell line panel included a total of 17 cell lines including 8 ILC and 9 ILC-like cell lines (Supplementary Table S1). ICLE cell lines underwent molecular characterization using various multi-omics assays including optical genome mapping (OGM), whole-exome sequencing (WES), RNA sequencing (mRNAseq), reverse-phase protein array (RPPA), DNA methylation (DNAm) array and SNP array (Figure 1A and Supplementary Table S1). ICLE datasets were integrated with public datasets containing NST cell lines for downstream analyses (Supplementary Table S2). Comparison of genotype calls between ICLE and Marcotte et al (12) datasets showed strong similarity indicating that the same cell line variants were profiled in this and previously published datasets (Supplementary Figure S1).

Consensus clustering mRNA, RPPA and DNAm datasets revealed concordant molecular subtypes across three datatypes with mRNA subtypes being the most granular and refined (Figure 1B and Supplementary Figures S2, S3 and S4). Using mRNA subtyping, five ILC/ILC-like cell lines were categorized as Luminal (Lum), 9 as luminal/HER2 (Lum/HER2) and the remaining 3 were grouped into HER2, Basal and Claudin Low (Claudin/Low) subtypes (Figure 1B). Both mRNA subtypes and PAM50 based intrinsic molecular subtypes classified known ER+/luminal

cell lines (such as MDAMB134VI, BCK4, SUM44PE, CAMA1 and MDAMB330) as Luminal

(Supplementary Figure S2A,D). However, unlike mRNA subtyping, PAM50 based subtyping

failed to characterize SKBR3, a known HER2 cell line, correctly as the HER2-enriched subtype

(Supplementary Figure S2A,D). Indeed, PAM50 based molecular subtyping was developed for

tumor datasets (51,52) and may not be suitable for cell line datasets. Consensus clustering

based mRNA subtypes revealed cell lines (600MPE, UACC3133, HCC2185, WCRC25, IPH926,

HCC2218, ZR7530, OCUBM, MDAMB453) with both luminal and HER2 features by grouping

them into Lum/HER2 subtype. Since most ILC tumors are estrogen receptor alpha (ER-A)

positive and luminal in nature, the best models would be ER-A+/luminal ILC/ILC-like cell lines.

Most ILC/ILC-like cell lines were Lum or Lum/HER2 subtype (Figure 1B) and notably, several

Lum/HER2 ILC/ILC-like cell lines despite having low levels of ER-A/PR retained high expression

of ER target genes associated with ER+ tumors (i.e., ERpos gene signature) as well as had high

score for inferred sensitivity to endocrine therapy (Figure 1C; Supplementary Figure S2A).

Indeed, most (N = 14) ILC/ILC-like fell into luminal subtype in line with the observation that

most ILC tumors are of luminal subtype (3). Importantly, previous studies show that ILC cell

lines derived from ER+ ILC tumors (such as IPH926) may lose ER expression but retain their

luminal gene expression pattern (68).

Multi-omic features of profiled ILC/ILC-like cell lines are shown in Figure 1D and

Supplementary Table S1. All Lum cell lines showed high levels of ER-A and/or PR while low

levels of HER2/phospho-HER2 (except MDMAB330, a HER2/ERBB2 amplified cell line). Similarly,

Lum cell lines (except for MDAMB330) overall showed a lower frequency of structural

variations (SV), fusions and tumor mutational burden (TMB). On the other hand, Lum/HER2 cell

lines had low levels of ER-A/PR, but high levels of HER2/phosphor-HER2 (in cell lines with

HER2/ERBB2 mutations and amplifications). Moreover, they also had higher frequency of SVs,

fusions and TMB with exception of WCRC25 which also showed lowest fraction of genome

altered (FGA). Both OCUBM and MDAMB453 showed the highest TMB (>10 mutations per

megabase) indicating a hypermutator phenotype. Non-luminal cell lines including SKBR3,

HCC1187 and MDAMB468 lacked ER-A/PR and showed a higher frequency of SVs and high TMB.

SKBR3 showed *ERBB2* amplification and consequently had higher levels HER2/phospho-HER2

while the other two cell lines lacked HER2 expression and were triple negative. All cell lines

showed either *CDH1* or *CTNNA1* mutation as expected. Almost all showed *TP53* mutations or

deletions except for BCK4 and ZR7530. Four cell lines showed alterations in *PIK3CA* and three in

PTEN (both genes are components of oncogenic PI3K/AKT signaling) (58). Finally, only two cell

lines had mutations in *BRCA2* including IPH926 (at 98% allele frequency indicating early event)

and ZR7530 (at 32% allele frequency indicating later event in evolution).

Molecular Resemblance of Cell Lines to ILC Tumors

Breast cancers are driven by copy number alterations and major subtypes such as luminal,

HER2 and basal subtypes each have distinct copy number profiles (3,69,70). Comparison of cell

line copy number profiles to tumors provides a valuable tool for assessment of genome-wide

molecular resemblance (12,71). Towards this goal, we compared copy number profiles of Lum,

Lum/HER2 and non-luminal/Other ILC/ILC-like cell lines with those of tumors. As most ILC/ILC-

like cell lines were derived from metastatic lesion or ascites fluids (8), we included comparison

with both primary and metastatic ILC tumors from TCGA (3) and MSK (54), respectively.

Notably, both primary and metastatic ILC tumors showed very similar copy number profiles

(Figure 1E) reminiscent of luminal tumors (70). Overall, Lum cell lines showed most similar copy

number profiles to primary and metastatic ILC tumors followed by Lum/HER2 cell lines. Both

Lum and Lum/HER2 subtype ILC/ILC-like cell lines showed high frequency of following

chromosomal arm copy number alterations; 1p-, 1q+, 6p+, 8p+, 8q-, 11q-, 13p/q-, 16p+, 16q-

(contains the *CDH1* gene), 17q+ and 18p/q- events. Three non-luminal subtype cell lines were

grouped together into the "Other" subtype category. As expected, both MDAMB468 (basal

subtype) and HCC1187 (claudinLow subtype) cell lines showed distinct copy number profiles

and harbored 1p+ and 11p/q+ which were largely absent in other cell lines and tumors (72). On

the other hand, SKBR3 (HER2 subtype) showed more resemblance to its luminal counterparts

than its triple negative group members and harbored 1p-, 1q+,16q- and 18p/q-.

In addition to genome-wide copy number alterations, single nucleotide

variations/alterations or mutations play a critical role in breast cancer initiation and

progression. For example, *CDH1* mutations are very common in ILC tumors and involved in

tumorigenesis (73,74), while *GATA3* and *MAP3K1* mutations are more frequent in tumors (3)

(Supplementary Figure S5A). In line with the Knudson "two hit" hypothesis, tumor suppressor

genes such as *CDH1* and *TP53* showed biallelic inactivation and harbored two molecular

alterations e.g., truncating mutation in one allele and copy number loss of the second allele or

loss of heterozygosity (LOH) (Supplementary Figure S5A,B). To further assess molecular

resemblance of ILC/ILC-like cell lines to ILC tumors, we compared frequency of molecular

alterations in key ILC genes and other clinically actionable genes between ILC/ILC-like cell lines

vs primary or metastatic ILC tumors (Figure 1F). To identify whether frequency of key

alterations in ILC/ILC-like cell lines is similar or distinct from tumors we performed fisher's exact

test. ILC/ILC-like cell lines retained molecular alterations at a similar frequency (fisher exact test

non-significant) to primary and metastatic tumors in key ILC genes including *CDH1* (82% in cell

lines vs 65% in primary tumors and 80% in metastatic tumors), *PTEN* (18% in cell lines vs 13% in

primary tumors and 13% in metastatic tumors), *TBX3* (18% in cell lines vs 16% in primary

tumors and 10% in metastatic tumors) and *FOXA1* (12% in cell lines vs 7% in primary tumors

and 13% in metastatic tumors). In addition, ILC/ILC-like cell lines also retained similar frequency

(fisher exact test non-significant) of molecular alterations in numerous other key breast cancer

and clinically actionable genes including *PIK3CA* (24% in cell lines vs 49% in primary tumors and

45% in metastatic tumors), *CCND1* (29% in cell lines vs 17% in primary tumors and 20% in

metastatic tumors) and *FGFR1* (18% in cell lines vs 9% in primary tumors and 3% in metastatic

tumors). However, unlike tumors, ILC/ILC-like cell lines showed a higher frequency (and

enrichment) of molecular alterations in the following genes; *TP53* (88% in cell lines vs 8% in

primary tumors and 20% in metastatic tumors), *ERBB2* (47% in cell lines vs 11% in primary

tumors and 13% in metastatic tumors), *BRIP1* (29% in cell lines vs 6% in primary tumors and 1%

in metastatic tumors), *PPM1D* (35% in cell lines vs 5% in primary tumors and 2% in metastatic

tumors), *NF1* (24% in cell lines vs 4% in primary tumors and 7% in metastatic tumors), and

ARID1B (12% in cell lines vs 1% in primary tumors and 2% in metastatic tumors). Interestingly,

several of these genes are found on chromosome 17 (*TP53* on 17p13.1, *ERBB2* on 17q12, *BRIP1*

on 17q23, and *PPM1D* on 17q23). Both *BRIP1* and *PPM1D* were the same 17q23.2 locus and

were co-amplified in all altered cell lines (Supplementary Figure S5B).

All ILC/ILC-like cell lines showed mutations in *CDH1* (E-cadherin) or *CTNNA1* (α-catenin)

(Figure 1D) and thus we hypothesized that these cell lines will have aberrant adherens junction

like ILC. To confirm, we performed immunofluorescence on 17 ILC/ILC-like cell lines

(Supplementary Figure S7). As expected, ILC/ILC-like cell lines, similar to ILC tumors, showed

aberrant adherens junctions defined by lack of membranous E-cadherin and/or cytoplasmic

p120 staining (Figure 2A). Some ILC/ILC-like cell lines, including OCUBM, MDAMB134VII,

HCC2218, SKBR3, HCC2185 and MDAMB468 did not harbor base pair mutations in the *CDH1* or

CTNNA1 gene and yet showed aberrant adherens junctions. We comprehensively analyzed

molecular alterations in the *CDH1* and *CTNNA1* gene loci to understand the underpinnings of

this phenotype in these cell lines. Using optical genome mapping, we found that three of these

cell lines, HCC2185, HCC2218 and SKBR3, had large scale structural deletions in the *CDH1* gene

along with LOH (Figure 2B). Both MDAMB13VII and OCUBM had exonic deletions in the *CDH1*

genes along with LOH (Figure 2C) and MDAMB468 had a exonic deletion in the *CTNNA1* gene

(Figure 2C). Thus, DNA structural rearrangements in *CDH1* in ILC cell lines are common.

Notably, almost all *CDH1* mutations occurring in ILC tumors and ILC/ILC-like cell lines were

truncating in nature i.e., resulting in loss of E-cadherin protein, while *CDH1* mutations, which

were rarely seen in NST tumors and cell lines, were miss-sense in nature and did not affect E-

cadherin protein levels (Figure 2D). Moreover, all *CDH1* mutations in ILC/ILC-like cell lines had

near 100% allele frequency indicating these were clonal events that occurred early in evolution,

while those in NST cell lines, except CAL-148 which had a clonal silent mutation, occurred at

~50% allele frequency indicating sub-clonal events that occurred later in evolution

(Supplementary Figure S5C). Overall, biallelic inactivation of *CDH1,* via either short variant plus

LOH (MUT+LOH) or large/exonic deletion plus LOH (Dual loss), was significantly enriched in

both ILC vs NST tumors (p < 0.0001) and ILC/ILC-like vs NST cell lines (p < 0.0001) (Figure 2E).

The multi-omic *CDH1* alterations landscape in breast cancer tumors and cell lines is illustrated

shown in Figure 2F. Overall, ILC/ILC-like cell lines showed enrichment of both *CDH1* mutations,

copy number loss, low mRNA and E-cadherin protein levels similar to like ILC tumors. Unlike ILC

tumors and ILC/ILC-like cell lines, many NST tumors and cell lines showed *CDH1* copy number

gains.

In summary, most ILC/ILC-like cell lines were of Lum or Lum/HER2 subtype and showed

high activity of ERpos gene signature as well as high score for inferred sensitivity to endocrine

therapy. Moreover, they showed similar copy number profiles to ILC tumors and retained

molecular alterations in key ILC genes at similar frequency to tumors. Notably, most ILC/ILC-like

cell lines recapitulated the *CDH1* alterations of ILC and showed concomitant disruption of

adherens junctions.

Characterization of Whole-Genome Structural Variations, Chromothripsis Events and

Functional Gene Fusions

DNA structural rearrangements and complex chromothripsis events have been largely

uncharacterized in ILC/ILC-like cell lines. We performed optical genome mapping (OGM) of

ILC/ILC-like cell lines (Figure 3A , Supplementary Figure S8). The most frequent type of

structural rearrangement was deletions (Del, N = 1528), and least common was inversions (Inv,

N = 166). However, if combined, intra-chromosomal and inter-chromosomal translocations

together were the most abundant (N = 1942) type of structural rearrangement. Overall, Lum

ILC/ILC-like cell lines (except for MDAMB330) had a lower frequency of structural

rearrangements than other subtypes with BCK4 having the fewest and SKBR3 (HER2 subtype)

having the highest structural rearrangements, indicating that Lum cell lines were genomically

more stable than Lum/HER2 and non-luminal cell lines (Figure 3A). Moreover, the frequency of

structural rearrangements showed significant correlation (R = 0.58, p = 0.03) with the frequency

of mutations or TMB (Supplementary Figure S9A) suggesting that genomically unstable cell lines

may have a higher frequency of both structural rearrangements and mutations. Moreover,

unlike in the case of mutations, where its frequency was strongly correlated (R=0.65, p =

0.00081) with chromosomal size i.e., more mutations were found in longer chromosomes such

as chromosome 1 (Supplementary Figure S9D,G), the frequency of structural variations did not

show significant correlation with chromosome size (R = 0.33, p = 0.13, Supplementary Figure

S9C,F). However, there was a much stronger yet imperfect correlation between frequency of

non-translocation structural rearrangements and chromosomal size (R = 0.5, p = 0.014,

Supplementary Figure S9E). This suggested that unlike mutations, structural rearrangements,

especially translocations may selectively occur in specific genomic locations and may not just

happen across the genome by chance.

Indeed, chromosomal translocation events most frequently involved chromosome 8 (359

Transloc-intra, 392 Transloc-inter), 11 (120 Transloc-intra, 145 Transloc-inter) and 17 (161

Transloc-intra, 216 Transloc-inter) compared to all other chromosomes which on average had

20 Transloc-intra/chromosome and 39 Transloc-inter/chromosome (Supplementary Figure S8

and Supplementary Figure S9C). Moreover, many of these translocation events appeared

clustered together and localized in nearby regions. This genomic instability is reminiscent of

chromothripsis which is characterized by large-scale structural rearrangements occurring

together and localized to isolated chromosomal regions that harbor oscillatory changes in copy

number (44).

To comprehensively characterize these complex events, we employed an algorithm

shatterseek that identifies chromothripsis events by detecting intra-chromosomal

translocations occurring in interleaved fashion and are accompanied by oscillatory copy number

changes (44). We identified high and low confidence chromothripsis events across most cell

lines except for BCK4, CAMA1 and UACC3133 (Figure 3B and Supplementary Figure S8). High

confidence chromothripsis events across cell lines were most frequent in chromosomes 8 (in 5

cell lines), 17 (4 cell lines) and 6/11/13 (2 cell lines each). Indeed, these findings are in line with

previous reports showing that breast cancers have distinct chromothripsis patterns involving

chromosomes 8, 11, and 17 (75,76).

Next, we identified N = 384 functional fusions from N = 525 putative fusions by selecting

those that resulted in gain (N = 302) or loss (N = 82) of expression of its fusion partners

(Supplementary Figure S10A). Like tumors, most functional fusions identified in ILC/ILC-like cell

lines involved genes residing in chromosome 8 (N = 64 fusions), 11 (N = 63 fusions) and 17 (N =

89 fusions) (Figure 3D). Most of these functional fusions were gain of expression fusions (GEFs)

which mostly resulted from structural rearrangements occurring in these three chromosomes

(Figure 3C) and were strongly associated (fisher exact test, p = 0.0082) with inter-chromosomal

translocation events. Moreover, GEFs also showed strong enrichment (fisher exact test, p =

0.029) in cell lines with chromosome 17 chromothripsis. On the other hand, loss of expression

(LEFs) fusions involved genes residing on chromosome 1 (N = 10), 8 (N = 7) and 12 (N = 7) and

were significantly associated with deletions events (fisher exact test, p = 0.0001). Most

common genes involved in fusions included *SHANK2* and *TENM4* on chromosome 11 and

BCAS3, *GRB7*, *PPM1D* and *SKAP1* on chromosome 17 (Supplementary Figure S10B,C).

In summary, using OGM, we unveiled the whole-genome structural rearrangement

landscape of ILC/ILC-like cell lines and characterized chromothripsis events and functional gene

fusions.

Aberrant DNA Methylation Events and Epigenetic Activation of *TFAP2B*

DNA methylation (DNAm) changes have been associated with breast cancer risk (77–79)

and have been shown to be very different in distinct molecular subtypes of breast cancer

(80,81). Moreover, identification of DNAm changes associated with distinct disease can reveal

novel biomarkers for early detection and treatment response prediction (82,83). However,

DNAm changes associated with lobular breast cancer remain largely unexplored. Towards

achieving this goal, we sought to explore DNAm in breast cancer lines and tumors towards

identifying novel biomarkers of lobular disease.

Our initial exploration of DNAm profiles of breast cancer cell lines revealed, as expected,

that breast cancer cell lines cluster by their DNAm molecular subtypes (Supplementary Figure

S4A,B). Notably, the DNAm subtypes closely resembled the mRNA subtypes (Supplementary

Figure S4D). Next, we sought to quantify DNAm changes in cell lines vs. tumors by defining a

DNAm instability index (DMI) which represents cumulative changes in DNAm across the

genome in cancer vs. normal samples. We found that overall breast cancer cell lines showed

more aberrant DNAm (high DMI) than tumors (Supplementary Figure S4E,F). Higher DMI in cell

lines in part maybe driven by culture condition induced epigenetic changes (84,85).

Next, we specifically examined non-basal cell lines to better delineate the differences

between NST and ILC histology. Clustering of non-basal cell lines by the top variable DNAm B-

values revealed that most ILC and ILC-like cell lines clustered separately from NST cell lines

(Figure 4A). In contrast, clustering of luminal ILC and NST tumors by the top variable DNAm B-

value revealed only partial separation of ILC and NST sample clusters (Figure 4B). To identify the

top aberrantly methylated regions in NST vs. ILC tumors, we first identified non-variable

methylated probes in normal samples and then assessed whether these probes were aberrantly

methylated (i.e., hyper- or hypo- methylated) in tumor samples compared to normal samples.

The top aberrantly methylated probes and the associated genes in ILC vs. NST tumors are

shown in Figure 4C. The top aberrantly methylated probes and their associated genes in ILC

included *TFAP2B, SCD, TAPBL* and *FOXN1*, while those in NST included *CCND1, PML, NSMCE1,*

NELFA, *AQP7* and *RBPJL*. Notably, *TFAP2B* also came as the top hit in differential methylation

analysis of in Luminal ILC vs NST tumors (Supplementary Figure S6B).

The *TFAP2B* gene encodes AP-2B, a novel mammary epithelial differentiation marker,

which is preferentially expressed in ~80% of ILC tumors (86–88). In vitro studies indicate that

AP-2B controls tumor cell proliferation of ILC/ILC-like cell lines (87). AP-2B positivity is

associated with overall favorable clinicopathological characteristics and prolonged relapse-free

survival (88,89). Integrative analysis revealed a pattern of hypomethylation of the *TFAP2B* gene

and increased expression (Figure 4D) in both breast cancer tumors and cell lines. *TFAP2B*

epigenetic activation and its concomitant high expression were particularly observed in ILC

tumors and ILC/ILC-like cell lines with exception of two ILC (MDAMB330 and SUM44PE) and

four ILC-like (HCC2218, CAMA1, HCC1187 and MDAMB468) (Supplementary Figure S6A). There

was a strong negative Pearson correlation between *TFAP2B* gene expression and

promoter/exon 1 probe methylation in breast cancer tumors and cell lines is shown in Figure

4E. Genomic alterations in *TFAP2B* were rare and were only seen in one ILC (amplification in

UACC3133) and two NST (mutation in BT483 and CAL851) cell lines.

In summary, we explored the DNAm landscape of breast cancer tumors and cell lines and

performed systematic and integrative analysis of breast cancer cell lines and tumor methylation

datasets to reveal epigenetic activation of *TFAP2B*, an important emerging biomarker of lobular

disease, in both ILC/ILC-like cell lines and ILC tumors.

Cataloguing Gene Dependencies and Identifying Druggable Vulnerabilities

CDH1 molecular alterations and E-cadherin deficiency is an attractive target for

development of precision therapies for ILC. Several molecular studies have shown evidence that

E-cadherin deficient cell lines have several druggable vulnerabilities including but not limited to

GPCR signaling (90,91), PI3K/AKT and IGF1R pathway (90,92), and synthetic lethality with ROS1

inhibition (91,93). These studies have led to a currently ongoing precision medicine trial for ILC

called ROSALINE which is investigating efficacy of ROS1 inhibitors in early setting of ER+ ILC

disease (94). Despite these recent findings, a major bottleneck in comprehensive investigation

of targeted therapies in ILC is lack of suitable preclinical models. Indeed, most of the

aforementioned studies and their findings are based on modeling E-cadherin defects in

genetically modified cell lines and lack ILC context.

To overcome these limitations, we sought to identify genes that show higher dependency

(i.e., essential for survival) in ILC/ILC-like cell lines vs NST cell lines. For this we employed

publicly available RNAi loss of function screen datasets from Marcotte et al (12). To avoid

contamination by subtype specific differences, we restricted our analysis to luminal cell lines.

We identified differential dependencies between 10 ILC/ILC-like vs 12 NST cell lines using RNAi

datasets processed via three different algorithms to improve robustness of our findings (Figure

5A). Concordant differential dependencies across three algorithms were used to define

consensus differential dependencies which included 98 high and 94 low dependency genes in

ILC/ILC-like vs NST cell lines (Figure 5B). Over-representation analysis using KEGG database

revealed that high dependency genes were associated with actin cytoskeleton, focal adhesion

pathways and mTOR signaling, while low dependency genes were associated with cellular

senescence and insulin signaling (Figure 5C). Both low dependency genes associated pathways

were also identified in ingenuity pathway analysis (Supplementary Figure S11A,B). Select high

dependency genes in the actin cytoskeleton, focal adhesion and PI3K/AKT/mTOR signaling are

shown in Figure 5D. Both *PPP1R12B* and *ITGA11* genes were involved in more than one

pathway. Next, we identified druggable gene dependencies by querying the identified gene

dependencies (Figure 5B) in the drug gene interaction database. This resulted in shortlisting of

17 high and 17 low dependency genes that were druggable and had targeted drugs against

them (Figure 5E). Several of these druggable high dependency genes were components of actin

cytoskeleton (*CHRM4*), Focal adhesion (*PDPK1*), PI3K/AKT/mTOR signaling (*STK11*, *CCNE1*,

PDPK1).

In summary, our differential dependency analysis revealed numerous druggable

vulnerabilities in ILC/ILC-like cell lines that hold potential to develop novel precision therapies

for E-cadherin deficient breast cancers.

Scheme for Rational Selection of ILC/ILC-like Cell Lines for Modelling ILC

ILC focused studies have majorly relied on a small subset of ILC/ILC-like cell lines for

modeling this disease (Supplementary Table S1, see column of ILC focused PubMed reports).

We sought to expand the list of suitable ILC/ILC-like cell lines available for modeling

ER+/Luminal ILC disease by proposing a scheme for rational selection of these cell lines,

summarizing their key multi-omic features considering this scheme and recommending suitable

models.

The proposed scheme for rational selection of ILC/ILC-like cell lines and their key multi-

omic features cell lines are summarized in Figure 6. This qualitative scheme is based on three

criteria; 1) molecular subtype, 2) molecular alterations and 3) deregulated/altered pathways

(Figure 6A). Breast cancer cell lines to model specific types of breast cancers are selected based

on their molecular subtype. Since most ILC tumors are ER+ and luminal in nature, the best

models would be ER+/luminal ILC/ILC-like cell line. Most ILC/ILC-like cell lines were Lum or

Lum/HER2 subtype (Figure 6B) and notably, several Lum/HER2 ILC/ILC-like cell lines despite

having low levels of ER-A/PR retained high expression of ER associated genes as shown by

ERpos gene signature scores (Figure 1C; Supplementary Figure S2A). Hence, overall, most

luminal ILC/ILC-like cell lines would serve as useful models to study ER+/Luminal disease based

on this criterion. On the other hand, non-luminal ILC/ILC-like cell lines such as HCC1187

(ClaudinLow), MDAMB468 (Basal) and SKBR3 (HER2) are not good models for ER+/luminal ILC

disease but maybe useful for studying rare types of non-luminal ILC with similar molecular

subtype or studying *CDH1* or *CTNNA1* defects in non-luminal breast cancers.

Next, it is important to select ILC/ILC-like cell lines based on their genetic context. Based

on our initial selection, only ILC/ILC-like cell lines with alterations in *CDH1* or *CTNNA1* genes

were selected. In addition to the ILC pathognomonic alterations, several cell lines also had

molecular alterations in less frequently altered genes like *PTEN* (CAMA1, MDAMB453 and

MDAMB468) and *FOXA1* (SUM44PE and MDAMB453). However, only 8% of ILC tumors have

TP53 molecular alterations, these very present in almost all ILC/ILC-like cell lines except BCK4

and ZR7530, making them suitable models to study *TP53* WT ILC tumors. Conversely, most

(49%) of the ILC tumors have *PIK3CA* molecular alterations, but these were less frequent in

ILC/ILC-like cell lines (which included BCK4, MDAMB453, OCUBM and HCC2185). Moreover, two

ILC/ILC-like cell lines (CAMA1 and MDAMB453) had molecular alterations in *PTEN*, both this

gene and *PIK3CA* are components of *PI3K/AKT* pathway, one of the most altered pathways in

ILC tumors (3,58).

The final criterion for rational selection is based on deregulated pathways. Often non-

recurrent alterations may occur in multiple different components of the same oncogenic

pathway resulting in its deregulation. Frequently deregulated oncogenic pathways that are

druggable in breast cancer include growth factor and receptor tyrosine kinase (RTK) signaling,

cell cycle and *TP53* pathway and DNA damage repair (DDR) pathway (3,58). Apart from these

genomically altered pathways, hormone (ER/PR) signaling is also an important breast cancer

pathway that primarily gets deregulated by increase in estrogen hormone levels (95). Most of

the luminal ILC/ILC-like cell lines showed higher expression of ERpos gene signature and lacked

expression of ERneg gene signature indicative of active hormone signaling. In line with these

findings, these cell lines also showed higher predicted sensitivity to endocrine therapy (Figure

1C). These findings reveal additional models (such as UACC3133, ZR7530, HCC2218,

MDAMB453, WCRC25, and IPH926) to study endocrine response and resistance in ILC.

Furthermore, all ILC/ILC-like cell lines had alterations in at least one of key oncogenic breast

cancer pathways (Supplementary Figure S12). The RTK pathway was altered in all ILC/ILC-like

most frequently due to alterations in *ERBB2* and *NF1* gene. Cell cycle pathway was altered in all

Lum ILC/ILC-like cell lines due to *CCND1* amplifications and *CDKN2B* mutation. While DDR and

PI3K pathways were altered frequently in Lum/HER2 cell lines. With this information,

researchers can choose suitable ILC/ILC-like cell lines based on the deregulated pathway on

interest. Notably, each of these pathways is druggable using systematic or targeted agents e.g.,

endocrine therapies to against hormone signaling, HER2 and PI3K inhibitors against RTK

signaling (96,97), chemotherapy and CDK4/6 inhibitors (54) for inhibiting cell cycle and

proliferation and PARP inhibitors against tumors with homologous repair defects (HRD) (98).

Knowledge of these deregulated pathways in ILC/ILC-like cell lines will be critical for developing

precision therapies for ILC.

Finally, in addition to the aforementioned qualitative criterions for choosing ILC/ILC-like

cell lines, we also defined quantitative scores for molecular similarity of cell line to ER+ ILC

tumors to aid in their selection. The molecular similarity of each ILC/ILC-like cell lines to ER+ ILC

tumors was computed using Pearson correlation of their genome-wide copy number profiles

and RNA expression. BCK4 showed the highest copy number and RNA similarity to ILC tumors.

Most cell lines showed high copy number similarity except for MDAMB468. On the other hand,

as expected, all non-luminal (MDAMB468, SKBR3, HCC1187) and few luminal (CAMA1, HCC2185

and OCUMB) showed low or non-significant RNA similarity to ILC tumors. Suitability of each cell

line to model ER+/luminal ILC disease based on their molecular subtypes and molecular (copy

number and RNA) similarity is summarized in Figure 6B.

Discussion

Despite ILC being acknowledged as a disease with distinct biology that necessitates

specialized and precision medicine treatments, the further exploration of its molecular

alterations with the goal of discovering new treatments has been hindered due to the scarcity

of well-characterized cell line models (8,9). Previous large-scale cancer cell line characterization

studies such as CCLE 2019 (11) and Sanger 2016 (13) had limited inclusion, and lacked

comprehensive characterization, of ILC/ILC-like cell lines.

To address this gap, we generated the ILC Cell Line Encyclopedia (ICLE), providing the

first comprehensive molecular characterization of ILC and ILC-like cell lines using state-of-the-

art multi-omics comprising optical genome mapping, whole-exome sequencing, RNA

sequencing, RPPA, SNP array and DNA methylation array. Our approaches were chosen in line

with those used in previous large-scale cancer cell line characterization studies (11,12). This

allowed us to integrate ICLE datatypes with corresponding published breast cancer cell line

multi-omics datasets from Ghandi et al 2019 (11), Marcotte et al 2016 (12) and Iorio et al 2016

(13,15). and perform integrative and comparative (ILC vs NST) analyses.

As expected, all the ILC/ILC-like cell lines harbored molecular alterations in *CDH1*/E-

cadherin and *CTNNA1*/α-catenin and showed disrupted adherens junctions, a hallmark of ILC

phenotype. Moreover, consensus molecular subtyping not only confirmed the luminal status of

well-established ILC cell lines (MDAMB134VI, MDAMB330, SUM44PE and BCK4) but also

revealed additional cell lines that retained luminal molecular features despite the loss of ER-

A/PR expression in some cases (IPH926, HCC2185, WCRC25, HCC2218, MDAMB453 and

OCUBM) thus expanding the list of luminal models. However, it is important to note that many

of these cell lines also showed high HER2/phospho-HER2 expression (several due to

HER2/ERBB2 amplifications) and were classified as Lum/HER2 subtype. Notably, despite this

feature, most Lum/HER2 ILC/ILC-like cell lines showed high predicted sensitivity to endocrine

therapy. Thus, in addition to the well-established ER+/Lum cell lines, these Lum/HER2 cell lines

could also serve as promising models to study molecular mechanism of ILC drug resistance to

endocrine therapies, a key ILC challenge (1,3,7,8,24,99–101).

Comparison of cell line molecular features to rumors revealed that most Lum and

Lum/HER2 cell lines showed RNA and copy number similarity to tumors. Similarly, ILC/ILC-like

cell lines retained molecular alterations in key ILC genes at similar frequency to both primary

and metastatic ILC tumors. Notably, ILC/ILC-like cell lines recapitulated the *CDH1* alteration

landscape of ILC tumors. Like ILC tumors, all *CDH1* mutant ILC/ILC-like cell lines had a truncating

mutation along with LOH (key mechanism of biallelic inactivation of *CDH1* gene). Interestingly,

we also identified novel *CDH1* large-scale structural deletions using OGM in three ILC/ILC-like

cell lines as well as exonic deletions in two ILC/ILC-like cell lines, in both cases along with LOH.

Notably, all *CDH1* mutations in ILC/ILC-like cell lines were clonal (100% allele frequency), i.e.,

acquired early in evolution, and seemed unlikely to have acquired in culture. Converse to these

similarities, ILC/ILC-like cell lines showed enrichment of molecular alterations in *TP53*, *ERBB2*

and several DNA repair genes (*BRIP1*, *PPM1D* and *DDX5*) which were significantly less frequent

in ILC tumors.

Recent studies show that structural variations and complex genomic rearrangements

are frequently seen in breast cancer genomes (75,76,102). However, whole-genome structural

variations and complex events such as chromothripsis have been largely uncharacterized in

ILC/ILC-like cell lines. Using OGM, we found that ILC/ILC-like cell lines showed varying degrees

of genomic instability ranging from very complex genomes with frequent structural

rearrangements to others (mostly Lum cell lines) with relatively silent genomes with few

structural rearrangements. Notably, we identified frequent chromothripsis events in

chromosomes 8, 11 and 17 across ILC/ILC-like cell lines. These patterns of chromothripsis were

breast cancer specific in line with previous reports (44,75,76). Interestingly, we also saw

enrichment of gain of expression fusions on these same chromosomes implicating

chromothripsis events as drivers of these functional fusions (44,75,76). Indeed, chromosome 17

contains many important breast cancer genes such as *TP53*, *ERBB2*, *NF1*, *BRCA1*, *MAP2K4*,

PPM1D, *BRIP1* among others and single catastrophic events like chromothripsis affect large

regions (containing various oncogenes and tumor suppressors) providing tumors with

opportunities for rapid genome evolution (44,103,104).

TFAPAB gene is an emerging biomarker of lobular disease that is preferentially

expressed in both precursor and invasive stages (87,88). Importantly, it controls differentiation

and proliferation of tumor cells and has potential to serve as prognostic biomarker or a

targetable vulnerability in ILC disease (105,106). Using integrative analysis of DNAm and RNA

expression, we revealed epigenetic activation of *TFAP2B* gene in both ILC/ILC-like breast cancer

cell lines and ILC tumors. This is an important finding that raises questions about whether E-

cadherin defects reprogram epigenetic landscape of tumors cells resulting epigenetic activation

of proliferation regulators such as *TFAP2B*. Additional studies are warranted to test this

hypothesis and further investigate the role of *TFAP2B* in E-cadherin defective breast cancers.

E-cadherin deficiency is an attractive target for development of precision therapies for

ILC (90,91,93). Towards the goal of identifying novel druggable vulnerabilities or dependencies

associated with ILC, we analyzed publicly available RNAi loss of function breast cancer cell line

datasets. In line with previous findings, we also observed that ILC/ILC-like cell lines have high

dependency genes in cytoskeletal components and PI3K/AKT pathway (90,91) further

confirming the significance of these pathways as putative vulnerabilities for ILC. In addition, we

also uncovered novel dependencies in Focal adhesion and various metabolism related

pathways related with tyrosine, vitamin B6 and retinoic acid metabolism. Importantly, this is

the most comprehensive report on identification of novel druggable vulnerabilities using

luminal ILC/ILC-like cell lines and overcomes limitations of previous studies, that due to lack of

suitable models, had employed either genetically modified models or basal subtype E-cadherin

deficient models to identify druggable vulnerabilities and lacked ILC context.

In summary, we performed comprehensive multi-omic profiling of E-cadherin deficient

(ILC/ILC-like) cell lines and highlight their key molecular features including molecular subtypes

and genomic alterations, evaluate their similarity to E-cadherin deficient (ILC) breast cancers,

catalogue druggable vulnerabilities and finally present a scheme for rational-model-selection.

The findings of this study expand the array of suitable cell lines available for modeling ILC and

lay foundation for studying key ILC challenges including development of precision therapies and

novel biomarkers as well as for generating novel hypothesis for future ILC research.

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assistance with optical genome mapping.

 Figure Legends

Figure 1. Multi-omic Characterization of ILC and ILC-like Cell Lines and Molecular Resemblance to ILC.

(A) Overview of multi-omic profiling of 17 ILC and ILC-like cell lines using genomic (optical mapping, SNP array,

whole-exome sequencing), epigenomic (DNA methylation array), transcriptomic (RNA sequencing) and proteomic

(RPPA). **(B)** Multi-omic molecular subtypyes and their relationship with each other across each cell line. These

subtypes were defined consensus clustering of mRNA, RPPA and DNA methylation (DNAm) datasets resulting in

five mRNA subtypes (Luminal – Lum, Lum/HER2, Basal and CluadinLow), four RPPA subtypes (Lum, Lum/HER2,

HER2, and Basal) and three DNAm subtypes (Lum/HER2, HER2, Basal, ClaudinLow/EMT and N/A for missing data on

SKBR-3). **(C)** Hormone signaling activity and sensitivity to endocrine therapy (SET) in ILC/ILC-like cell lines. ERpos

and ERneg gene signatures represent genes strongly associated with ER+ and ER- tumors, respectively. SET is

defined as difference between mean of expression of ERpos and ERneg genes. **(D)** Overview of multi-omic features

17 cell lines clustered by mRNA subtypes. First panel highlights genomic metrics including fraction genome altered

(FGA), structural variation (SV) count, fusion count and tumor mutation burden (TMB) and their values visualized

as barplots. Second panel shows molecular alterations including two ILC driver alterations (CDH1 and CTNNA1) and

other key ESCAT clinically actionable alterations. Third panel shows protein and levels of three receptors including

ER-alpha (ER-A), PR, HER2 and phospho-protein levels of phosphorylated HER2-PY1248. Fourth, fifth and sixth

panel show top variable multi-omic features including RNA (N = 5000), protein (N = 50) and DNAm (N = 5000). **(E)**

Genome-wide linear plots showing copy number event frequencies across chromosomes in 1) N = 127 primary ILC

tumors from TCGA, 2) N = 202 metastatic ILC tumors from MSK cohorts, 3) Luminal ILC/ILC-like cell lines, 4)

Lum/HER2 ILC/ILC-like cell lines and 5) Other ILC/ILC-like cell lines. Copy gains are shown in red and copy loses in

blue. Linear copy number plot of each cell line groups is followed by individual copy number plots of each cell line

within that group. Key copy number alterations in tumors are listed below primary tumor copy number plot. **(F)**

Barplot showing frequency of molecular alterations (mutations, amplifications and deletions) in various ILC

associated genes and other clinically actionable breast cancer genes in primry ILC tumors vs ILC/ILC-like cell lines

(left) and metastatic ILC tumors vs ILC/ILC-like cell lines (right). ILC associated genes include *CDH1*, *PTEN*, *TBX3* and

FOXA1 and others are clinically actionable breast cancer genes (defined by ESCAT – ESMO Scale for Clinical

Actionability of molecular Targets). Fisher exact test was used to assess differences in frequency between

comparison groups. All significant (p <= 0.05) differences are annotated while rest were non-significant.

Figure 2. ILC and ILC-like Cell Lines Recapitulate *CDH1* Alteration Landscape of ILC.

(A) P120 and E-cadherin immunofluorescence of ILC/ILC-like cell lines including MDAMB134VI (ILC cell line harboring LOH + *CDH1* exonic deletion), CAMA1 (ILC-like cell line harboring *CDH1* mutation at 100% allele frequency) and MDAMB330 (a *CDH1* WT ILC cell line harboring *CTNNA1* mutation at 100% allele frequency) vs one representative *CDH1* WT NST cell lines (MCF7). **(B)** Novel structural variations resulting in *CDH1* deletions identified using optical genomic mapping in HCC2185, HCC2218 and SKBR3. **(C)** Exonic deletions identified in *CDH1* (E-cadherin) and *CTNNA1* (alpha-catenin) genes using WES dataset. Red tiles show exonic deletions. **(D)** Lollipop plot (generated using proteinpaint.stjude.org) showing truncating (black) and missense (blue) mutations across *CDH1* gene (including exons that form amino acid sequence and annotated with associated domains) in TCGA tumors (left) and ICLE/CCLE cell lines (right). The exon boundaries are shown by dotted lines, the numbers in each segment represent amino acid/protein length and the length of the lollipop represents the frequency of each mutation. **(E)** Barplots showing alteration frequency of *CDH1* gene in TCGA ILC vs NST tumors and ICLE ILC/ILC-like vs CCLE NST cell lines. Alterations are categorized as absence of alteration or wild-type (WT), mutation only (MUT Only), single allele copy number loss only (loss of heterozygosity – LOH Only), single allele copy number gain (GAIN), Mutation + LOH (MUT + LOH), and LOH plus exonic deletions or large structural deletions (Dual Loss). Association of *CDH1* biallelic inactivation in ILC vs NST tumors and cell lines was tested using fishers exact test (p-value < 0.0001, ****). **(F)** Heatmaps showing *CDH1* mutations, mRNA levels, copy number and protein levels in tumors (TCGA 127 ILC vs 489 NST) (left) and cell lines (ICLE 17 ILC and ILC-like vs CCLE 39 NST cell lines) (right).

Figure 3. Optical Genome Mapping Unveils Structural Variations, Chromothripsis Events and Functional Gene Fusions.

(A) Overview of structural variation types and their frequency across cell lines along with other metrics of genomic instability (TMB, FGA and # of fusions). SV types include deletions (del), duplications (dup), insertions (ins), inversions (inv), inter-chromosomal translocations (transloc-inter) and intra-chromosomal translocations (transloc-intra). **(B)** Heatmap (left) shows overview of chromosomal chromothripsis events predicted by shatterseek algorithm across cell lines. High and low confidence events are shown in yellow and green respectively. Circos plots (right) show SVs, CNVs and chromothripsis events in HCC2185 (ILC) and ZR750 (ILC-like) cell line. Details of each track are shown in supplementary figure 8. Briefly, track 1 hg19 cytoband, track 2 chromothripsis regions, track 3 SV track (excluding translocations), track 4 CNV track, track 5 gene annotations and track 6 translocations. **(C)** Shows circos plots highlighting translocation events in chromosome 8, 11 and 17 and chromosome 1, 8 and 12 resulting in gain of expression fusions (GEFs) and loss of expression fusions (LEFs), respectively. Only breast cancer driver genes involved in these gene fusions are shown. **(D)** Barplot showing frequency of fusion events across all chromosomes in ICLE (left) and Tumors as reported in tumorfusions database (right). Chromosomes are ordered by decreasing order of fusion frequency with highest frequency of fusions in the chromosome 17 (left) and 15 (right).

Figure 4. Aberrant DNA Methylation Events and Epigenetic Activation of TFAP2B.

(A) Heatmap showing cell line – cell line similarity based on clustering using top 10% variable DNAm features

across non-basal ILC/ILC-like and NST cell lines. **(B)** Heatmap showing sample – sample similarity based on

clustering using top 10% variable DNAm features across TCGA luminal ILC and NST tumors. **(C)** Top aberrantly

methylated probes and associated genes in TCGA luminal ILC vs NST tumors. Type of probe includes highDNAm

(high DNAm in normal samples), midDNAm (mid DNAm in normal samples) and lowDNAm (low DNAm in normal

samples). **(D)** Heatmaps showing regulation of *TFAP2B* gene expression via DNA methylation of probes mapping to

its transcription start site (TSS)/Exon 1 (cg25593948) and Exon 2 (cg27260772) in both tumors (left) and cell lines

(right). TFAP2B gene illustration shows its seven exons and location TSS. Tumors and cell lines are annotated by

histology (ILC, NST and ILC-like) and intrinsic molecular subtypes (PAM50 for tumors and mRNA subtypes for cell

lines). Probes are annotated by the region they map to and their Pearson correlation (cor) of DNA methylation

levels with *TFAP2B* gene expression. **(E)** Scatter plots showing correlation between cg25593948 probe DNA

methylation levels (B-value) with *TFAP2B* gene expression in tumors (left) and cell lines (right). The Pearson

correlation coefficient (R) and p-value (p) are shown in each scatter plot.

Figure 5. Identification of Differential Gene Dependencies in ILC/ILC-like vs NST Cell Lines.

(A) Scheme of differential dependency analysis to identify ILC/ILC-like specific gene dependencies compared to

NST cell lines. In total 10 ILC/ILC-like and 12 NST cell lines were selected with RNAi loss of function (LOF) screen

data from Marcotte et al study (Neel Lab). Three differential analyses were performed using RNAi LOF screen

dataset processed by three different algorithms (DEMETER2, zGARP and SIMEM). The overlapping findings from

each differential analysis were used to define consensus differential dependencies. **(B)** Heatmap showing 98 high

dependency genes and 94 low dependency genes identified from consensus differential dependencies in ILC/ILC-

like vs NST cell lines identified. Differential dependency log2FC and log-pvalue from SIMEM algorithm are shown in

left panels of the Heatmap. **(C)** Barplots showing KEGG pathways enriched in high (left) and low (right) dependency

genesets identified in panel B. Enriched was computed using hypergeometric test. Barplot x-axis shows -log10 of p-

value from hypergeometric test. **(D)** Key high dependency pathways and associated genes along with their log fold

change (logFC) in the tables above and dependency scores in ILC/ILC-like vs NST cell lines in the heatmaps below.

(E) Heatmap showing druggable high and low dependency genes identified by overlapping genes in panel B with

druggable genes reported in drug gene interaction database (https://www.dgidb.org/) along with their reported

druggability score (drug score). A higher score indicates strong literature evidence (# of reports) for a particular

gene to be druggable/targetable by a specific drug.

 Supplementary Tables Figures

Supplementary Table S1. Overview of ICLE Cell line Panel and Their Key Multi-omic Features.

All PubMed reports on each cell line, only ILC focused pubmed reports on each cell line, Type (ILC or ILC-like),

receptor Subtypes defined based on protein expression of ER, PR, HER2, and phosphorylated- HER2 protein levels

in RPPA dataset. Molecular Subtypes include PAM50 based subtypes, mRNA subtypes, RPPA subtypes and DNAm

subtypes. Molecular Alterations in ILC Drivers Genes. Finally, genome-wide metrics include fraction of genome

altered (FGA), tumor mutation burden (TMB), structural variation count (SV), and chromothripsis events.

Supplementary Table S2. Overview of the Generated ICLE Datasets.

Columns show data types, technology used to generate the data and data levels for all 17 ILC/ILC-like cell lines.

Supplementary Table S3. Overview of Public Datasets Used for Intergration.

Columns show ICLE datasets and corresponding public datasets used for intergration across each datatype.

Supplementary Figure S1. Genotype Similarity between ICLE and Marcotte et al (Neel Lab) Datasets.

Five thousand randomly selected SNP calls were compared between all cell lines to assess genotyping similarity

(percentage of overlapping SNP calls divided by total SNP calls – 100% means high similarity while 0% means no

similarity). Overlapping cell lines are shown in red, while ICLE cell lines with no match in Marcotte dataset are

shown in blue.

Supplementary Figure S2. Exploration of RNA Sequencing Dataset and Defining mRNA Subtypes.

(A) Consensus clustering was performed on row normalized expression matrix where features represent top 5000

variable features (identified using mean absolute deviation (MAD). K = 9 was used to define refined clusters. Final

mRNA subtypes based molecular features of cell lines including E-cadherin, ER, HER2 and Claudin-7 protein levels,

ERpos gene signature scores and PAM50 based intrinsic molecular subtypes. Few clusters showing similar

molecular features were combined to result in biologically meaningful mRNA subtypes. **(B)** PCA plot and **(C)**

expression heatmap generated using top variable features show to see transcriptic relationship between distinct

mRNA subtypes. **(D)** Sankey diagram showing relationship between cell line PAM50 calls and mRNA subtypes

Supplementary Figure S3. Exploration of RPPA Dataset and Defining RPPA Subtypes.

(A) RPPA subtypes defined by consensus clustering of top 50 varibale features defined by MAD as described

before. K = 9 was used like before and then based on molecular similarity some clusters were combined to result in

6 clusters. **(B)** PCA plot and **(C)** RPPA expression heatmap generated using top variable features show to see

proteomic relationship between distinct RPPA subtypes. **(D)** Sankey diagram showing relationship between cell line

mRNA and RPPA subtypes.

Supplementary Figure S4. Exploration of DNA Methylation (DNAm) Dataset and Defining DNAm Subtypes.

(A) DNAm consensus clustering, top 10% variable feature were selected using variance. DNAm subtypes were

defined as desribed for mRNA and RPPA subtypes. **(B)** PCA plot and **(C)** DNAm heatmap generated using top

variable features show to see DNAm relationship between distinct DNAm subtypes. **(D)** Sankey diagram showing

relationship between cell line mRNA and DNAm subtypes. **(E)** DNA methylation instability score in BRCA tumors

(TCGA) vs. BRCA cell lines (ICLE and Sanger) and **(F)** DNA methylation instability score across different histological

subtypes.

Supplementary Figure S5. Overview of Key ILC and NST Molecular Alterations.

(A) Key Molecular Alterations Enriched in Luminal-A ILC and NST tumors in TCGA dataset. **(B)** Frequency of these

alterations in ILC/ILC-like cell lines. **(C)** Allele frequency of these alterations in all NST/IDC, non-basal NST/IDC, ILC

and ILC-like cell lines.

Supplementary Figure S6. Differential DNA Methylation Analysis of TCGA Luminal-A ILC vs NST Tumors.

(A) *TFAP2B* expression in ILC, ILC-like and NST cell lines showing most ILC/ILC-like genes have high *TFAP2B*

expression. **(B)** Volcano plot showing differentially methylated probes in TCGA Luminal A ILC vs NST tumors

annotated by associated gene names (and region). **(C)** Genes with most frequently methylated probes from panel

B.

Supplementary Figure S7. p120-catenin, E-cadherin and Hoechst immunofluorescence staining of 17 ILC/ILC-like

cell lines.

Immunofluorescence of p120-catenin (1st column), E-cadherin (2nd column), Hoechst nuclear staining (3rd column)

and merge of these stainings (4th column) across ILC (names in red), ILC-like (names in purple) and NST (name in

blue) cell lines. All ILC/ILC-like cell lines had *CDH1* and *CTNNA1* gene defects resulting in loss of E-cadherin/α-

catenin and relocalized of p120-catenin from memberane to cytoplasm. For comparison, we show a *CDH1*/*CTNNA1*

WT NST cell line (MCF7) with memberanous staining of both p120 and E-cadherin.

Supplementary Figure S8. Whole-Genome Landscape of ILC/ILC-like Cell Lines.

Circos plots showing OGM identified structural rearrangments, SNP array based copy number, and shatterseek identified chromothripsis events across 17 ILC/ILC-like Cell Lines.

Supplementary Figure S9. Association Between Various Genomic Metrics of Genomic Instability.

(A) Pearson Correlation between SNV/Mutation count and SV count. **(B)** Barplot showing chromosome size in MBs (megabases). **(C)** SV count across chromosomes. **(D)** Mutation count across chromosomes. **(E)** Pearson correlation between chromosome size and SV count (excluding translocations). **(F)** Pearson correlation bewtween chromosome size and SV counts. **(G)** Pearson correlation between chromosome size and mutation count.

Supplementary Figure S10. Overview of Functional Fusions.

(A) Functional (gain of expression or loss of expression) fusions identified via integrative analysis of OGM and RNAseq datasets across 17 ILC/ILC-like cell lines. Each fusion pair is annotated by cell line, structural alteration type (AltType), fusion gene A and B annotation as oncogene or tumor suppressor (OncoTS) and affect on gene A or gene B expression **(B)** Recurrently fused genes including *BCAS3, GRB7, PPM1D, SHANK2, SKAPI* and *TENM4*. **(C)** Recurrent fusions of *PPM1D* and *GRB7* genes.

Supplementary Figure S11. Ingenuity Pathway Analysis (IPA) of Consensus Differential Dependencies.

(A) The top strong/high dependency and weak/low dependency pathways identified IPA analysis of consensus differential dependencies. **(B)** Table showing genes (last column) associated with the pathways shown in A.

Supplementary Figure S12. Molecular Alterations in Key Breast Cancer Pathways in ILC/ILC-like cell lines.

Molecular alterations in key breast cancer pathways including (Cell Cycle and TP53 pathway, RTK-RAS pathway, PI3K/AKT pathway and DNA damage repair (DDR) pathway genes).

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Figure 1. Multi-omic Characterization of ILC and ILC-like Cell Lines and Molecular Resemblance to Human-ILC Disease.

Figure 2. ILC and ILC-like Cell Lines Recapitulate the *CDH1* Alteration Landscape of Human-ILC Disease.

Figure 3. Optical Genome Mapping Unveils Structural Variations, Chromothripsis Events and Functional Gene Fusions.

Figure 4. Aberrant DNA Methylation Events and Epigenetic Activation of TFAP2B

Figure 5. Identification of Differential Gene Dependencies in ILC/ILC-like vs NST Cell Lines.

A

	Classical ILC *(ER/PR+ HER2-)* Luminal	Other variants *(ER/PR- HER2+)* HER2	Triple-negative *(ER/PR/HER2-)* Basal
Molecular Subtype			

B

Cell Line	Molecular Subtype	ILC Driver Alterations		Other Altered Genes					Molecular Similarity to ILC Patient Tumors		Suitable Model for ER+/Luminal ILC Disease
		CDH1	CTNNA1	TP53	PIK3CA	ERBB2	PTEN	FOXA1	Copy Number	RNA Expression	
BCK4	Lum	MUT;LOH			MUT	MUT			0.5	0.6	Yes
CAMA1	Lum	MUT		MUT;LOH			MUT;LOH		0.3	-0.1	Yes, but low RNA similarity
MDAMB134VI	Lum	EXON6;LOH		MUT;LOH					0.5	0.3	Yes
MDAMB330	Lum		MUT	MUT;LOH		AMP			0.2	0.2	Yes
SUM44PE	Lum	MUT;LOH		MUT;LOH				AMP	0.4	0.2	Yes
600MPE	Lum/HER2	MUT;LOH		MUT;LOH					0.6	0.3	Yes
HCC2185	Lum/HER2	DEL		MUT	MUT;AMP				0.2	NS	Yes, but low RNA similarity
HCC2218	Lum/HER2	DEL		MUT;LOH		AMP			0.5	0.3	Yes
IPH926	Lum/HER2	MUT;LOH		MUT;LOH					0.2	0.3	Yes
MDAMB453	Lum/HER2	MUT;LOH		DEL	MUT;GAIN		MUT	AMP	0.3	0.1	Yes
OCUBM	Lum/HER2	EXON2;LOH		MUT;LOH	MUT;GAIN	AMP			0.3	-0.2	Yes, but low RNA similarity
UACC3133	Lum/HER2	MUT;LOH		MUT;LOH		MUT;GAIN			0.5	0.3	Yes
WCRC25	Lum/HER2	MUT;LOH		MUT;LOH					0.5	0.3	Yes
ZR7530	Lum/HER2	MUT;LOH				AMP			0.5	0.1	Yes
SKBR3	HER2	DEL		MUT;LOH		AMP			0.1	NS	No, HER2 subtype
HCC1187	ClaudinLow		MUT	MUT					0.3	-0.3	No, claudinLow subtype
MDAMB468	Basal		EXON4,5;MUT	MUT;LOH		MUT;LOH	MUT;GAIN		NS	-0.4	No, basal subtype

Alteration
AMP
DEL
MUT
MUT;AMP
MUT;DEL
MUT;GAIN
MUT;LOH

Figure 6. Scheme for Rational Selection of ILC/ILC-like Cell Lines for Modelling Human-ILC Disease.