

Figure S1

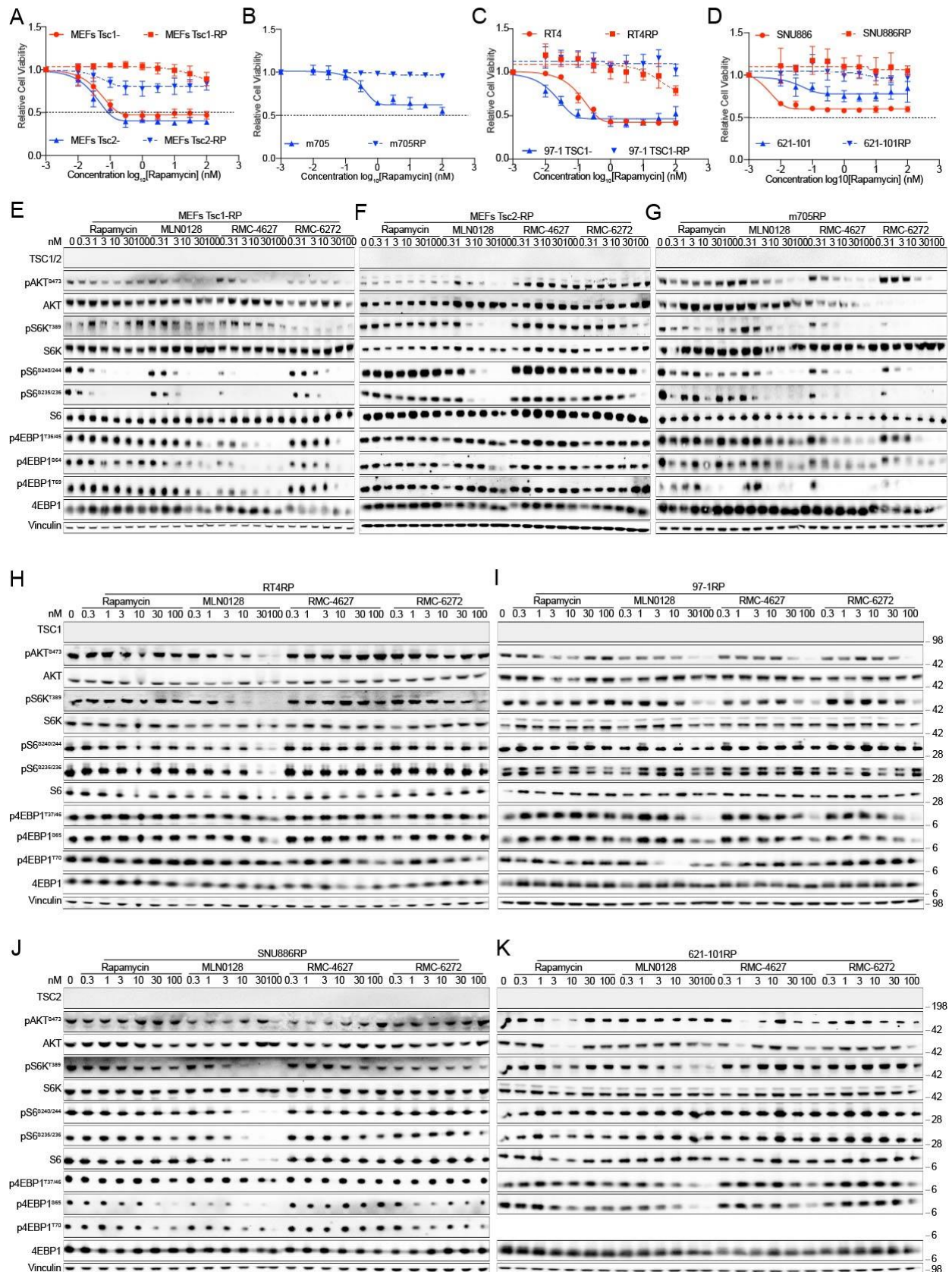


Figure S1. Multiple RP models show resistance to rapamycin by IC50, and variable resistance to rapamycin and mTORC1 bi-steric inhibitors.

A - D IC50 of RP cell lines and their parental counterpart cells. Each dot and error bar on the curves represent mean $\pm$ SD (n = 6). **E - K** Immunoblot of Tsc1-RP MEFs (**E**), Tsc2-RP MEFs (**F**), m705RP (**G**), RT4RP (**H**), 97-1RP (**I**), SNU886RP (**J**), and 621-101RP (**K**) cells treated with different concentrations (nM) of mTORC1 inhibitors (4h).

Figure S2

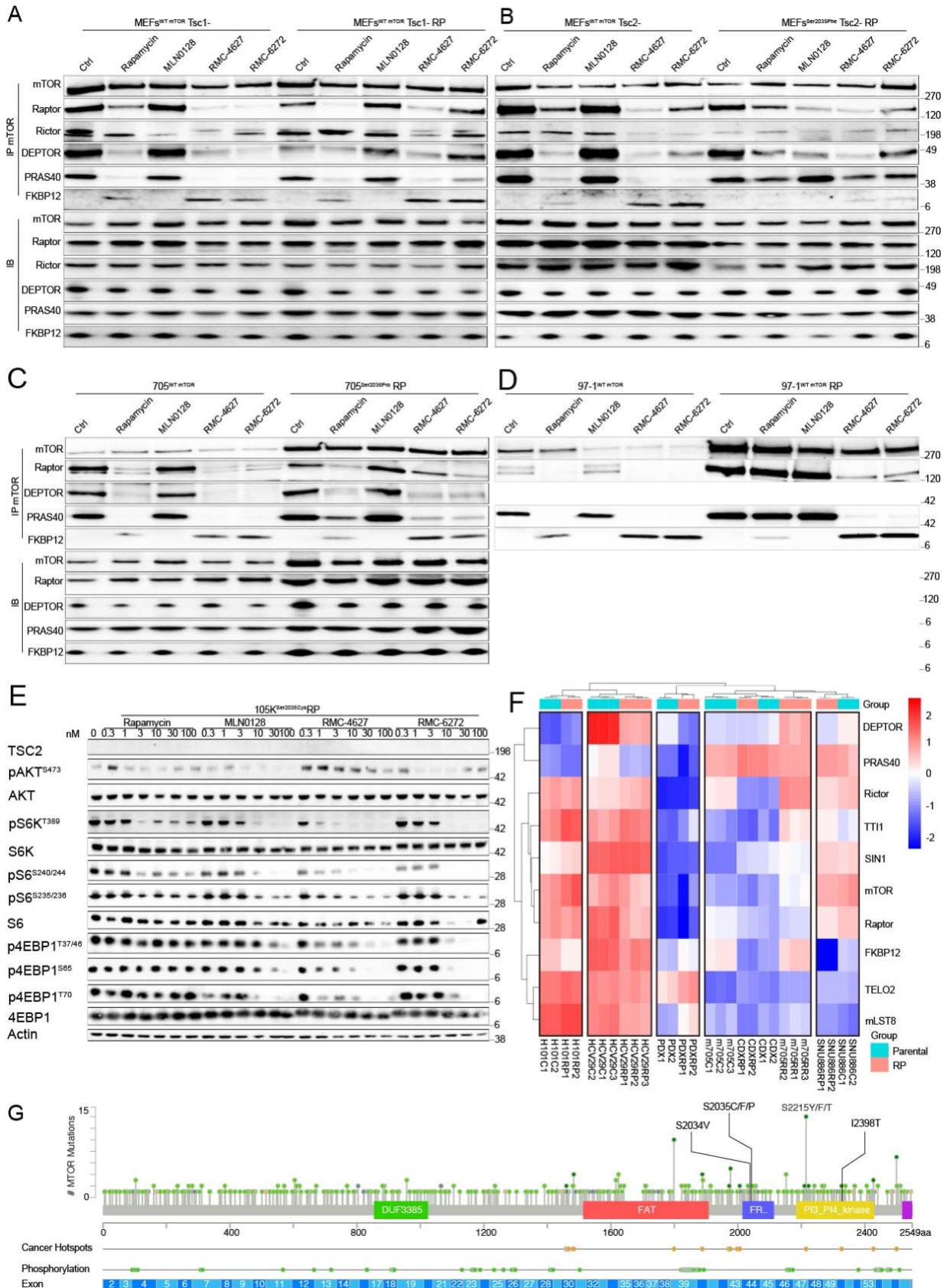


Figure S2. RP cells with mTOR mutation have impaired Rapamycin binding affinity.

A - D mTOR Co-IP of Tsc1- and Tsc1-RP MEFs (**A**), Tsc2- and Tsc2-RP MEFs (**B**), m705 and m705RP (**C**), 97-1 and 97-1RP (**D**) cells pre-treated with different mTORC1 inhibitors (10 nM, 30 mins). **E** 105KRP cells treated with different concentrations of mTORC1 inhibitors for 4h followed by immunoblot. **F** mRNA expression levels of the components of mTORC1 and mTORC2 comparing parental and RP/MRD cells assessed by RNA-Seq (n = 3 for each group). **G** Lollipop plot shows all the MTOR mutations found in all the tumors from TCGA (n = 10800). Mutations found in RP cells at different sites (S2034, S2035, S2215 and I2398) are indicated.

Figure S3

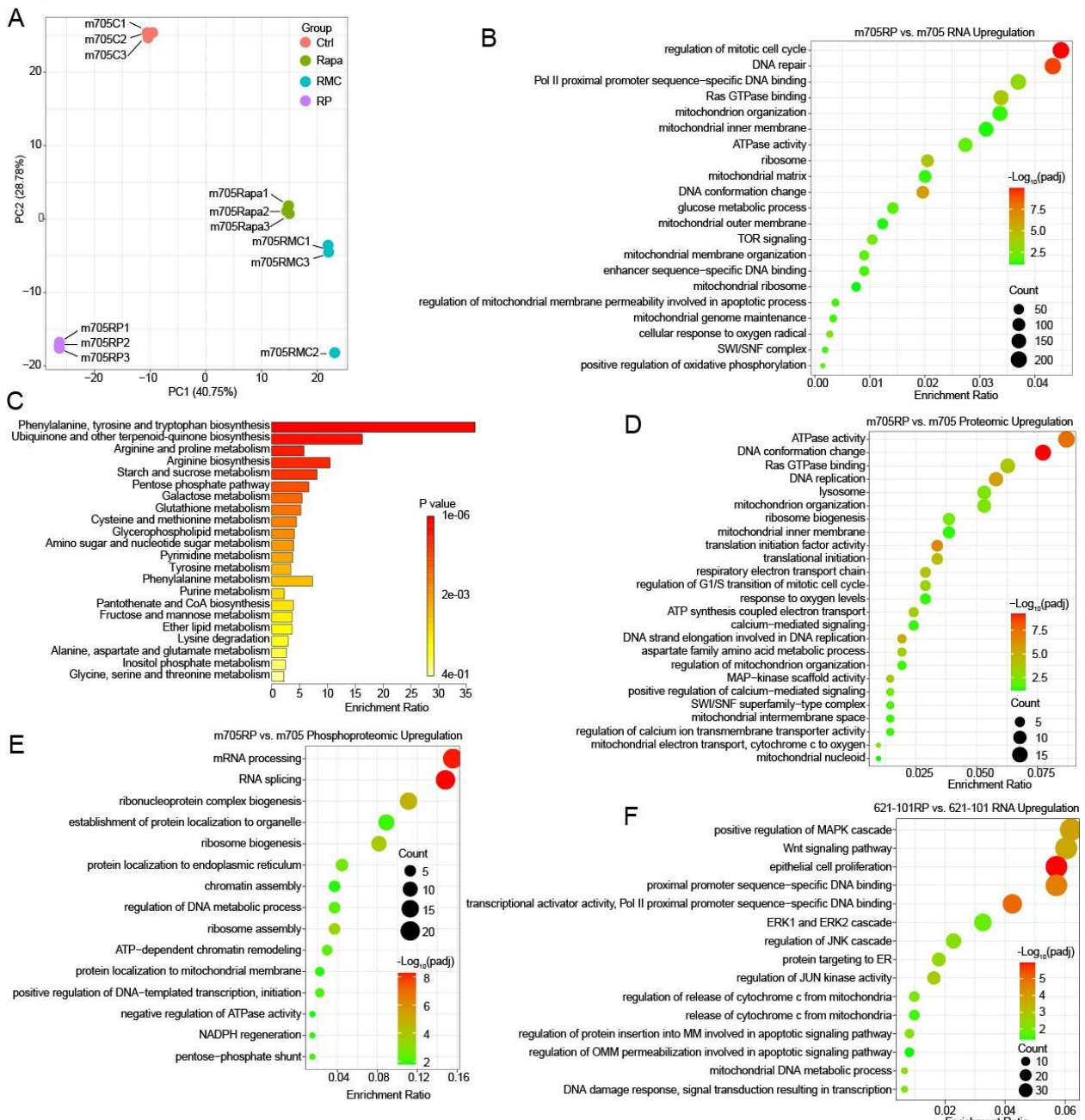


Figure S3. RP/MRD cells have distinct profiling in comparison to parental or short-term Rapamycin treated cells.

A PCA plot of RNA-Seq data for m705RP cells and m705 treated by short-term mTORC1 inhibitors (10 nM, 24h). **B - E** Pathway enrichment analysis of RNA-seq (**B**), metabolomic (**C**), proteomic (**D**) and phosphoproteomic (**E**) data comparing m705RP and m705 cells (n = 3 for each group). **F** GSEA for RNA-Seq data of H101RP and H101 (n = 2 for each group).

Supplemental Figure 4

Figure S4

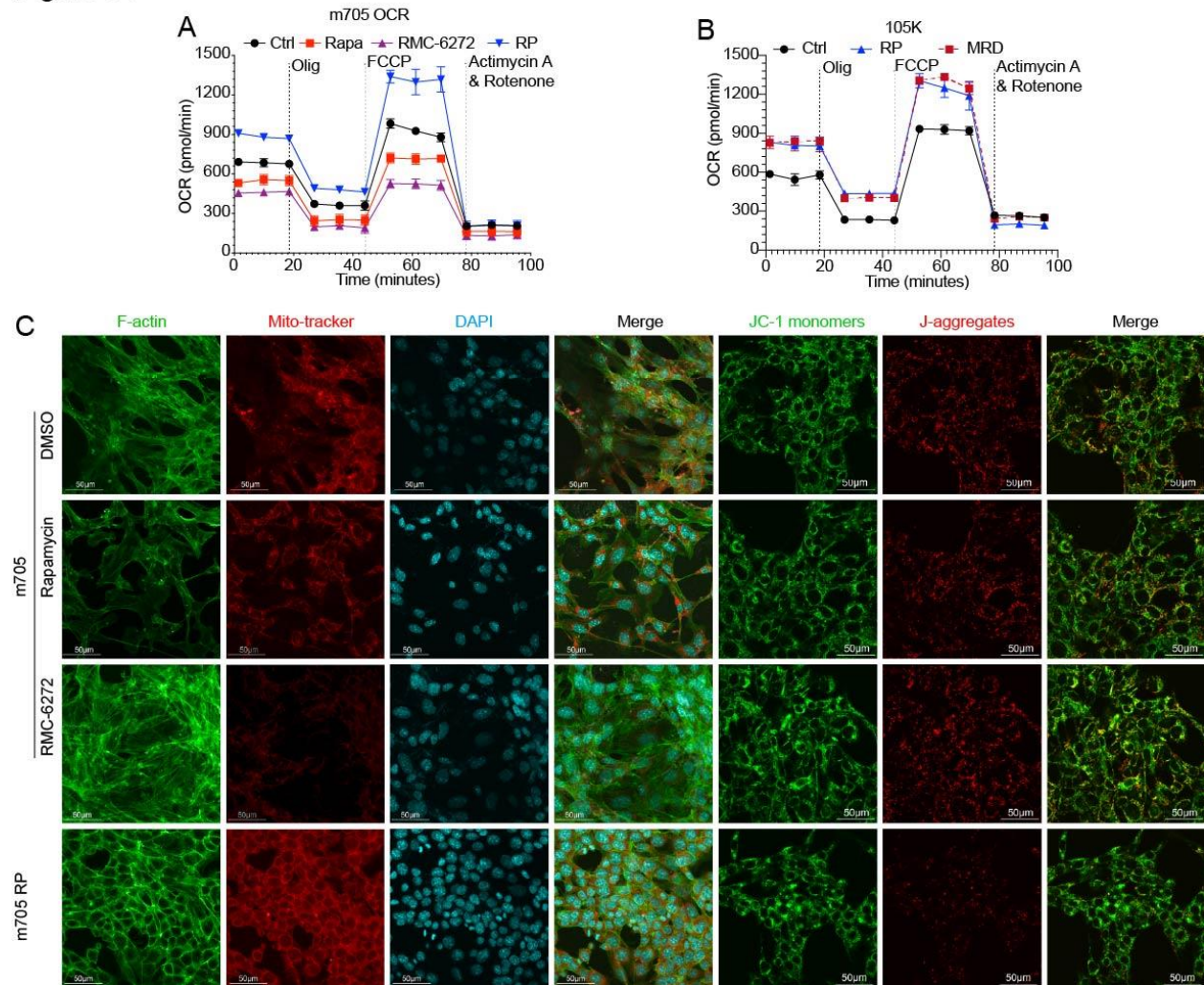


Figure S4. RP/MRD cells have increased mitochondrial function.

A, B OCR measurement of m705RP (**A**), 105KRP, MRD525 cells (**B**) and their parental counterpart cells with or without short-term mTORC1 inhibitors (10 nM, 24h). **C** Mito-tracker and JC-1 staining of m705RP and m705 with or without short-term mTORC1 inhibitor treatment (10 nM, 24h). Each dot and error bar on the curves represent mean $\pm$ S.D. (n =3 or n = 4). One-way ANOVA was used. * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$, **** $p < 0.0001$.

Figure S5

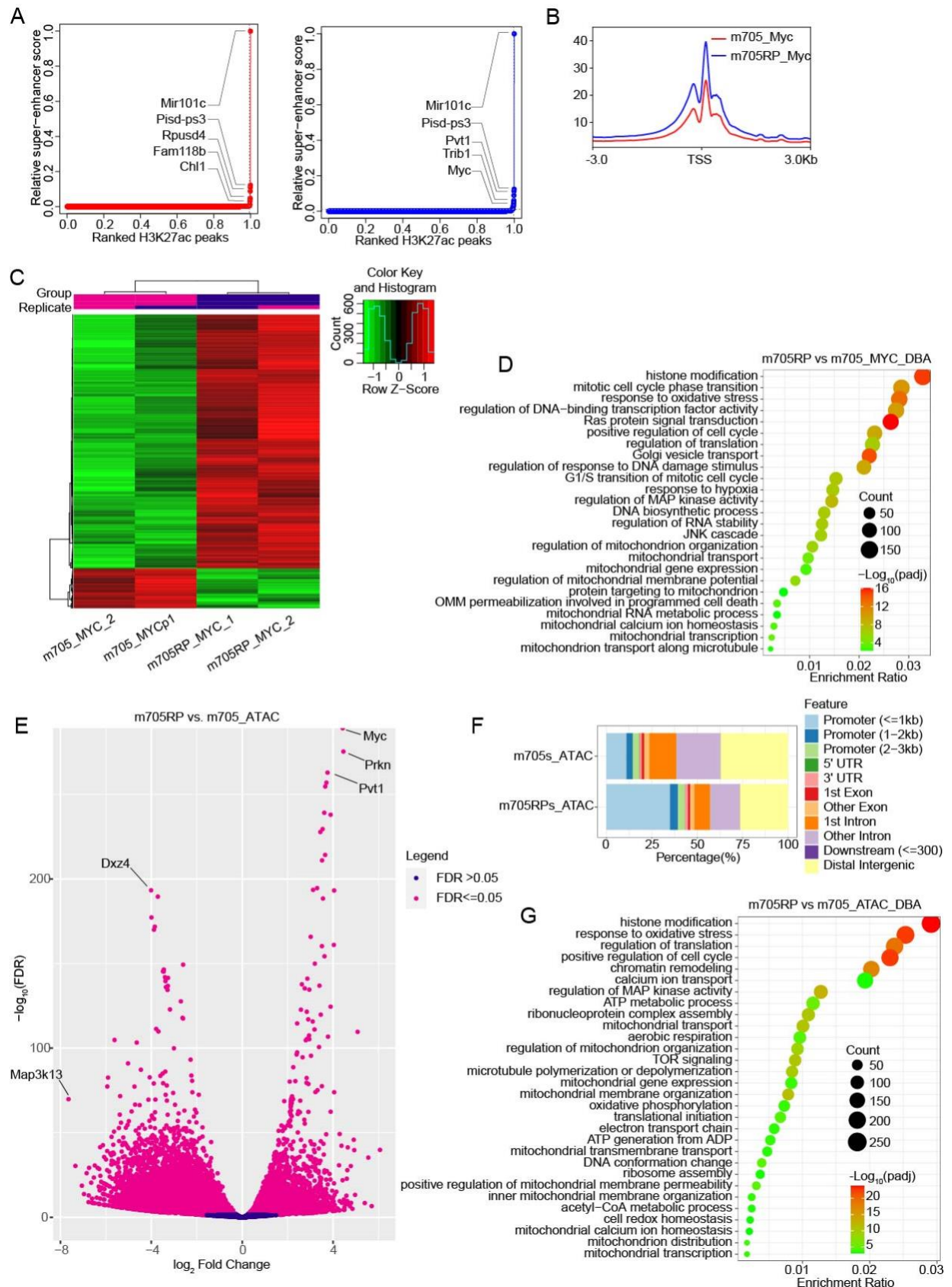


Figure S5. Long-term rapamycin treatment induces epigenetic rewiring in RP/MRD cells.

A Super-enhancer (SE) and enhancer maps comparing m705RP (blue, right) vs m705 (red, left) cells. **B** Profiling plot of MYC CUT&RUN. **C** Heatmap shows the differential peaks. **D** Pathway enrichment analysis using the differential peaks obtained from (**C**). **E** Volcano plot shows genes with different accessibilities from ATAC-seq. **F** Distribution of ATAC-seq peaks shown in (**E**). **G** GO analysis using the differential peaks obtained from ATAC-seq.

Figure S6

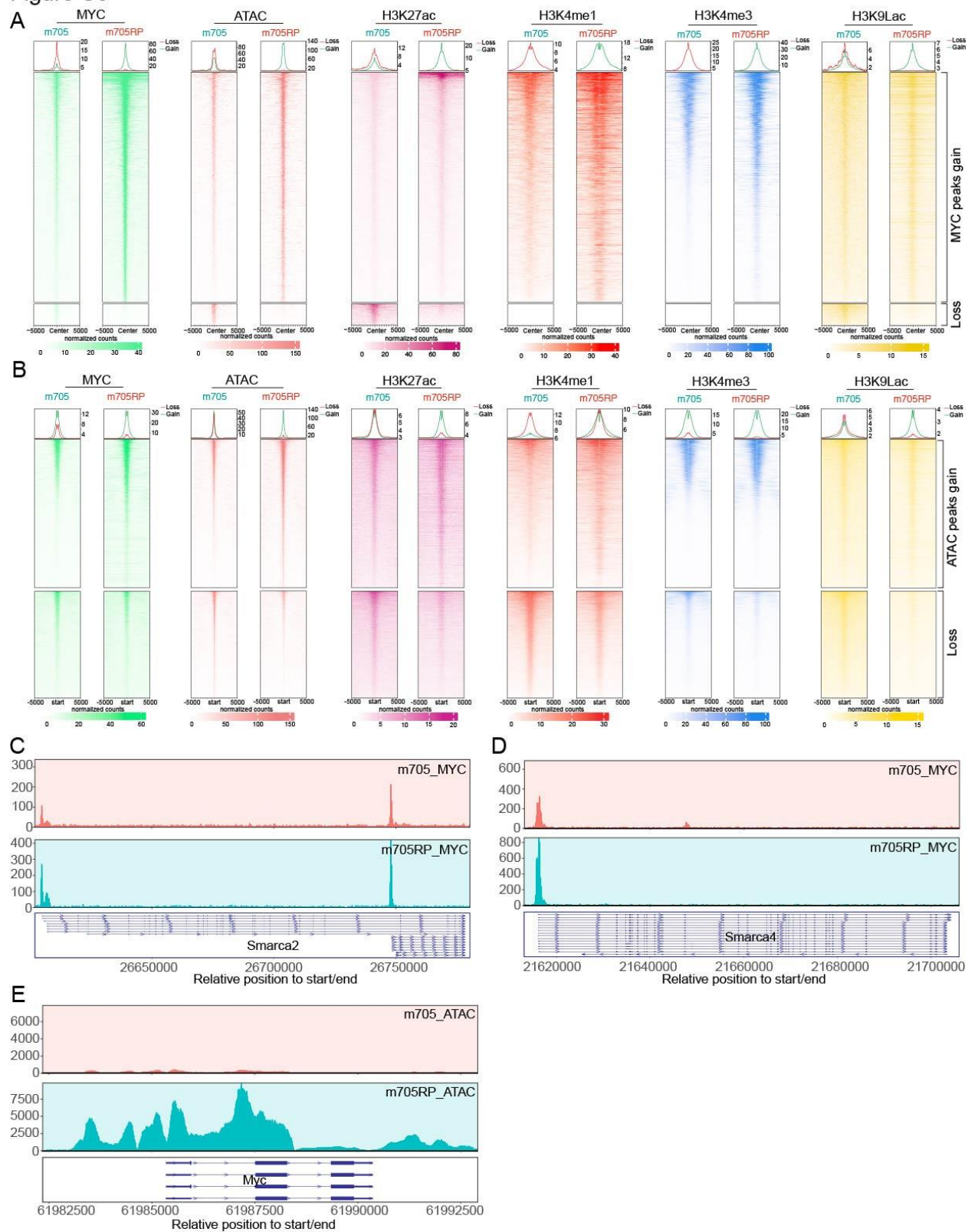


Figure S6. Cooperation of SWI/SNF and MYC re-shapes chromatin landscapes.

A Profiling heatmap of RNA-seq, MYC, H3K27ac, H3K4me1, H3K4me3, H3K9Lac CUT&RUN and ATAC-seq, aligned to the differentially expressed MYC CUT&RUN peaks.

B Profiling heatmap of RNA-seq, MYC, H3K27ac, H3K4me1, H3K4me3, H3K9Lac CUT&RUN and ATAC-seq, aligned to the differentially expressed ATAC-Seq peaks. **C, D**

Myc CUT&RUN signals for Smarca2 (**C**) and Smarca4 (**D**) genes. **E** ATAC-seq peaks for Myc in m705RP compared to m705 cells.

Figure S7

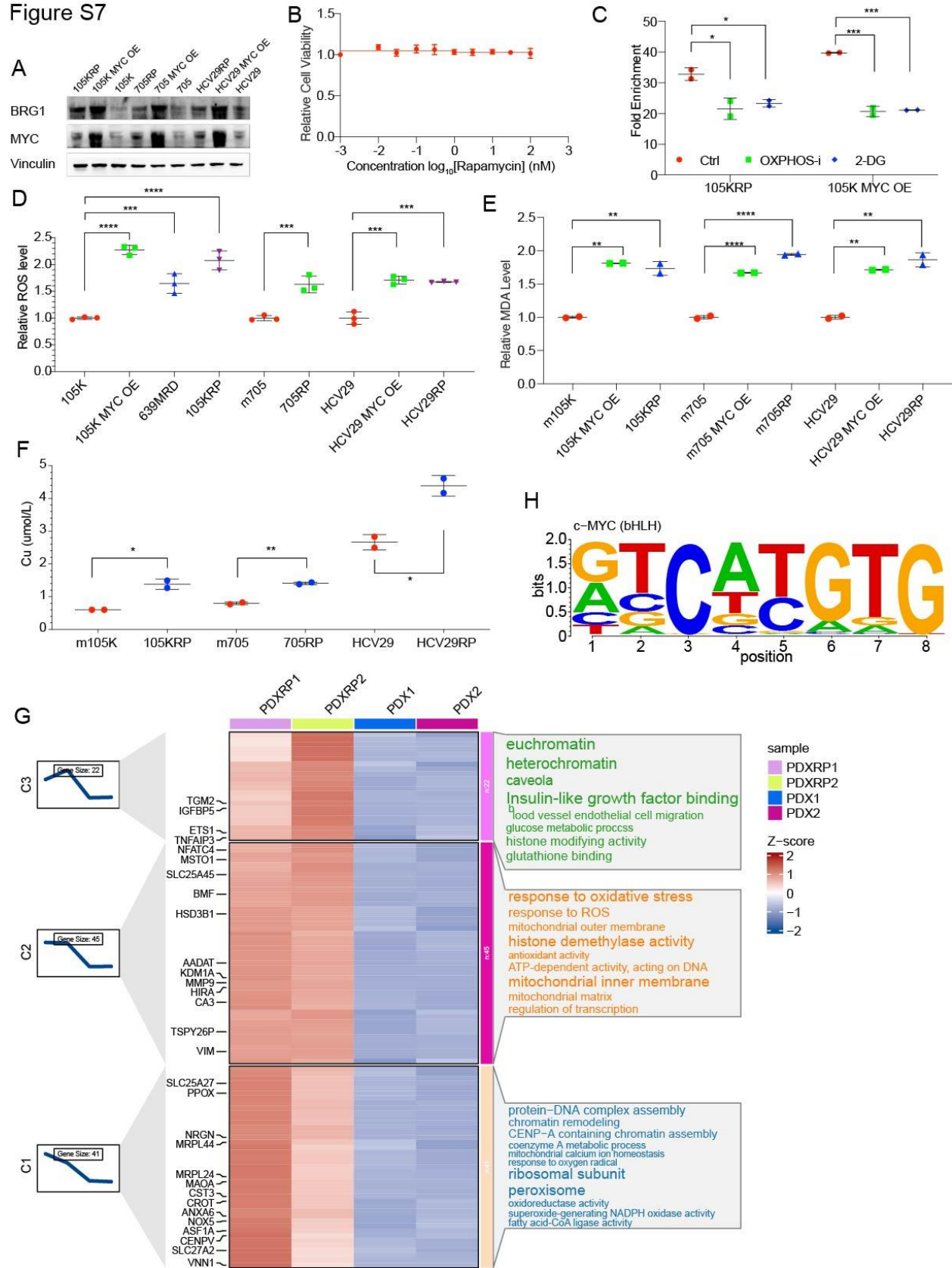


Figure S7. MYC is the key driver of rapamycin persistent phenotype both in vitro and in vivo.

A Immunoblot of MYC OE in m105K, m705, and HCV29 cells. **B** IC50 of m105K MYC OE cells. **C** ATAC-qPCR of m105KRP and m105K MYC OE cells (n = 2). Fold enrichment (FE) is shown in comparison to undigested DNA from the same cells. **D-F** Measurement of ROS (n = 3), lipid peroxidation (Malondialdehyde, MDA) (n = 2) and Cu concentration (n = 2) in parental, MYC OE and RP cell lines. Each dot and error bar on the curves represent mean $\pm$ S.D. One-way ANOVA (comparing 3 or more groups) or t-test (comparing 2 groups) was used. * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$, **** $p < 0.0001$. **G** Differential gene expression and pathway enrichment analysis comparing PDX_MRD vs. PDX. **H** Motif analysis of the promoter regions of the genes from G. More details needed.

Figure S8

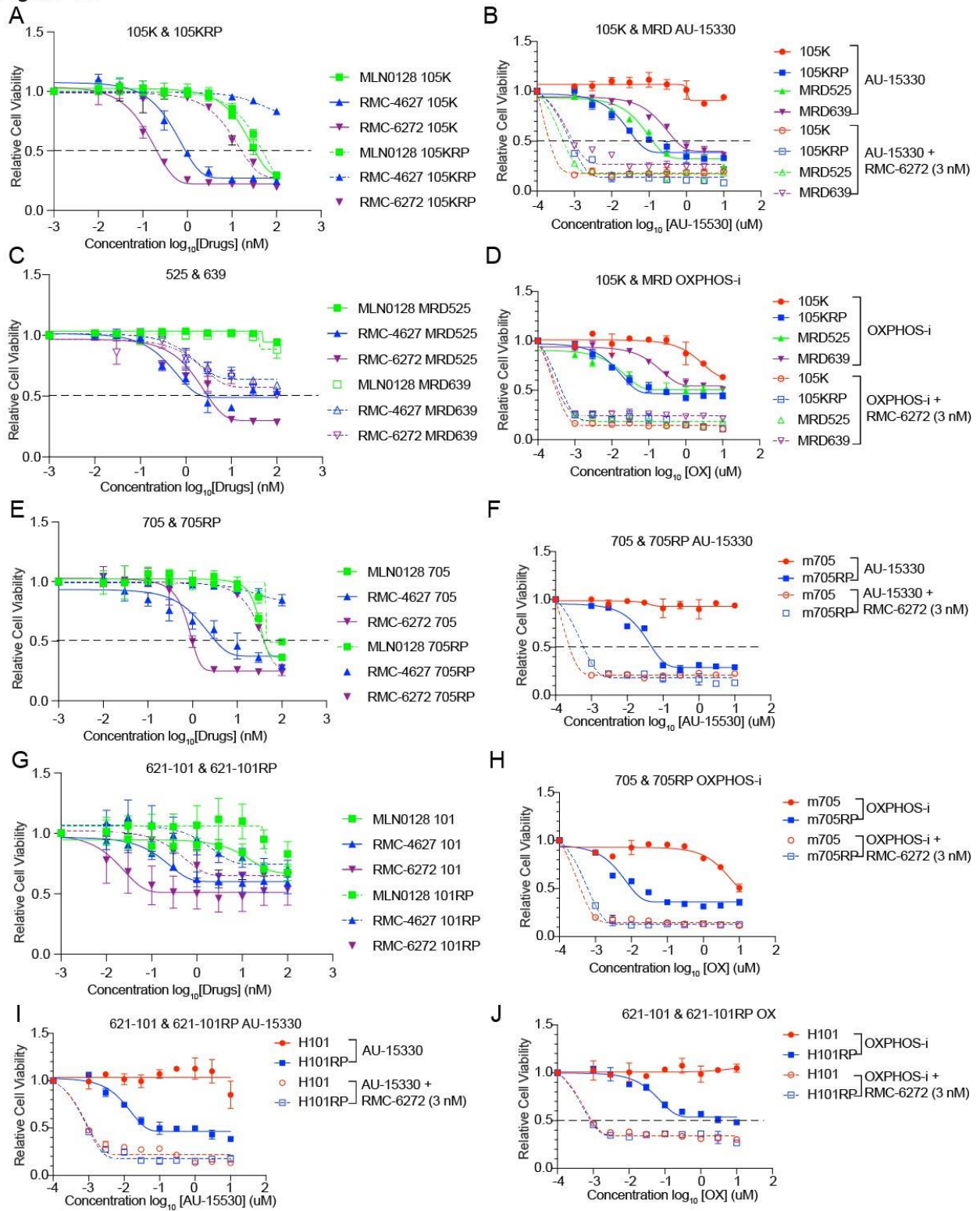


Figure S8. SWI/SNF complex inhibitor AU-15330 and OXPHOS inhibitor synergize with bi-steric mTORC1 inhibitors to suppress cell growth in RP and MRD cell lines.

A - J IC₅₀ curves of 105K, 705, and 621-101 starting and RP/MRD cell lines treated with different inhibitors. Each dot and error bar on the curves represent mean $\pm$ SD (n = 4).

Figure S9

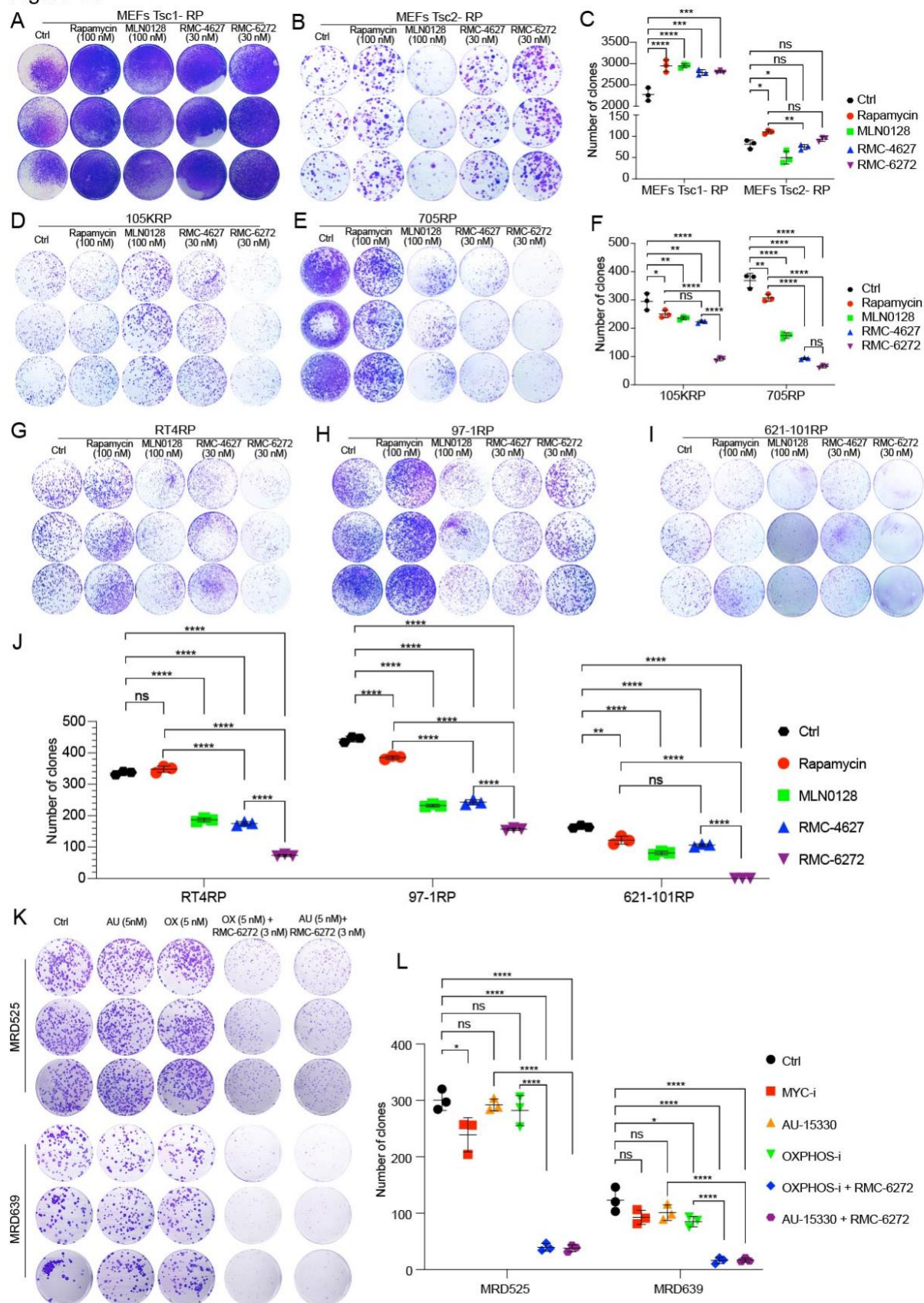


Figure S9. SWI/SNF complex inhibitor AU-15330 and OXPHOS inhibitor synergize with bi-steric mTORC1 inhibitors.

A - L RP/MRD cell lines treated with inhibitors of mTOR (Rapamycin, Sapanisertib, RMC-4627 or RMC-6272), SWI/SNF (AU-15330), mitochondria inhibitors (OXPHOS-i) or combo, as shown by 14-day low-dilution colony formation assay and quantification. Each dot and error bar on the curves represent mean $\pm$ SD (n = 3). One-way ANOVA was used.

*P < 0.05, **P < 0.01, ***P < 0.001, ****P < 0.0001.

Figure S10

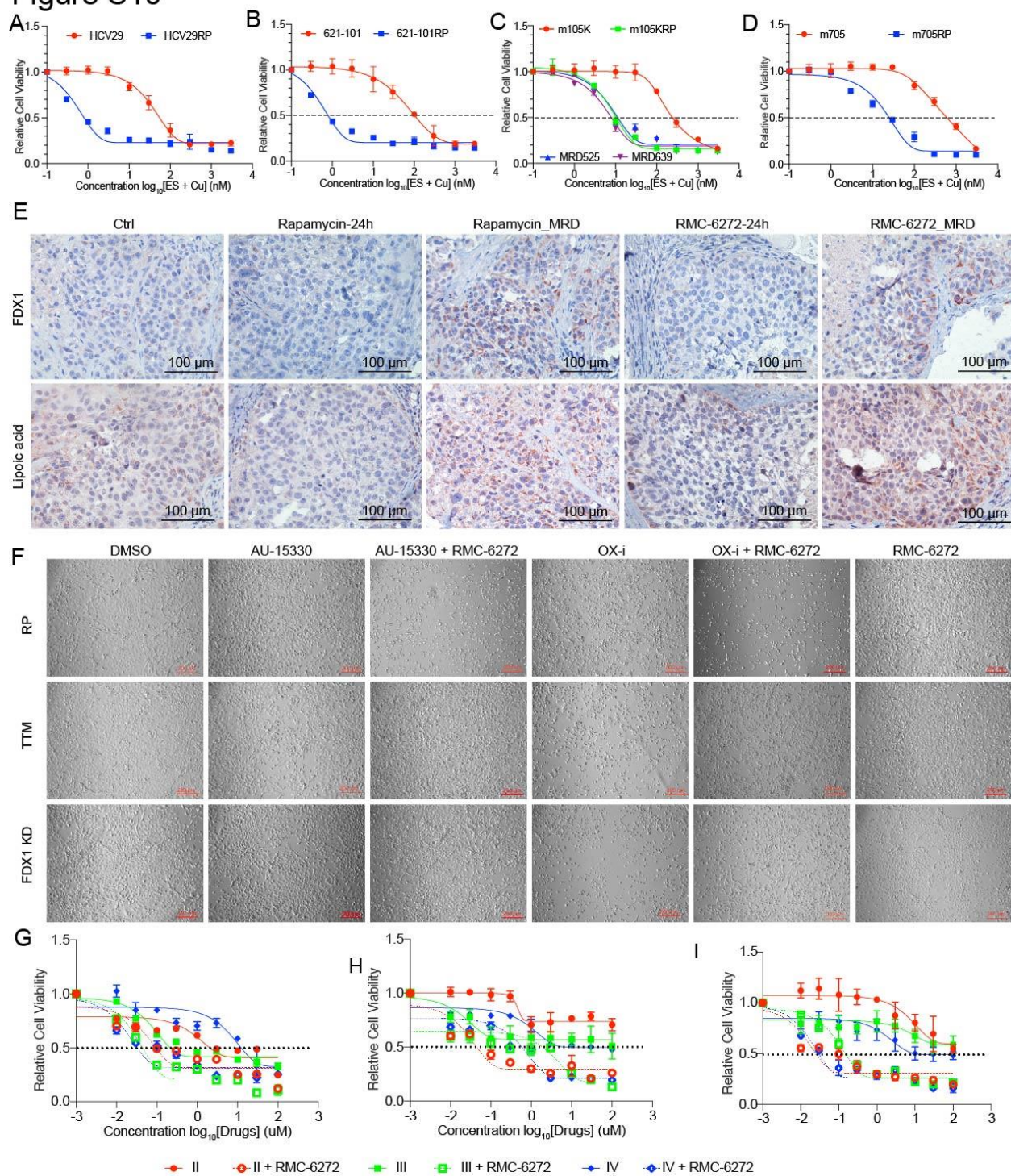


Figure S10. RP/MRD cells are sensitive to cuproptosis.

A, B Dose-dependent cell growth inhibition curves of HCV29RP and 621-101RP cells and their parental cell lines treated with cuproptosis inducer (ES + Cu, 1:1 ratio). **C, D** Cell proliferation curves of m105K, m105KRP, MRD525, MRD639, m705 and m705RP cells when treated with cuproptosis inducer. Each dot and error bar on the curves represent mean $\pm$ SD (n = 4). **E** IHC staining of cuproptosis markers FDX1 and lipid acid in BLCA tumors after short-term rapamycin or RMC-6272 treatment and in recurrent bladder cancer TSC1-mutant PDX tumors? after rapamycin or RMC-6272 treatment cessation. **F** Phase contrast photos of HCV29RP cells or HCV29RP cells with FDX1 KD treated as indicated. **G-I** IC50 curves of 105KRP, MRD639, and 105K MYC OE cells treated with mitochondrial complex II, III, IV inhibitors with or without RMC-6272 (n = 3).

Supplementary Table 1. Summary of RP/MRD cells.

Cell line	Genotype & cell type	Treatment	mTOR Mutation	AA Change	IC50 of Rapamycin		IC50 of Sapanisertib		IC50 of RMC-4627		IC50 of RMC-6272	
					Parental	RP	Parental	RP	Parental	RP	Parental	RP
Tsc1-/- MEFs	Tsc1- mouse fibroblasts	Rapamycin 500 nM, > 3 months	Not* found	—	0.3	—	3	—	0.3	—	0.08	—
Tsc2-/- MEFs	Tsc2- mouse fibroblasts		C6104T*	Ser2035Phe	0.1	—	3	10	0.05	—	0.03	—
105K Tsc2-	Tsc2- mouse kidney tumors		C6104G*	Ser2035Cys	0.5	—	30	50	1	—	0.3	1
705 Tsc2-	Tsc2- mouse kidney tumors		T6103C*	Ser2035Pro	—	—	50	50	3	—	1	10
HCV29 TSC1-	Tsc1- human BLCA		Not found*	—	—	—	30	—	0.05	—	0.03	0.3
RT4 TSC1-	Tsc1- human BLCA		C6101T* T7193C*	A2034V I2398T	0.5	—	80	100	1.5	—	0.8	8
97-1 TSC1-	Tsc1- human BLCA		Not found*	—	—	—	30	—	0.3	—	0.8	—

621-101 TSC2	Tsc2- human AML		Not sequenced	—	—	—	—	—	—	—	—	—
SNU-886 TSC2-	TSC2- human HCC		Not sequenced	—	—	—	—	30	1	—	0.5	—
MRD525	MRD of 150K CDX	3mg/kg, 1m	Not sequenced	—	0.5	—	30	—	1	10	0.3	3
MRD639	MRD of 150K CDX	8mg/kg, 1m	Not sequenced	—	—	—	—	—	—	—	—	—
*: Whole exon sequencing was performed #this sample also had marked reduction in expression of FKBP12								—: no IC50 can be reached				