

## Supplemental methods

### *Target sequencing using Amplicon-seq VHIO-Card panel*

DNA extraction from FFPE tumor samples was performed using the Maxwell FFPE Tissue LEV DNA Purification Kit, following the manufacturer's instructions. The minimum tumor content was set to 20%, to ensure subclonal somatic mutations identification or calling.

An initial multiplex-PCR with a proof-reading polymerase was performed on samples using a panel of over 800 primer pairs targeting frequent mutations in oncogenes and several tumor suppressors. A total of 61 genes were analyzed (**Supplemental Table S1**).

Indexed libraries were pooled and loaded onto a MiSeq instrument and sequencing performed (2X100). The initial alignment was performed with BWA after primer sequence clipping and variant calling performed with the GATK Unified Genotyper and VarScan2 followed by ANNOVAR annotation. Mutations were called at a minimum of 3% allele frequency. SNPs were filtered out with dbSNP and 1000 genome datasets (MAF>0.05). All detected variants were manually checked.

### *Target gene sequencing using Ion torrent Research Institute 12 Octubre panel (i+12)*

DNA was extracted from FFPE tissues using QIAamp DNA FFPE Tissue Kit from Qiagen (Hilden, Germany) following the manufacturer's instructions. The minimum tumor content was set to 20%, to ensure subclonal somatic mutations identification or calling.

Massive sequencing was carried out with Ion Torrent Proton sequencer (Thermo Fisher Scientific, Waltham, MA, USA).

Ion Ampliseq custom panel which covered the coding and splicing regions of 14 genes and the hotspot regions of 22 genes frequently mutated in breast cancer (**Supplemental table S1**). A total of 419 amplicons were generated from genomic DNA. Following the manufacturer's protocol, sequencing libraries (each one carrying a unique barcode) were elaborated in duplicate using Ion AmpliSeq Library Kit 2.0 (Thermo Fisher Scientific). Then, a reaction filter created millions of micro reactions in microspheres in which clonal amplification occurs. The product was transferred to an Ion PI Chip v3 (Thermo Fisher Scientific) for sequencing at a target coverage of 500X. Data analyses were performed by the software Ion Reporter 4.0 (Thermo Fisher Scientific) which identified single nucleotide polymorphisms (SNPs) and indels.

### *Target gene sequencing using Sequenom MassARRAY somatic mutation genotyping, INCLIVA*

DNA was extracted from FFPE tissues. The minimum tumor content was set to 30%, to ensure subclonal somatic mutations identification or calling.

The Sequenom MassARRAY and OncoCarta Panel v1.0 were used following the manufacturer's protocol (Sequenom, San Diego, CA, USA; <http://agenabio.com/oncocarta-panel>). The panel consisted of 24 multiplex assays capable of detecting 238 mutations in 19 oncogenes. DNA was amplified using the OncoCarta PCR primer pools. Unincorporated nucleotides were inactivated by shrimp alkaline phosphatase (SAP), and a single base extension reaction was performed using extension primers that hybridize immediately adjacent to the mutations and a custom mixture of nucleotides. Salts were removed by the addition of a cation exchange resin. Multiplexed reactions were spotted onto SpectroCHIP II arrays, and DNA fragments were resolved by MALDI-TOF on the Compact Mass Spectrometer (Sequenom, San Diego, CA).

Two additional customized mutation panels were used. These panels were designed in collaboration with the Cancer Genomics Group at the VHIO and included, in 12 multiplexes, a total of 107 somatic mutations in 15 genes. These two panels included 49 additional positions in 6 additional genes. Therefore, a total of 287 different positions in 25 oncogenes were checked (**Supplemental Table S1**).

Data were analyzed using the Sequenom MassARRAY Typer Analyser 4.0 Software to visualize the mass spectra for mutations and to determine the frequency of mutant and wild-type alleles. The lower threshold for mutation detection was set at 10%<sup>14-16</sup>. Mutations were manually reviewed using visual and raw spectrum patterns. Two different personnel in the laboratory scored mutations.

### *Average depth*

The targeted regions were covered on average at 2,355.98 (143-17641) of sequencing deep. Nonsynonymous somatic mutations were called from the clinical cancer panels in regions covered by at least >300X sequencing depth and a fixed threshold of 2.5 to 10% variant allele fraction (VAF).

### *Gene expression analysis*

A section of FFPE breast tissue was first examined with hematoxylin and eosin staining from the same core biopsy than the one used for nucleic acid extraction and molecular analysis to confirm the presence of invasive tumor cells ( $\geq 10\%$ ) and to determine the minimum tumor surface area (10 mm<sup>2</sup>). For RNA purification (High Pure FFPE RNA

isolation kit, Roche, Indianapolis, IN, USA) at least two 10µm FFPE slides were used. Macrodissection was performed to avoid contamination with normal tissue. A minimum of ~125 ng of total RNA was used to measure the expression of 55 breast cancer-related genes using the nCounter platform (Nanostring Technologies, Seattle, WA, USA), including the 50 genes of the PAM50 subtype predictor, androgen receptor and 4 immune genes (*CD4*, *CD8*, *PDI* and *PDL1*). Data were normalized using 5 housekeeping genes (*ACTB*, *MRPL19*, *PSMC4*, *RPLP0*, and *SF3A1*), and log2 transformed (**Additional file 2**).

### **Supplemental material**

**Table S1** – Detailed gene panels used in AGATA per genomic center

AKT1	BRAF	EGFR	ERBB2	KIT
KRAS	PIK3CA	ABL1	AKT2	AKT3
FGFR1	FGFR3	FLT3	GNAQ	GNAS
HRAS	IDH1	IDH2	JAK3	MET
NRAS	PDGFRA	RET	APC	CDH1
CDKN2A	ERBB3	FBXW7	FGFR2	NOTCH1
NOTCH4	PIK3R1	PTEN	RB1	RUNX1
TP53	ALK	CSF1R	CTNNB1	ESR1
GATA1	GNA11	GSK3B	JAK1	MAG
MAP2K1	MLH1	MPL	MSH6	MYC
NF2	PIK3R5	RNF43	SMAD4	SMARCB1
SRC	STK11	VHL	AKAP9	ARID1A
ARID2	ATM	GATA3	KMT2D	MAP2K4
MAP3K1	MED12	MLL3	MYH9	NF1
SETD2	SF3B1	UBR5	CDK4	

Common genes in all panels
Genes in common in VHIO & INCLIVA panels
Genes in common in VHIO & i+12 panels
Genes in VHIO panel
Genes in i+12 panel
Gene in INCLIVA panel

**Table S2** – Number of the somatic mutation in the 260 evaluated patients

<b>Number of mutations</b>	0	1	2	3	4	5	6
<b>Number of patients</b>	97	117	32	8	2	3	1

**Table S3. Table with the actual proportions of mutation in cancer-driven genes in primary tumors in both AGATA and TCGA datasets.**

	AGATA		TCGA		p-value
	Proportion tumors wit mutation	N Primary tumors	Proportion tumors wit mutation	N Primary tumos	
PIK3CA	33.1%	163	35.3%	507	0.608
TP53	29.1%	127	37.5%	507	0.0777
MAP3K1	10.0%	30	7.7%	507	0.649
KMT2D	13.3%	30	7.5%	507	0.2508
SETD2	10.0%	30	1.0%	507	0.052
ESR1	3.1%	97	0.4%	507	<b>0.007*</b>
MLL3	3.3%	30	7.5%	507	0.390
AKT1	1.8%	163	2.4%	507	0.654
ERBB2	3.1%	163	1.4%	507	0.157
PIK3R1	2.4%	127	2.6%	507	0.899
GATA3	3.3%	30	10.7%	507	0.1952
PTEN	1.6%	127	3.6%	507	0.253
EGFR	1.8%	163	0.8%	507	0.275
APC	1.6%	127	0.6%	507	0.077
CDH1	1.6%	127	6.7%	507	<b>0.007*</b>
JAK1	2.1%	97	0.4%	507	0.061
CDKN2A	0.8%	127	0.4%	507	0.560
FBXW7	1.6%	127	0.4%	507	0.761
RUNX1	1.6%	127	3.6%	507	0.0765
FGFR1	1.5%	133	0.2%	507	0.051
KIT	1.2%	163	1.0%	507	0.828
ALK	1.0%	97	0.6%	507	0.657
RNF43	1.0%	97	0.6%	507	0.657
ERBB3	0.8%	127	1.6%	507	0.4989
NOTCH1	0.8%	127	0.4%	507	0.560
ABL1	0.8%	133	0.8%	507	1.000
AKT2	0.8%	133	0.2%	507	0.2794
BRAF	0.6%	163	0.6%	507	1.000

**Table S4. Table with the actual proportions of mutation in cancer-driven genes metastatic tumors in both AGATA and MSK datasets.**

	AGATA		MSK		p-value
	Proportion tumors wit mutation	N Metastatic tumors	Proportion tumors wit mutation	N Metastatic tumors	
PIK3CA	40.2%	97	36.20%	395	0.465
TP53	27.8%	72	37.5%	395	0.115
MAP3K1	18.2%	11	6.8%	395	0.147
KMT2D	0.0%	11	3.8%	395	0.511
SETD2	9.1%	11	2.5%	395	0.182
ESR1	8.2%	61	9.1%	395	0.819
MLL3	9.1%	11	9.4%	395	0.973
AKT1	9.3%	97	4.3%	395	<b>0.049*</b>
ERBB2	3.1%	97	5.1%	395	0.405
PIK3R1	4.2%	72	1.0%	395	<b>0.040*</b>
GATA3	0.0%	11	16.5%	395	0.142
PTEN	2.8%	72	8.4%	395	0.098
EGFR	2.1%	97	1.3%	395	0.556
APC	1.4%	72	1.5%	395	0.949
CDH1	1.4%	72	13.7%	395	<b>0.003*</b>
JAK1	0.0%	61	2.0%	395	0.266
CDKN2A	1.4%	72	0.5%	395	0.379
FBXW7	0.0%	72	1.0%	395	0.395
RUNX1	0.0%	72	4.8%	395	0.058
FGFR1	0.0%	86	0.8%	395	0.406
KIT	0.0%	97	1.3%	395	0.406
ALK	0.0%	61	1.5%	395	0.336
RNF43	0.0%	61	0.5%	395	0.580
ERBB3	0.0%	72	3.0%	395	0.137
NOTCH1	0.0%	72	2.0%	395	0.227
ABL1	0.0%	86	0.5%	395	0.512
AKT2	0.0%	86	0.3%	395	0.611
BRAF	0.0%	97	0.0%	395	1.000

**Table S5.** Patients' characteristics among patients who received a clinical recommendation (n=116) and patients with non-matched therapy (n=47).

	<b>Received recommendations (n=116)</b>	<b>Nonmatched therapy (n=47)</b>
<b>Age (years)</b>		
<b>Median (range)</b>	54 (33-80)	53 (29-80)
<50	41 (35%)	16 (34%)
≥ 50	75 (65%)	31 (66%)
<b>ECOG</b>		
0	49 (43.0%)	18 (38.3%)
1	62 (54.4%)	26 (55.3%)
2	3 (2.6%)	3 (6.4%)
<b>Hormone receptor status</b>		
Negative	11 (9.5%)	17 (36.2%)
Positive	105 (90.5%)	30 (63.8%)
<b>HER2 status in primary tumor</b>		
Negative	102 (88%)	40 (85.1%)
Positive	14 (12%)	7 (14.9%)
<b>Previous lines of metastatic treatment</b>		
1	27 (23.3%)	12 (25.5%)
2-3	30 (25.9%)	13 (27.7%)
≥3	59 (50.8%)	19 (40.4%)

**Table S6.** Clinical and directed therapy received recommendations according to the somatic mutations (N = 116).

<b>Targeted therapies</b>	<b>N</b>
AKT inhibitors	104
Therapies targeting PI3K or AKT	89
PAN-ERBB tyrosine kinase inhibitor	8
Selective ER modulators (SERMs) and/or the selective ER degrader (SERD)	8
NOTCH inhibitors	3
FGFR1-4 tyrosine kinase inhibitor	2
CDK4/6 inhibitors	2
BRAF inhibitors	1