

### Supplemental Figure 1.

Reduced *RASA1* mRNA leads to excessive angiogenesis in mouse retina.

(A-F) Representative c

onfocal fluorescence micrographs showing projected images of vessels stained with Alexa-594-isolectin in whole-mount retina of a control siRNA (A-C) or *RASA1* siRNA (D-F) transfected eyes. Control or *RASA1* siRNA was intravitreally injected into the right or left eye, respectively, at p6 (C57BL/6). Higher magnification of peripheral region (white boxes) and middle region (yellow boxes) are also shown in (B and E) or (C and F), respectively. Scale bars, 600  $\mu\text{m}$  (A and D), 150  $\mu\text{m}$  (B-F). (G) RT-PCR indicate mouse *RASA1* mRNA levels in each retina (normalized to mRNA levels in retina injected with control siRNA; n=6 per condition, mean  $\pm$  SEM; \*p<0.05). (H) Graph showing percentage of vascularized area in the middle or peripheral regions of retinae (n=5 per condition, mean  $\pm$  SEM; \*\*p<0.01).

### Supplemental Figure 2.

*RASA1* is structurally and functionally conserved between zebrafish and human.

(A) Alignment of predicted amino acid sequences for human *RASA1* and zebrafish *RASA1a* and *RASA1b* (82% and 76% identical to human *RASA1*, respectively) were conducted using ClustalW and Boxshade programs. Residues in black are identical, residues in gray indicate conserved amino acids. *RASA1*,

human RASA1; *rasa1a* and *rasa1b*, zebrafish RASA1. **(B)** Whole mount *in situ* staining shows the diffused, and non-vascular-specific expression of *RASA1a* and *RASA1b* at 18 somite, 24 hpf and 48 hpf. *VEGFR2* staining shows the vascular-specific staining. **(C)** RT-PCR analysis showed efficient knockdown of *RASA1a* and *RASA1b* transcripts by splice morpholinos. wt: control sample; MO: splice morpholino injected sample.

### **Supplemental Figure 3.**

Efficient knockdown of *EphB4a* and *ephrin-B2a* by morpholinos.

Validation of *EphB4a* and *ephrin-B2a* (*efnb2a*) morpholinos (MOs). **(A and B)** *EphB4a* morphant at 48 hpf generated by a splice MO (250  $\mu$ M; **A**), confirmed phenotype from AUG-targeted MO (higher magnification of boxed region shown in **B**). Scale bars, 500  $\mu$ m (**A**), 100  $\mu$ m (**B**). **(C)** Western blot analysis for *EphB4a* AUG MO knockdown efficiency (compare lanes 1 and 2). **(D)** RT-PCR analysis showed efficient knockdown by the *EphB4a* splice MO. wt: control sample; MO: splice MO injected sample. **(E)** Western blot analysis for *ephrin-B2a* AUG MO knockdown efficiency (compare lanes 1 and 2). Non-radioactive *in vitro* transcription-translation system was used for Western blots (**C** and **E**; also see **Methods**). PCR product with or without MO target site (w/ MO Target or No MO Target, respectively), was incubated with or without MO (MO or control, respectively).

### **Supplemental Figure 4.**

Predicted RASA1 binding sites on EphB4a are necessary for efficient rescue of EphB4a morphants.

EphB4a morphant rescue experiment with EphB4a wildtype or mutant mRNA. Usage of a double transgenic line (32, 33) facilitated visualization of endothelial (green; **A, C, E**) and blood cells (red; **B, D, F**) in the same embryo at 48 hpf. All mRNAs were injected at 30 ng/ $\mu$ l. (**A** and **B**) Co-injection of EphB4a MO with wildtype *EphB4a* mRNA rescued caudal vessel structure and function. (**C-F**) Co-injection with each mutant EphB4a receptor (EphB4a mRNA lacking two potential RASA1 binding sites (EphB4a<sub>FF</sub>; **C** and **D**), or EphB4a mRNA lacking three potential RASA1 binding sites (EphB4a<sub>EE+Grb2</sub>; **E** and **F**)) was unable to rescue the EphB4a morphant caudal vascular malformation.

### **Supplemental Figure 5.**

Schematic diagram of arterial or venous intersegmental vessel formation.

(**A** and **B**) The formation of arterial or venous intersegmental vessels (IS Artery or IS Vein, respectively) occurs by interaction of secondary venous sprout (2°sprout) with the primary intersegmental vessel (1°segment) (**A**): no connection (IS Artery in red) or connection (IS Vein in blue). However, under reduced EphB4 or RASA1 function, more veins were formed (**B**).

### **Supplemental Figure 6.**

mTORC1 inhibitor restores caudal blood flow in EphB4a and RASA1a morphants.

The caudal functional assay was performed on embryos co-injected with EphB4a and ephrin-B2 morpholinos (dMO) or on RASA1a morphants at 72 hpf, after 48 h treatment with rapamycin (Rapa; 400 nM). The double transgenic line (32, 33), was used to facilitate visualization of endothelial (green; **A, C, E, G, I**) and blood cells (red; **B, D, F, H, J**). (**A** and **B**) Control embryo shows proper vascular architecture and blood flow. (**C-J**) Treatment with Rapamycin restored caudal blood flow by 72 hpf in dMO (**C-F**) or in RASA1a MO (**G-J**). See also **Supplemental Figure 7**.

#### **Supplemental Figure 7.**

PI3K-mTORC1 pathway inhibitors significantly restore the proportion of EphB4a and RASA1a morphants with normal caudal blood flow.

(**A-D**) The caudal functional assay was performed on embryos co-injected with EphB4a and ephrin-B2 morpholinos (dMO; **A** and **B**) or on RASA1a morphants (**C** and **D**) at 72 hpf, after 48 h treatment with rapamycin (Rapa; 400 nM), GDC0941 (GDC; 250 nM), or BEZ235 (BEZ; 250 nM). dMO or RASA1a morphant phenotypes at 48 hpf (severe, mild, or normal) converted into percentages (**A** and **C**) or percentages were normalized against dMO or RASA1a morphant to show the percentage increase in embryos with normal blood flow in comparison with dMO or RASA1a morphant (**B** and **D**). Data are shown as mean  $\pm$  SEM from three independent experiments (n=100 per condition; \*p<0.05, \*\*p<0.01, \*\*\*p<0.001).

**Supplemental Figure 8.**

Generation of the *Tg(fli1:RhebS16H)* transgenic line to study the consequence of active mTORC1 signaling in endothelial cells.

(**A** and **B**) Arteriovenous connection assay was performed at 48 hpf on embryos injected with *RhebS16H* mRNA. A counting region containing eight ISVs (from mid-trunk to end of yolk extension) was used for each embryo at 48 hpf (n=20 per condition). *RhebS16H* mRNA injection generated more IS veins (**A**), similar to the phenotype observed in EphB4a and RASA1 morphants. Arteriovenous intersegmental vessel proportion in *RhebS16H* mRNA injected embryo was normalized by rapamycin treatment (400 nM; **B**), suggesting the mTORC1 role for proper arteriovenous connection. (**C-F**) Embryos were examined by incrossing F<sub>1</sub> *Tg(fli1:RhebS16H)* line. Those lacking EGFP in their hearts are wildtype siblings of the *Tg(fli1:RhebS16H)* line, showing normal vasculature (**C**; higher magnification of boxed region shown in **D**). However, those with positive *cmlc2:EGFP* (which indicates that these embryos also carry the *RhebS16H* transgene) showed a mild vascular phenotype in the caudal plexus (**E**; higher magnification of boxed region shown in **F**). Experiments for this paper were conducted using F3 and F4 embryos. (**G**) *Tg(fli1:RhebS16H)* line was generated using Tol2 kit. Briefly, transposase mRNA was injected with a transposon donor plasmid containing Tol2 construct with a *fli1* promoter and the gene encoding *RhebS16H* into a 1-cell stage zebrafish embryo. The Tol2 construct was excised from the donor plasmid, before integration into the genomic DNA.

**Supplemental Figure 9.**

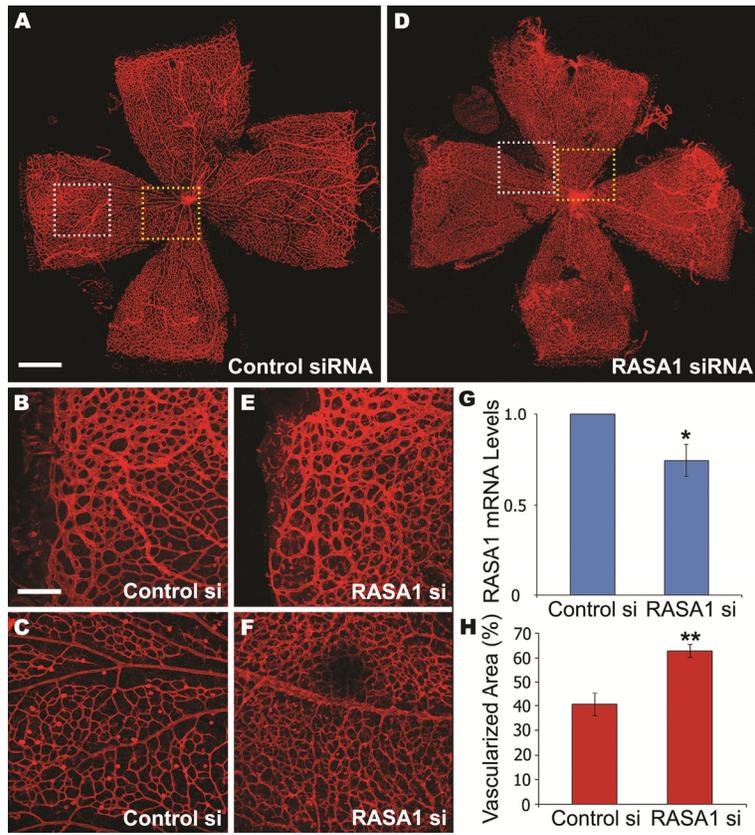
Endothelial mTORC1 activation is unique in vascular anomalies. Representative images from immunohistochemical staining for CD31 (endothelial cells), p-S6 (S235/236, indicates increased mTORC1 activity) and p-ERK1/2 (indicates increased RAF-MEK activity) in resected vascular anomalies. All experiments were performed on serial sections. **(A and B)** Resected tissues from patients (#1 and #2) with Parkes Weber Syndrome (PWS). **(C-E)** Resected tissues from three patients (#1, #2 and #3) with AVMs. These AVMs were not tested for *RASA1* mutations. Black arrowheads indicate positive endothelial staining (overlapped staining with CD31); red arrowheads indicate no endothelial staining; black arrow indicates positive staining in additional cell types. Scale bars, 50  $\mu\text{m}$  (**A and B**), 100  $\mu\text{m}$  (**C-E**).

**Supplemental Figure 10.**

Proposed model describing the molecular mechanisms that leads to normal and abnormal vessel connections. **(A)** Under normal conditions, cell contact dependent ephrin-B2 stimulation of EphB4 recruits RASA1 to the receptor at the membrane. This model proposes that EphB4-RASA1 interaction is critical for the suppression of mTORC1 pathway activity. Attenuation of the mTORC1 pathway generates the signaling cascade necessary for proper vessel hierarchy and capillary formation. **(B)** Partial loss of function of RASA1 hinders normal mTORC1 suppression leading to overactive mTORC1 signaling, therefore,

deregulation of EphB4-RASA1-mTORC1 promoting abnormal vessel connections. This model provides a possible mechanism for *RASA1*-dependent vascular malformation.

Supp Fig 1



# Supp Fig 2

**A**

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RASA1 1  MMAEAENGSEEGPITGAGGGGAAAGSSAVFAVCRVKIPAMIEVAAIPYPPIVETVIGGII GGGAALGSEFLGAGSVAGLGGAGLGGTAAAGVGAAGVAGAVVAGP
rasa1a 1  -----MEVREEDRGSDESRPESTHPIYSIPARVIVVPHIDMMIYPSGGGE-----LACRRAAAT
rasa1b 1  -----MRTGCGGKQPDFEIVVETIADGDTHIACHCQGIQISLSLSLHTITVLPKQPPVTYYSIFKDRPRGIVMFASMGAVSAGHPIISFSFV

RASA1 111  SGDMALIKLITSLLAETLIPGGCFPLPPFPMLIPISAGIGTVDEGSSIDGPEVEEEVVAIPLTAPPTNQWYHGKLDRTIAEERLRQAGKSSGYLIRESDRRPGSFVLSF
rasa1a 59  ECISPSIDGPGSSRMSIDGPIVFPPLPPFPSCICGQ--CSVDSICQDGPVEVEEVAIPLSAPPTNQWYHGMLDRTIAEERLRQARTGSGYLIRESDRRPGSFVLSF
rasa1b 98  ERGMSDPQHFCAVGVVPSISLSPMCIARISIRPISIVEPDTIIVQFIIIG---EIEEIVITITAPEINQWYHGKLDRTIAEERITAVFARAGSYLIRESDRRPGSFVLSF

RASA1 221  LSQLMNVNHFRIIAMCGDYIIGRRFSSLSDLIGYYSVSCLLKGEKLIYPVAPPEPVEDRRRVRAILPYTKVPEIDEISFLKGDMPIVHNELEDGMWVTVNRTDEQGL
rasa1a 167  LSWISVWNHFRIIAMCGDYIIGRRFSSLSDLIGYYSVSCLLKGEKLIYPVAPPEPVEDRRRVRAILPYTKVPEIDEISFLKGDMPIVHNELEDGMWVTVNRTDEQGL
rasa1b 204  LSMINIVYSHFRIIAMCGDYIIGRRFSSLSDLIGYYSVSCLLKGEKLIYPVAPPEPVEDRRRVRAILPYTKVPEIDEISFKGKTIIVHNELEDGMWVTVNRTDEQGL

RASA1 331  IVEIDLVEEVGREEDPHEGKIWFHGKISKQEAYNLLMTVGQVCSFLVRPSDNTPGDYSLYFRTNENIQRFKICPTPNQFMGGRYYNSIGDIIHYRKEQIVEGYMLKDFP
rasa1a 277  IVDLVEEVGREEDPHEGKIWFHGKISKQEAYNLLMTVGQVCSFLVRPSDNTPGDYSLYFRTNENIQRFKISPTPNQFMGGRYYNSIDDIIEHYRKEQIVEGYMLKDFP
rasa1b 314  IVEIDLVEEVGREEDPHEGKIWFHGKISKQEAYNLLMTVGQVCSFLVRPSDTPGDYSLYFRNTDIIQRFKISPTISNQFMGGRYYNSIDDIIEHYRKEQIVEGHSFKDA

RASA1 441  VFMQIQEQVINDIVDGKEIYNTIRRKTKDAFYKNIKKGYYLIRKKGKRWKKNLYFILEGSDAQLIYFSEKRATKPKGLIDLSCVSVVVDHSLFGRPNCFQIVVQHFS
rasa1a 387  VEVQIQEQVINDIVDGKEIYNTIRRKTKDAFYKNIKKGYYLIRKKGKRWKKNLYFILEGNDALIIYFSEKRATKPKGLIDLSCVSVVVDHSLFGRPNCFQIVVQHFS
rasa1b 424  ISVQIQEQVINDIVDGKEIYNTIRRKTKDAFYKNIKKGYYLIRKKGKRWKKNLYFILEGNDALIIYFSEKRATKPKGLIDLSCVSVVVDHSLFGRPNCFQIVVQHFS

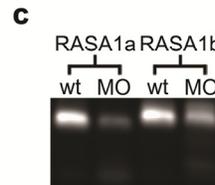
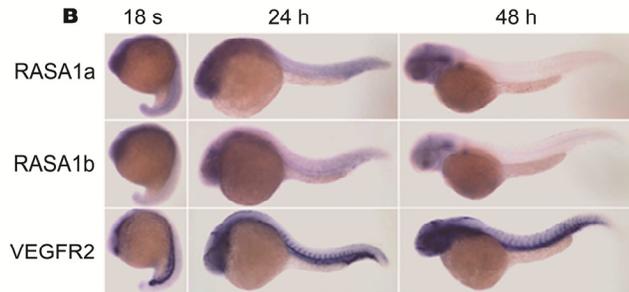
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rasa1a 497  EEQYIFYFAGETPEQADMMKCLQFCNLRKPKICINNKRLRQVSSLVIVVEAAHKLEPKHFTNPYCNISNSVQVAKTHAREGQNFVWTEPFIFDDLSODINRFEIISL
rasa1b 534  EEQCIIFYFAGETPEQAEDWMKCLQFCNLRKPKICPCSNKRLRQVSSLVHIVVEAAHKLESKHFTNVCNLYLNSIQVAKTHAREGQNFVWTEPFIFDDLSIDINRFEIISL

RASA1 659  SNKTKKSKEDILFMRCQLSRLOCHATEWELLSHPLKGIPEGSLRVRVRYSMKIMPEEYSEFKELIQKELHWVYALSHVCGQDRTLASILLRIEHEIIEISL
rasa1a 607  SNKTKKSKESDILFMRCQLSRLOQRCMIDENFPSSVPLKGIPEGSLRVRVRYSMKIMPEEYSEFKELIQRDHVIYALAHVCQDRTLASILLRIEHEIIEISL
rasa1b 644  SNKTKKSKEDILFMRCQCHICRLRQRCMIDENFPSSHVPLRNMMSLRLRVRVRYSMKIMPEEYSEFKELIQLRDLHVIYALAHVCGQDRTLASILLRIEHEIIEISL

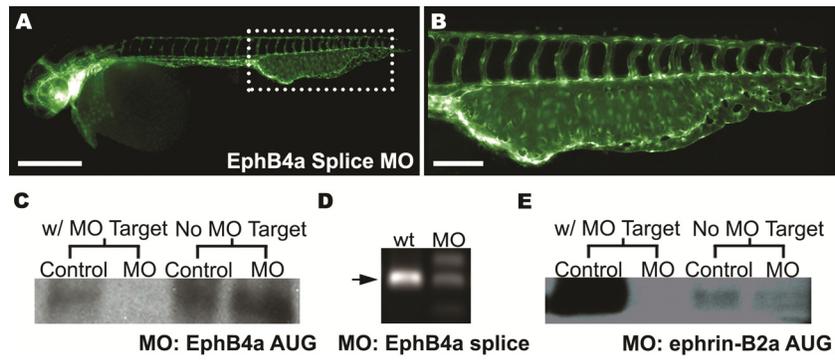
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rasa1a 717  LLRLNDREINMEDEATILFRATTLASTLMEQYMKATATPFVHHALKDILKIMESKQSCELNPSKLEKNEDVNIHLAHLNLSLVEKIFMAEILPPTLRYIYGCLQ
rasa1b 754  LLRLNDREICAEDEATILFRATTLASTLMEQYMKATATPFVHHALKDSILKIMESKQSCELNPSKLEKNEDVNIHLAHLNLSLVEKIFMAEILPPTLRYIYGCLQ

RASA1 879  KSVQKQWETNTIMTRVVSQGFVFLRLICPAILNPRMFNIISPSPIAARTILVAKSVQNLANLVEFGAKEPYMEGVNFFIKSNKHRMIMFLDELGNVPELPTITEHFR
rasa1a 827  KSVQKQWETNTIMTRVVSQGFVFLRLICPAILNPRMFNIADPPSSAORTLITLVAQSVQNLANLVEFGAKEPYMEGVNFFIKANIQRMIMFLDELGNVPELPTITEHFR
rasa1b 864  KSVQKQWETNTIMTRVVSQGFVFLRLICPAILNPRMFNIADPPSPARTLITLVAQSVQNLANLVEFGAKEPYMEGVNFFIKSNKHRMIFLDELGNVPELPTITEHFR

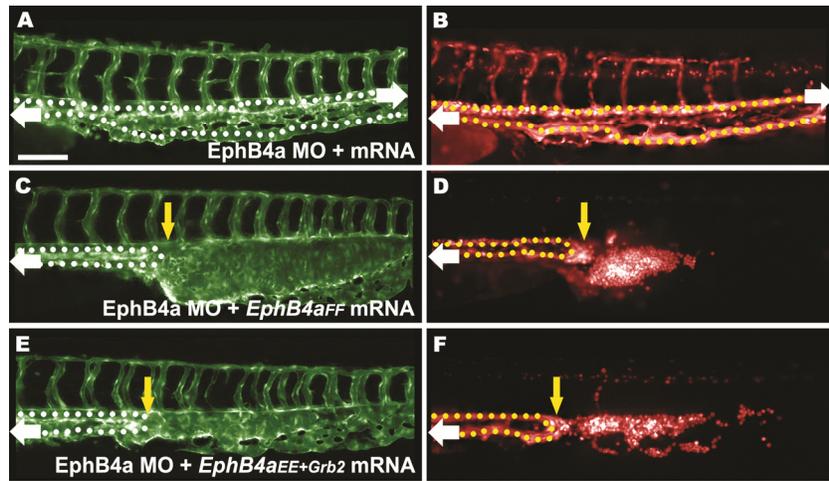
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### Supp Fig 3

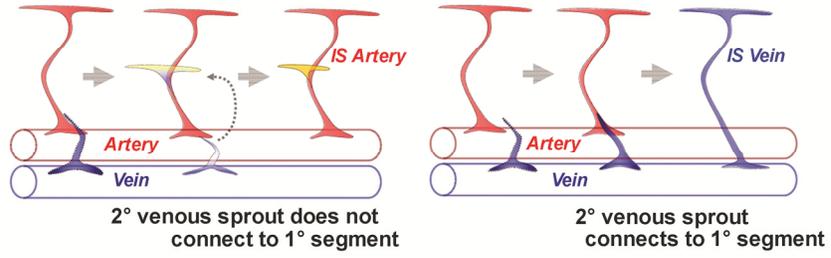


Supp Fig 4

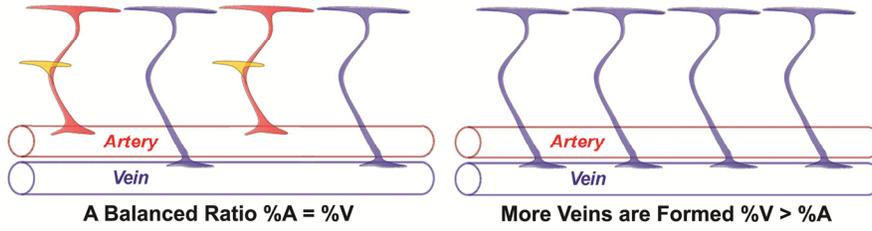


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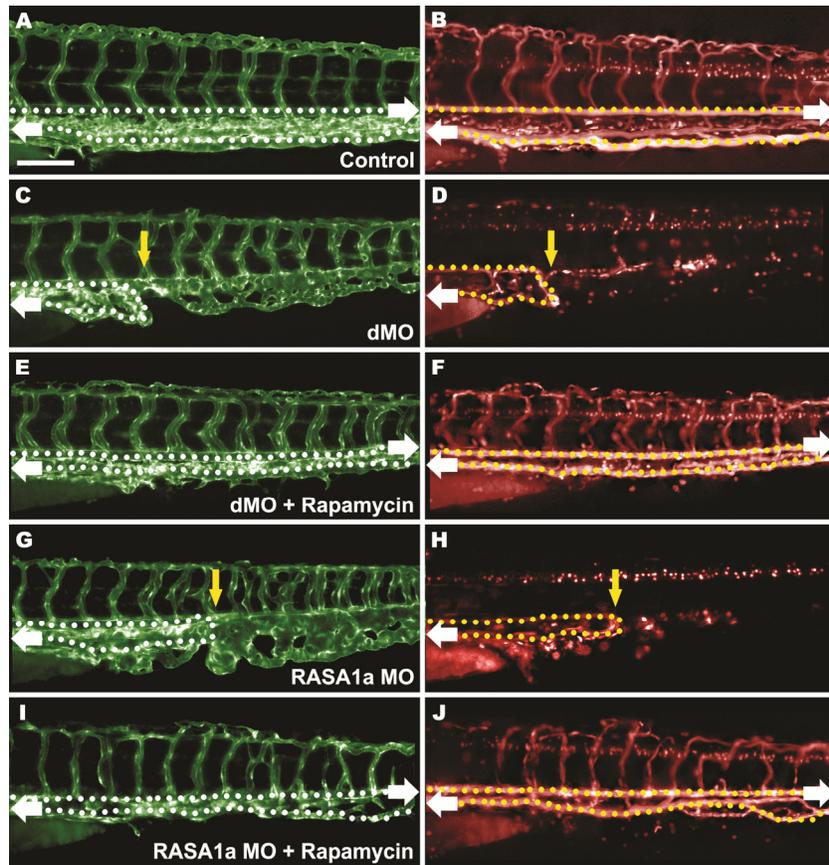
## A Normal Formation of Intersegmental Arteries and Veins



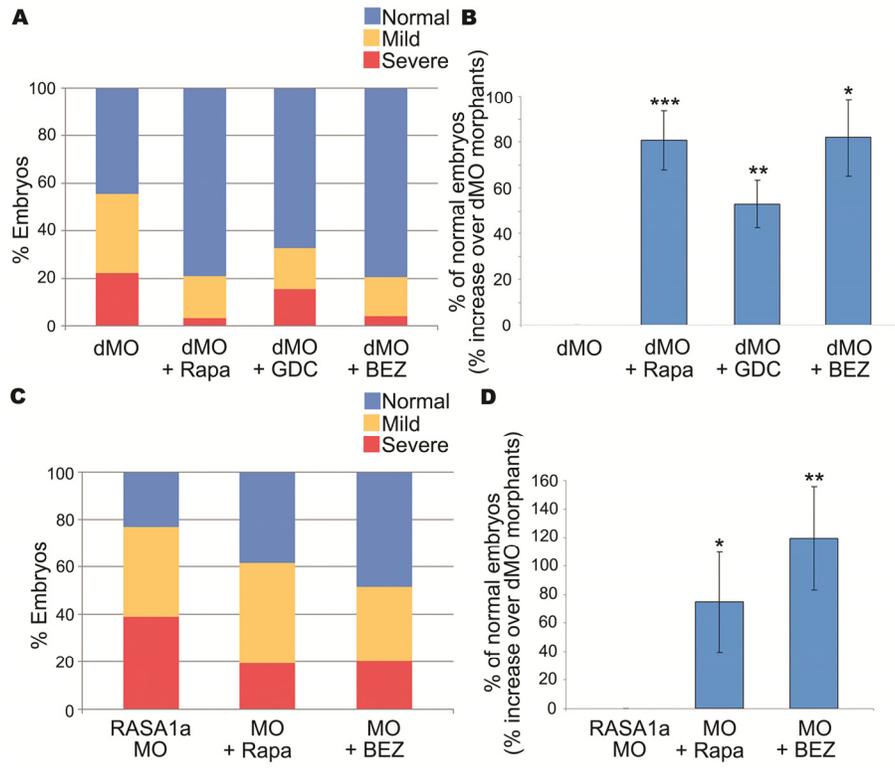
## B More Veins Formed with Reduced EphB4 or RASA1 Function



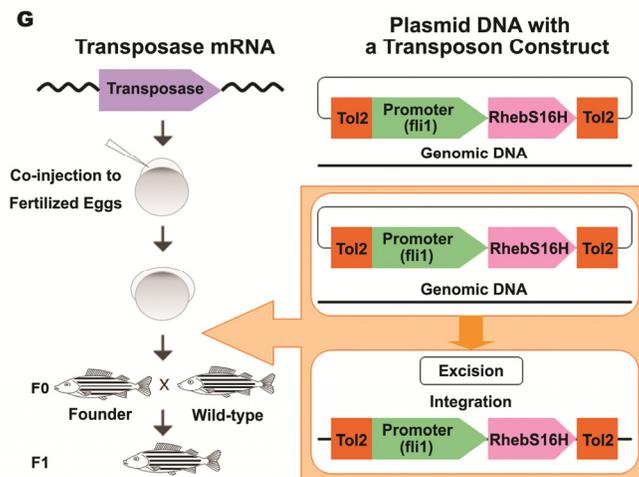
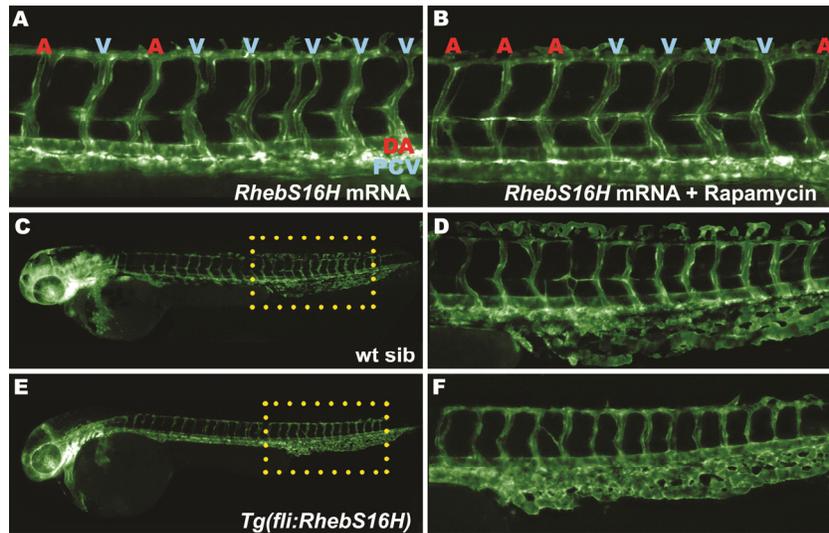
Supp Fig 6



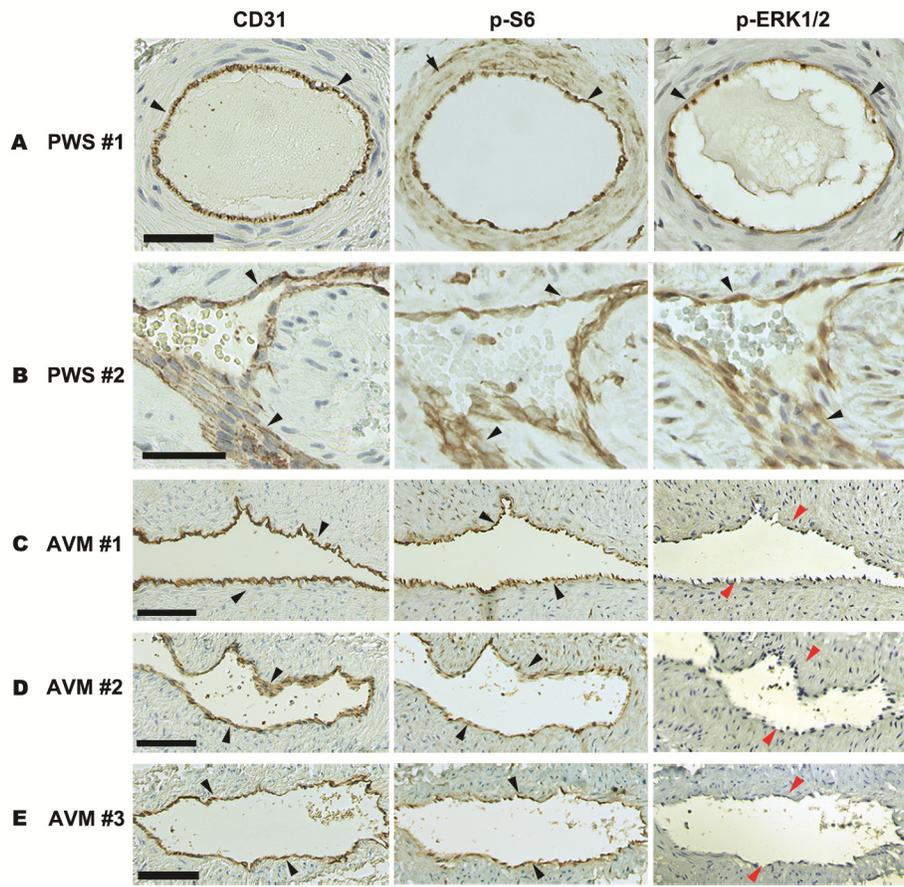
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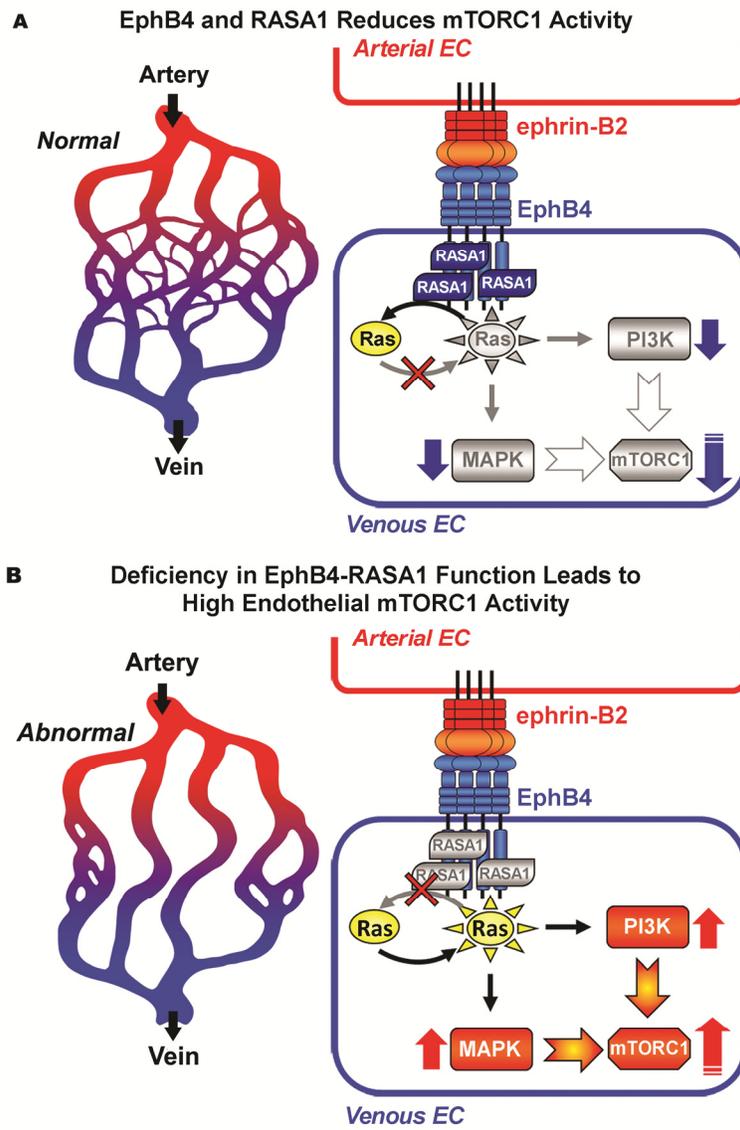
Supp Fig 8



# Supp Fig 9



# Supp Fig 10



**Supplemental Table 1.**

<b>siRNA</b>	<b>siRNA Sequence</b>
<i>RASA1</i> #1 (mouse)	5'-UGUCCAACACCUAACAACCAGUUUA-3'

**Supplemental Table 2.**

<b>Primer</b>	<b>qRT-PCR Primer Sequence (5'-3')</b>
mouse <i>RASA1</i> sense	5'-TGTGGTGATTACTACATTGGTGG-3'
mouse <i>RASA1</i> antisense	5'-CGCCTTCTATCTTCTACTGGCTC-3'

**Supplemental Table 3.**

<b>Morpholino</b>	<b>Morpholino Sequence</b>
<i>EphB4a</i> (AUG)	5'- GCGGAATCACGAGTGTTTTACTTGT -3'
<i>EphB4a</i> (splice)	5'-CTGGAAAACACACACGAGAGATAGA-3'
<i>ephrin-B2a</i>	5'-AATATCTCCACAAAGAGTCGCCCAT-3'
<i>RASA1a</i>	5'-TAATCTCCACACATCGCAATGATCC-3'
<i>RASA1b</i>	5'-TGCGATGATCCTGCAAACGATCATT-3'

**Supplemental Table 4.**

<b>Primer</b>	<b>RT-PCR Primer Sequence (5'-3')</b>
<i>EphB4a</i> sense	5'-ATGGAGCTCTTCTCCAGGAATGTG-3'
<i>EphB4a</i> antisense	5'-ATAGGTCCGCACACTGTTGTTCTC-3'
<i>RASA1a</i> sense	5'-CCGAACCATTGCTGAAGAGCGATT-3'
<i>RASA1a</i> antisense	5'-ACCAATGAGGTCTGAAAGGGACGA-3'
<i>RASA1b</i> sense	5'-ATGATCGCAGAGGAGCGTTTGCTT-3'
<i>RASA1b</i> antisense	5'-GGCAGGACACGTAGCTGTAATAACCA-3'