

SUPPLEMENTARY MATERIALS

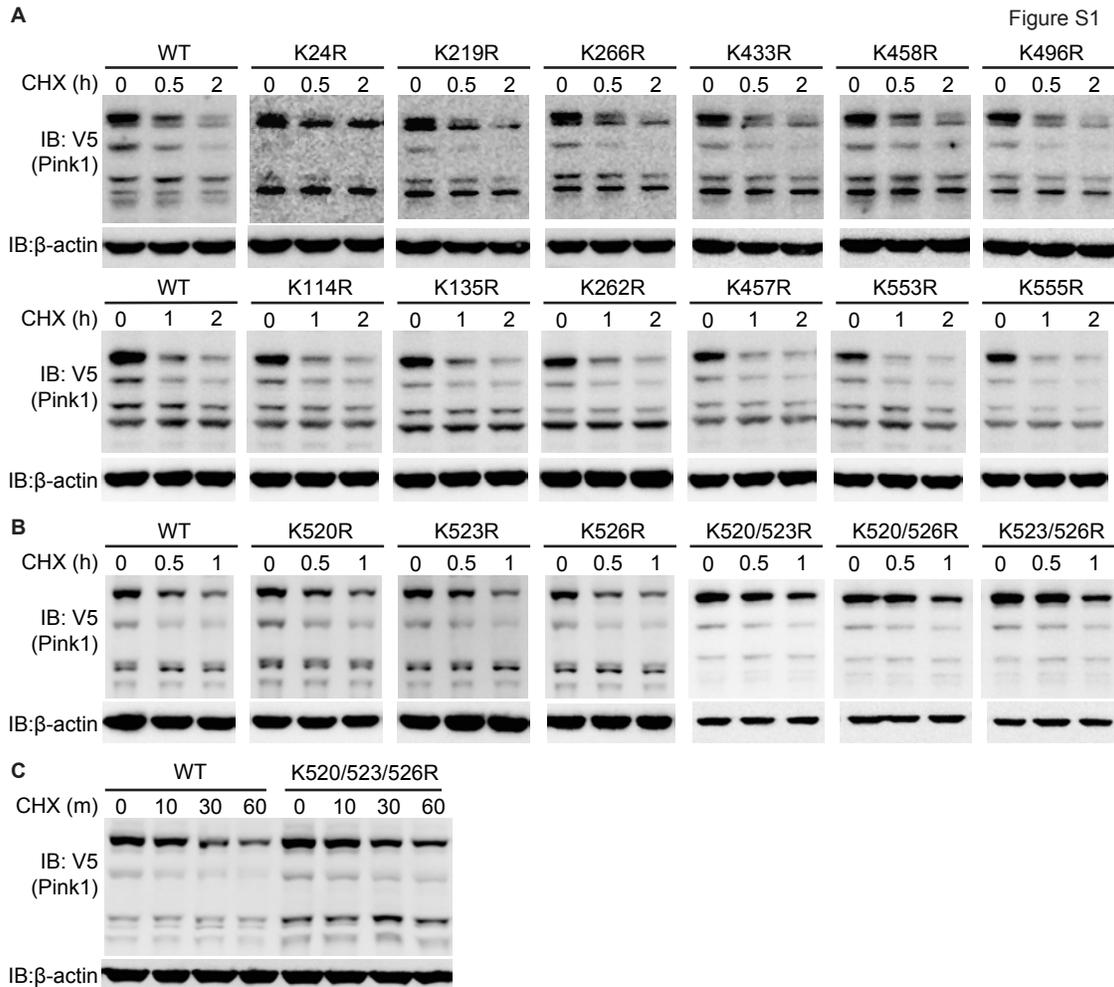


Fig. S1. Identification of PINK1 ubiquitin acceptor sites.

(A-C) Murine lung epithelia 12 (MLE12) cells were nucleofected with indicated single, double or triple lysine to arginine mutant plasmids and incubated for 48 h before the addition of CHX. Cells were collected at the indicated time points and cell lysates were subjected to immunoblotting analysis.

Table S1. Mass spectrometric analysis of PINK1 binding partners.

Gene Name	Protein Name	GFP PSM	PINK1-GFP PSM	Log2 Ratio (PINK1-GFP/GFP)
MSH2	mutS homolog 2, colon cancer, nonpolyposis type 1	0	24	5.614709844
FBXO7	F-box protein 7	0	7	3.906890596
PTGES3	prostaglandin E synthase 3	0	7	3.906890596
HSP90AA1	heat shock 90kDa protein 1, alpha isoform 1	38	195	2.344238257
CDK1	cyclin-dependent kinase 1	4	15	1.784271309

List of putative and previously described PINK1-interacting proteins identified by a label-free mass spectrometry screen of GFP and PINK1-GFP immunoprecipitation products. The peptide-spectral match (PSM) counts are shown, and the log₂ protein ratios calculated from normalized PSM counts. References for known direct or functional/genetic interactions confirmed in this screen include: (67); (26); (68); (69)

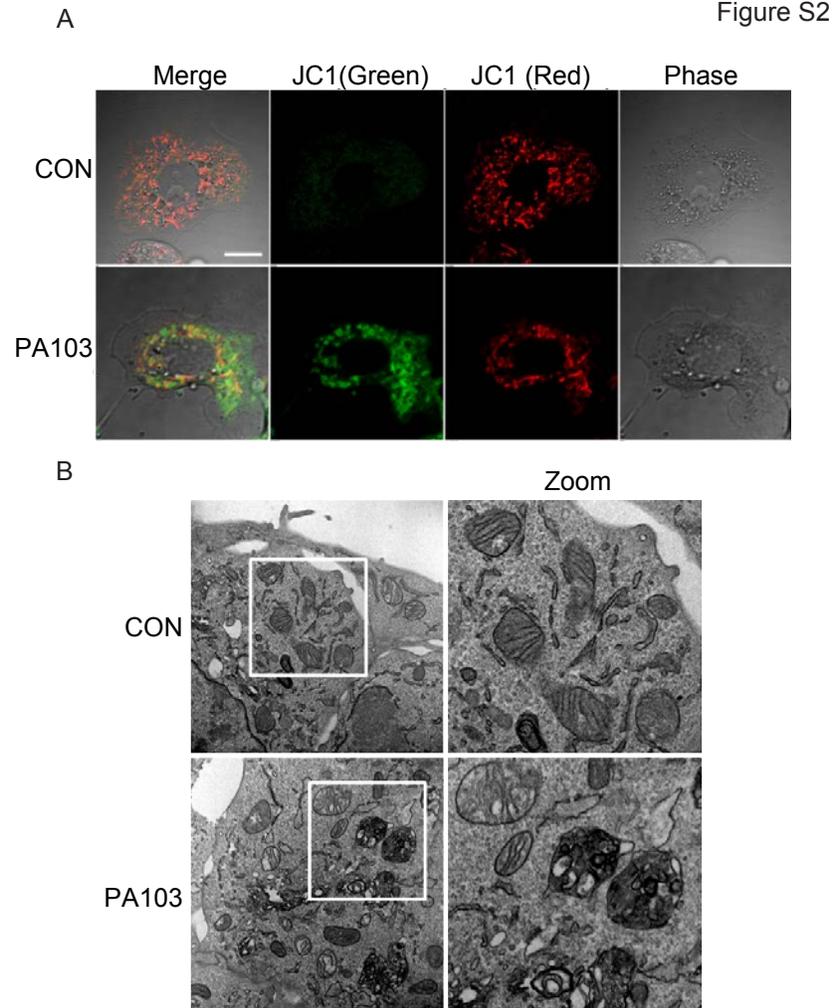


Fig. S2. *P. aeruginosa* infection injures mitochondria.

(A) BEAS-2B cells were exposed to a virulent strain of *P. aeruginosa* (PA103, multiplicity of infection (MOI=10)) for 90 min. The cells were then stained with JC1 (2 μ M) for additional 20 min before confocal microscopic analysis. (B) MLE12 cells were exposed to PA103 (MOI=10) for 8 h, cells were washed and fixed for transmission electron microscopy.

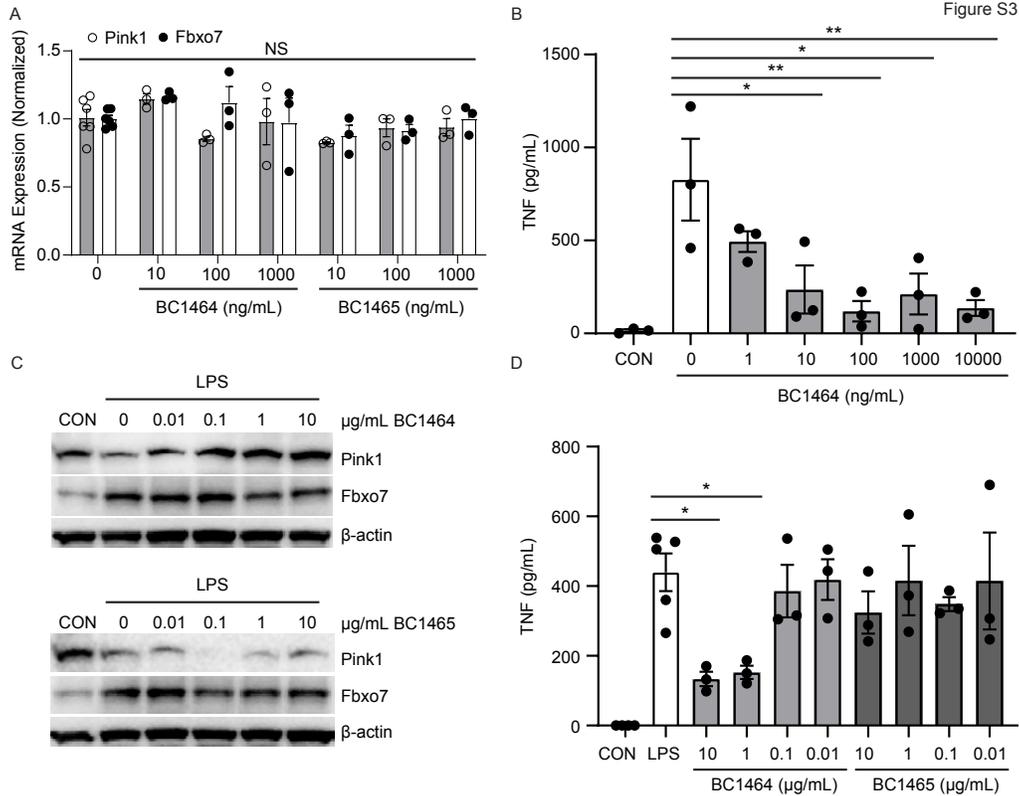


Fig. S3. BC1464 preserves PINK1 protein and inhibits pro-inflammatory TNF- α release in vitro. (A) MLE cells were incubated with BC1464 or BC1465 at indicated concentrations for 16 h. Steady-state mRNA was analyzed by quantitative real-time PCR using PINK1, Fbxo7 primers and normalized to GAPDH. Data and means \pm SEM (n=3-6) (B) PBMCs were pretreated with BC1464 at indicated concentrations for 2 h before an additional 4 h treatment with LPS (10ng/ml). TNF- α secretion was measured using an ELISA. Data and means \pm SEM (n=3) (C) Human lung slices were treated with BC1464 or BC1465 for 4 h at the indicated concentrations before they were challenged with LPS (100 ng/ml) for an additional 4 h. Lung slices were collected for immunoblotting and supernatant was collected for TNF- α ELISA analysis in (D). Data and means \pm SEM (n=3-5). NS, $P > 0.05$, * $P < 0.05$, ** $P < 0.01$, as indicated by one-way ANOVA with Tukey's test of multiple comparisons (A-B,D).

Figure S4

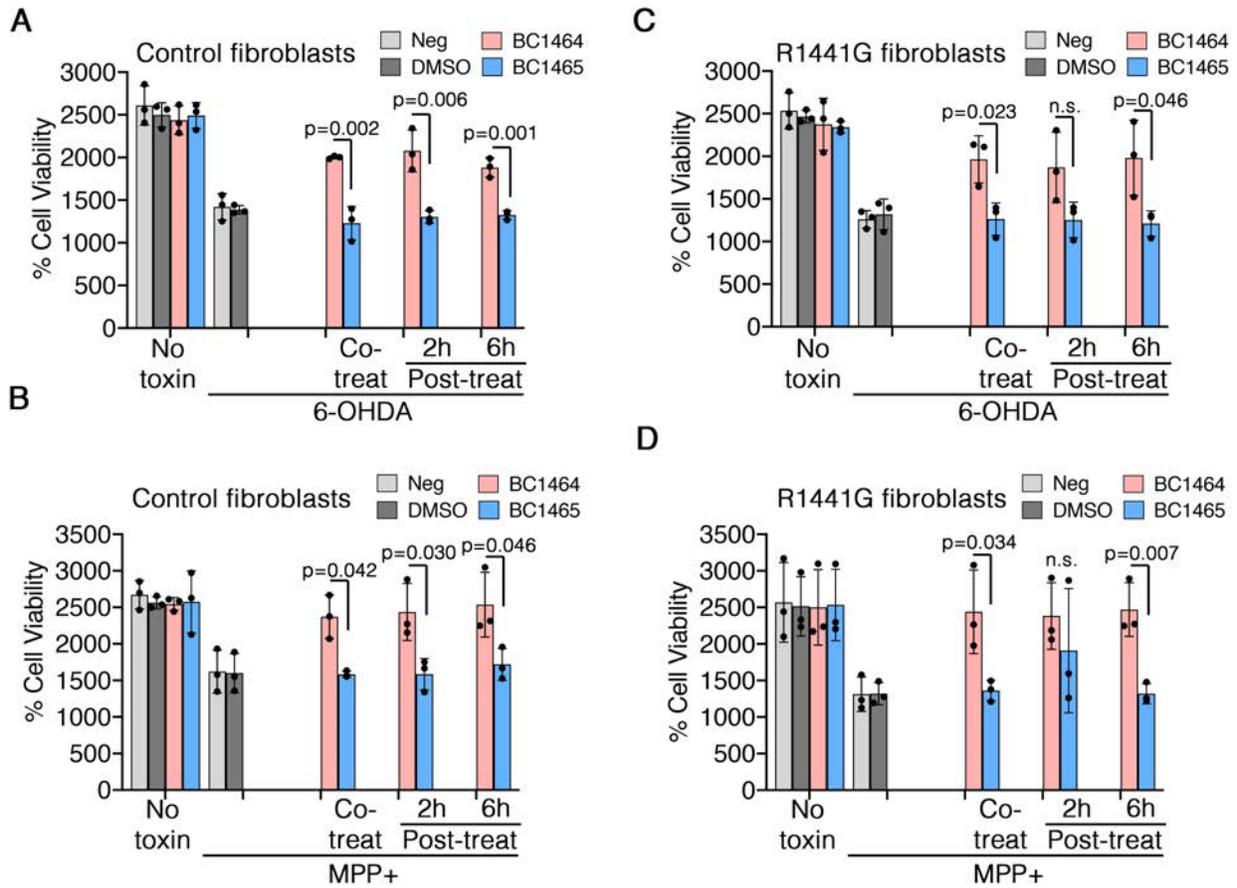


Fig. S4. Delayed administration of BC1464 confers protection in patient fibroblasts. Fibroblasts from control (A, B) and PD patient with the R1441G mutation (C, D) were treated with 6-OHDA (A,C) or MPP+ (B,D) as in Fig. 10. BC1464 or BC1465 (5 μ g/ml) were either coadministered or administered up to 6 h after toxin. Cell viability was assessed after 24 h of toxin exposure. (mean \pm SD, N=3 independent experiments, ANOVA-protected two-tailed t-test).