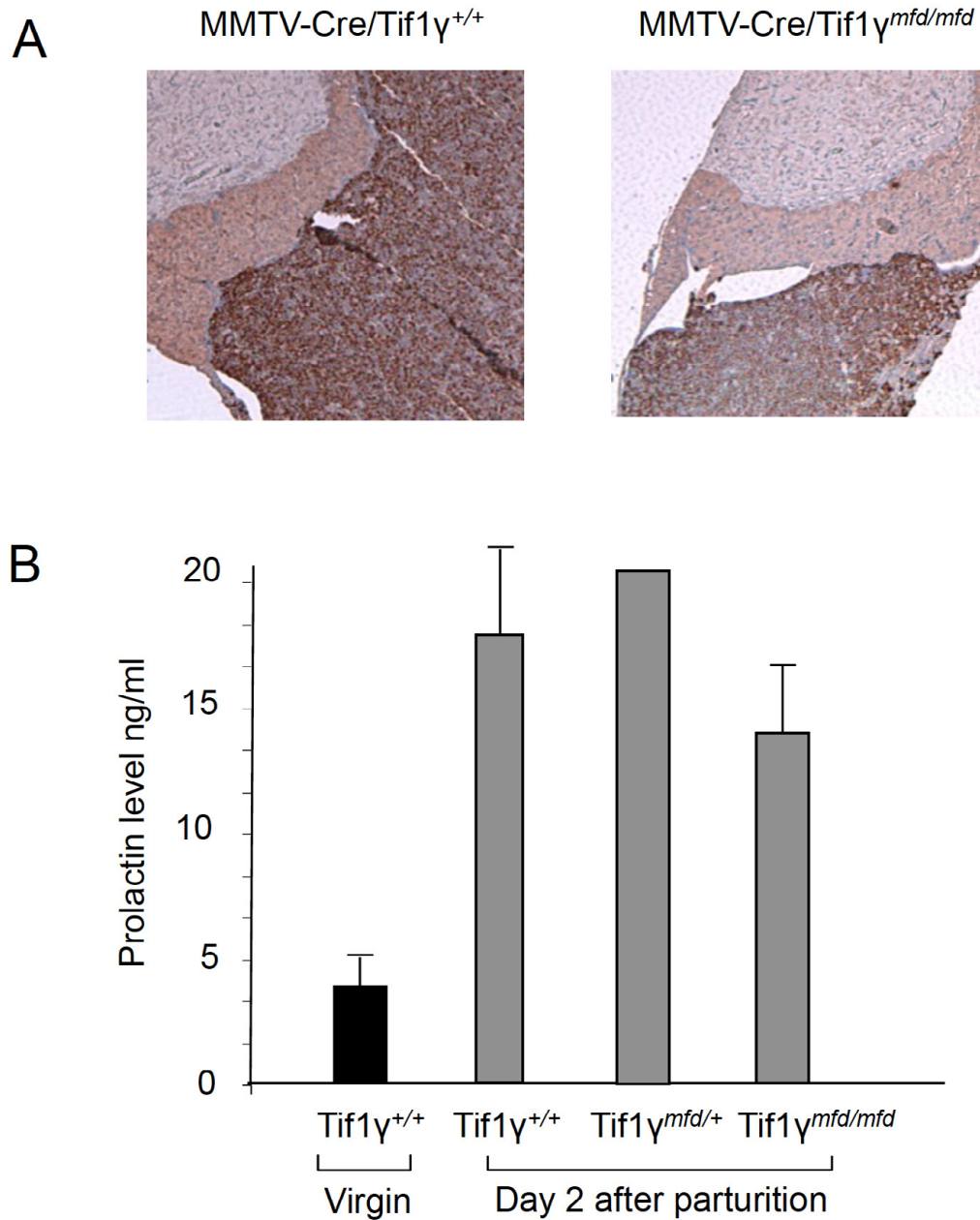
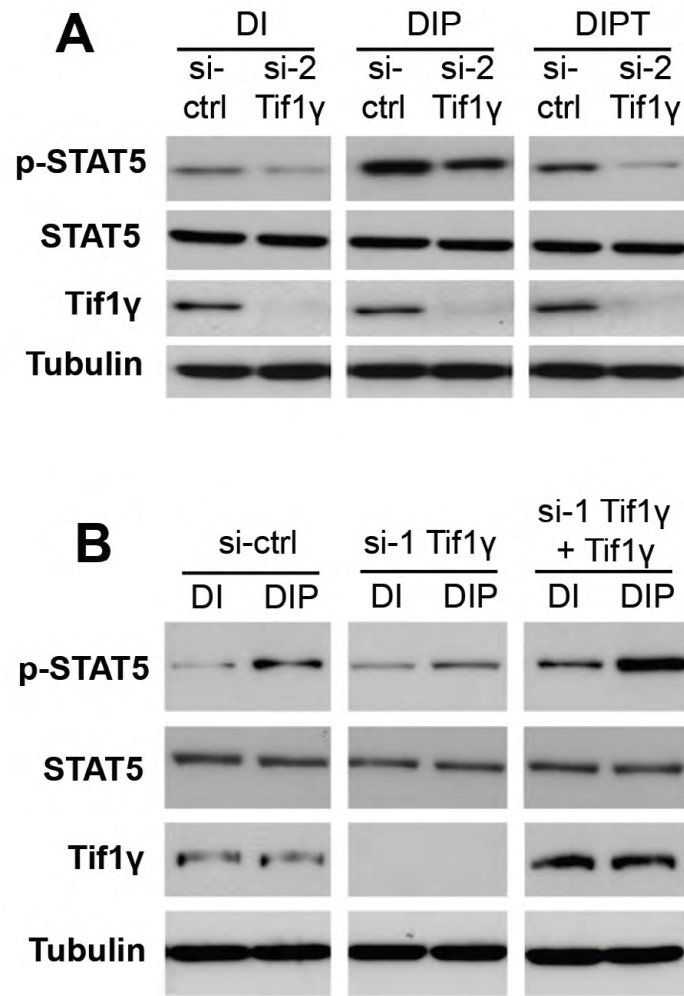


**Fig. S1. Knockout of *Tif1g* in the mammary epithelium of MMTV- and WAP-Cre/*Tif1g*<sup>mfd/mfd</sup> mice.** (A) The genotype of *Tif1g* floxed mice was determined by multiplex PCR performed using extracted tail DNA (see Materials and methods). Photographs are representative of the three possible genotypes generated by mating heterozygous mice together. (B) Tif1 $\gamma$  protein expression in MGs collected 2 days after parturition. immunohistochemistry shows that Tif1 $\gamma$  staining is lost in MMTV- and WAP-Cre/*Tif1g*<sup>mfd/mfd</sup> mice. Mice from each line were 20-week-old sisters from the same litter. Images are representative of 10 mice for each genotype of the MMTV-Cre/*Tif1g* line and five for each genotype of the WAP-Cre/*Tif1g* line.



**Fig. S2. PRL expression in the pituitary gland and PRL serum levels.** (A) Expression of PRL in the pituitary gland. PRL immunohistochemistry in pituitary glands using anti-prolactin C17 (Santa Cruz). Staining intensity in the anterior pituitary of homozygous mutants was comparable with that in control mice. (B) Quantification of PRL in sera. PRL was quantified by ELISA in sera collected from virgin mice and 2 days after parturition from MMTV-Cre/*Tif1*<sup>+/+</sup>, MMTV-Cre/*Tif1*<sup>mfd/+</sup> and MMTV-Cre/*Tif1*<sup>mfd/mfd</sup> mice. Serum PRL levels were comparable in the three genotypes of lactating mice.



**Fig. S3. Loss of *Tif1g* decreases STAT5 phosphorylation.** (A) HC11 cells, silenced for *Tif1g* using siRNA#2 (si-2 Tif $\gamma$ , see Materials and methods), were treated with dexamethasone (D), insulin (I) and prolactin (P) as indicated for 30 minutes. DIPT indicates TGF $\beta$ 1 pre-treatment for 24 hours followed by D, I and P treatment for 30 minutes. STAT5 phosphorylation and expression were assayed by immunoblotting. Mouse tubulin was used as a loading control and efficiency of the *Tif1g* knockdown was verified as shown. (B) HC11 cells, silenced for *Tif1g* using siRNA#1 (si-1 *Tifg*, see Materials and methods), were infected with the pLVX-based lentiviral vector expressing human *TIF1G* and treated with D, I and P (as indicated) for 30 minutes.