Identification of DAXX As A Restriction Factor Of SARS-CoV-2 Through A CRISPR/Cas9 Screen

Alice Mac Kain*[1], Ghizlane Maarifi*[2], Sophie-Marie Aicher[3], Nathalie Arhel[2], Artem Baidaliuk[4], Sandie Munier[5,6], Flora Donati[5,6], Thomas Vallet[1], Quang Dinh Tran[1], Alexandra Hardy[1], Maxime Chazal[3], Françoise Porrot[7], Molly OhAinle[8], Jared Carlson-Stevermer[9], Jennifer Oki[9], Kevin Holden[9], Etienne Simon-Lorière[4], Timothée Bruel[7], Olivier Schwartz[7], Sylvie van der Werf[5,6], Nolwenn Jouvenet[#3], Sébastien Nisole[#2], Marco Vignuzzi[#1], Ferdinand Roesch[#1,10]

Author Affiliations:

Institut Pasteur, Université de Paris, CNRS UMR 3569, Viral populations and pathogenesis Unit, F-75015 Paris, France
Institut de Recherche en Infectiologie de Montpellier (IRIM), Université de Montpellier, CNRS, 34090 Montpellier, France
Institut Pasteur, Université de Paris, CNRS UMR 3569, Virus sensing and signaling Unit, F-75015 Paris, France
Institut Pasteur, G5 Evolutionary genomics of RNA viruses, F-75015 Paris, France
Institut Pasteur, Université de Paris, CNRS UMR 3569, Molecular Genetics of RNA Viruses Unit, F-75015 Paris, France
Institut Pasteur, CNR Virus des infections respiratoires, F-75015 Paris, France.
Institut Pasteur, Université de Paris, CNRS UMR 3569, Virus and Immunity, F-75015 Paris, France
Divisions of Human Biology, Fred Hutchinson Cancer Research Center, Seattle, United States
Synthego Corporation, 3565 Haven Avenue, Menlo Park, CA 94025
UMR 1282 ISP, INRAE Centre Val de Loire, Nouzilly, France

* these authors contributed equally to this work

 # Corresponding authors:

Ferdinand Roesch
ORCID: 0000-0003-0702-7778
Email: ferdinand.roesch@inrae.fr
Phone: +33 2 47 42 75 20

Marco Vignuzzi
ORCID: 0000-0002-4400-771X
Email: marco.vignuzzi@pasteur.fr
Phone: 33 1 4568 8242

Nolwenn Jouvenet
ORCID: 0000-0001-6103-6048
Email: nolwenn.jouvenet@pasteur.fr
Phone: 33 1 40 61 34 92

Sébastien Nisole
ORCID: 0000-0001-9793-419X
Email: sebastien.nisole@inserm.fr
Phone: 33 4 3435 9454

Abstract:

Interferon restricts SARS-CoV-2 replication in cell culture, but only a handful of Interferon Stimulated Genes with antiviral activity against SARS-CoV-2 have been identified. Here, we describe a functional CRISPR/Cas9 screen aiming at identifying SARS-CoV-2 restriction factors. We identified DAXX, a scaffold protein residing in PML nuclear bodies known to limit the replication of DNA viruses and retroviruses, as a potent inhibitor of SARS-CoV-2 and SARS-CoV replication in human cells. Basal expression of DAXX was sufficient to limit the replication of SARS-CoV-2, and DAXX over-expression further restricted infection. In contrast with most of its previously described antiviral activities, DAXX-mediated restriction of SARS-CoV-2 was independent of the SUMOylation pathway. SARS-CoV-2 infection triggered the re-localization of DAXX to cytoplasmic sites and promoted its degradation. Mechanistically, this process was mediated by the viral papain-like protease (PLpro) and the proteasome. Together, these results demonstrate that DAXX restricts SARS-CoV-2, which in turn has evolved a mechanism to counteract its action.

Introduction. Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) is the causative agent of COVID-19 and the third coronavirus to cause severe disease in humans after the emergence of SARS-CoV in 2002 and Middle East Respiratory Syndrome-related Coronavirus (MERS-CoV) in 2012. Since the beginning of the pandemic, SARS-CoV-2 has infected more than 200 million people and claimed more than 4 million lives. While the majority of infected individuals experience mild (or no) symptoms, severe forms of COVID-19 are associated with respiratory failure, shock and pneumonia. Innate immune responses play a key role in COVID-19 pathogenesis: immune exhaustion (1) and reduced levels of type-I and type-III interferons (IFN) have been observed in the plasma of severe COVID-19 patients (2,3). Imbalanced immune responses to SARS-CoV-2, with a low and delayed IFN response coupled to early and elevated levels of inflammation, have been proposed to be a major driver of COVID-19 (4,5). Neutralizing auto-antibodies against type-I IFN (6) and genetic alterations in several IFN pathway genes (7) have also been detected in critically ill COVID-19 patients. These studies highlight the crucial need to characterize the molecular mechanisms by which IFN effectors may succeed, or fail, to control SARS-CoV-2 infection.

Although SARS-CoV-2 has been described to antagonize the IFN pathway by different mechanisms involving the viral proteins ORF3b, ORF9b ORF6, and Nsp15 (8), detection of SARS-CoV-2 by the innate immune sensor MDA5 (9,10) leads to the synthesis of IFN and expression of IFN Stimulated Genes (ISGs) in human airway epithelial cells (4). IFN strongly inhibits SARS-CoV-2 replication when added in cell culture prior to infection (11,12) or when administered intranasally in hamsters (13), suggesting that some ISGs might have antiviral activity (14). Relatively few ISGs with antiviral activity against SARS-CoV-2, however, have been identified so far. For instance, spike-mediated viral entry and fusion is restricted by LY6E (15,16) and IFITMs (17,18). Mucins have also been suggested to restrict viral entry (19). ZAP, which targets CpG dinucleotides in RNA viruses, also restricts SARS-CoV-2, albeit moderately (20). OAS1 has been recently identified in an ISG overexpression screen to restrict SARS-CoV-2 replication, through the action of RNAseL, both in cell lines and in patients (21). Another overexpression screen identified 65 ISGs as potential inhibitors of SARS-CoV-2 (22), and found that BST-2/Tetherin is able to restrict viral budding, although this activity is counteracted by the viral protein ORF7a. We hypothesize that additional ISGs with antiviral activity against SARS-CoV-2 remain to be discovered. Other antiviral factors that are not induced by IFN may also inhibit SARS-CoV-2: for instance, the RNA helicase DDX42 restricts several RNA viruses, including SARS-CoV-2 (23). While several whole-genome CRISPR/Cas9 screens identified host factors required for SARS-CoV-2 replication (24–29), none focused on antiviral genes.

Here, we performed a CRISPR/Cas9 screen designed to identify restriction factors for SARS-CoV-2, assessing the ability of 1905 ISGs to modulate SARS-CoV-2 replication in human epithelial lung cells. We report that the Death domain-associated protein 6 (DAXX), a scaffold protein residing in PML nuclear bodies (30) and restricting DNA viruses (31) as well as retroviruses (32,33), is a potent inhibitor of SARS-CoV-2 replication. SARS-CoV-2 restriction by DAXX is largely independent of the action of IFN, and unlike most of its other known activities, of the SUMOylation pathway. Within hours

54 of infection, DAXX re-localizes to sites of viral replication in the cytoplasm, likely targeting viral
55 transcription. We show that the SARS-CoV-2 papain-like protease (PLpro) induces the proteasomal
56 degradation of DAXX, demonstrating that SARS-CoV-2 developed a mechanism to evade, at least
57 partially, the restriction imposed by DAXX.
58
59 **Results.**
60
A restriction factor-focused CRISPR/Cas9 screen identifies genes potentially involved in
SARS-CoV-2 inhibition. To identify restriction factors limiting SARS-CoV-2 replication, we generated
a pool of A549-ACE2 cells knocked-out (KO) for 1905 potential ISGs, using the sgRNA library we
previously developed to screen HIV-1 restriction factors (34). This library includes more ISGs than
most published libraries, as the inclusion criteria was less stringent (fold-change in gene expression in
THP1 cells, primary CD4+ T cells or PBMCs $\geq$ 2). Therefore, some genes present in the library may
not be ISGs *per se* in A549 cells. Transduced cells were selected by puromycin treatment, treated with
IFNα and infected with SARS-CoV-2. Infected cells were immuno-labelled with a spike (S)-specific
antibody and analyzed by flow cytometry. As expected (11,12), IFNα inhibited infection by 7-fold (**Fig.**
S1). Infected cells were sorted based on S expression (**Fig. 1a**), and DNA was extracted from infected
and non-infected control cells. Integrated sgRNA sequences in each cell fraction were amplified by
PCR and sequenced by Next Generation Sequencing (NGS). Statistical analyses using the MAGeCK
package (35) led to the identification of sgRNAs significantly enriched or depleted in infected cells
representing antiviral and proviral factors, respectively (**Fig. 1b**). Although our screen was not
designed to explicitly study proviral factors, we did successfully identify the well-described SARS-CoV-
2 co-factor cathepsin L (CTSL) (36), validating our approach. USP18, a negative regulator of the IFN
signaling pathway (37), and ISG15, which favors Hepatitis C Virus replication (38), were also identified
as proviral ISGs. Core IFN pathway genes such as the IFN receptor (IFNAR1), STAT1, and STAT2,
were detected as antiviral factors, further validating our screening strategy. LY6E, a previously
described inhibitor of SARS-CoV-2 entry (15,16), was also a significant hit. Moreover, our screen
identified APOL6, IFI6, DAXX and HERC5, genes that are known to encode proteins with antiviral
activity against other viruses (39–42), but had not previously been studied in the context of SARS-
CoV-2 infection. For all these genes except APOL6, individual sgRNAs were consistently enriched (for
antiviral factors) or depleted (for proviral factors) in the sorted population of infected cells, while non-
targeting sgRNAs were not (**Fig. 1c**).
86
LY6E and DAXX display antiviral activity against SARS-CoV-2. To validate the ability of the
identified hits to modulate SARS-CoV-2 replication in human cells, we generated pools of A549-ACE2
knocked-out (KO) cells for different genes of interest by electroporating a mix of 3 sgRNA/Cas9
ribonucleoprotein (RNP) complexes per gene target. Levels of gene editing were above 80% in all of
the A549-ACE2 KO cell lines, as assessed by sequencing of the edited *loci* (**Table 1**). As controls, we
used cells KO for IFNAR1, for the proviral factor CTSL or for the antiviral factor LY6E, as well as cells
electroporated with non-targeting (NTC) sgRNAs/Cas9 RNPs. These different cell lines were then
treated with IFNα and infected with SARS-CoV-2. Viral replication was assessed by measuring the
levels of viral RNA in the supernatant of infected cells using RT-qPCR (**Fig. 2a**). In parallel, we titrated
the levels of infectious viral particles released into the supernatant of infected cells (**Fig. 2b**). As
expected, infection was significantly reduced in CTSL KO cells, confirming the proviral effect of this
gene (36). Among the selected antiviral candidate genes, only 2 had a significant impact on SARS-
CoV-2 replication: LY6E (as expected), and to an even greater degree, DAXX. Both genes restricted
replication in absence of IFNα, an effect which was detectable at the level of viral RNA (8-fold and 42-
fold reduction of infection, respectively, **Fig. 2a**) and of infectious virus (15-fold and 62-fold reduction,
Fig. 2b). Based on available single-cell RNAseq datasets (43), DAXX is expected to be expressed in
cell types physiologically relevant for SARS-CoV-2 infection such as lung epithelial cells and
macrophages (**Fig. S2**).
In IFNα-treated cells, DAXX and LY6E KO led to a modest, but significant rescue of viral
replication, which was particularly visible when measuring the levels of infectious virus by plaque

assay titration (**Fig. 2b**), while the antiviral effect of IFNα treatment was completely abrogated in
IFNAR1 KO cells, as expected (**Fig. 2c**). However, IFNα still had robust antiviral effect on SARS-CoV-
2 replication in both DAXX KO and LY6E KO cells (**Fig. 2c**). While DAXX and LY6E contribute to the
IFN-mediated restriction, this suggests that there are likely other ISGs contributing to this effect. DAXX
is sometimes referred to as an ISG, and was originally included in our ISG library, although its
expression is only weakly induced by IFN in some human cell types (32,44). Consistent with this, we
found little to no increase in DAXX expression in IFNα-treated A549-ACE2 cells (**Fig. S3**). In addition,
we tested the antiviral effect of DAXX on several SARS-CoV-2 variants that have been suggested to
be partially resistant to the antiviral effect of IFN in A549-ACE2 cells (45). Our results confirmed that
Lineage B.1.1.7. (Alpha) and Lineage P1 (Gamma) SARS-CoV-2 variants were indeed less sensitive
to IFN (**Fig. 2d**). DAXX, however, restricted all variants to a similar level than the original Lineage B
strain of SARS-CoV-2 (**Fig. 2d**), suggesting that while some variants may have evolved towards IFN-
resistance, they are still efficiently restricted by DAXX. To determine whether DAXX is specific to
SARS-CoV-2 or also inhibits other RNA viruses, including coronaviruses, we infected A549-ACE2 WT
and DAXX KO cells with SARS-CoV, MERS-CoV, and 2 RNA viruses belonging to unrelated viral
families: Yellow Fever Virus (YFV) and Measles Virus (MeV), which are positive and negative strand
RNA viruses, respectively. Our results show that DAXX restricts SARS-CoV, but has no effect on the
replication of YFV, MeV or MERS-CoV (**Fig. 2e**-**f**). Thus, our data suggests that DAXX restriction may
exhibit some level of specificity.
126
DAXX targets SARS-CoV-2 transcription. Next, we investigated whether DAXX targets early steps
of the SARS-CoV-2 viral life cycle such as viral entry or transcription. The intracellular levels of two
viral transcripts were assessed at different time post-infection in A549-ACE2 WT or DAXX KO cells
(**Fig. 3**). At early time points (from 2h to 6h p.i.), the levels of viral RNA were similar in WT and DAXX
KO cells, suggesting that comparable amounts of SARS-CoV-2 virions were entering cells. The levels
of viral transcripts significantly increased starting at 8h p.i., representing the initiation of viral
transcription. The levels of the 5' UTR viral transcript (**Fig. 3a)** were 6.4-fold higher at 8h; 4.1-fold
higher at 10h; and 8-fold higher at 24h post-infection in DAXX KO cells compared to WT cells. The
levels of RdRp transcripts were less affected by the absence of DAXX than 5'UTR transcripts (**Fig. 3b**)
with levels of viral transcripts 1.7-fold and 3.5-fold higher in DAXX KO cells compared to WT cells at
10h and 24h pos-infection, respectively. These results suggest that DAXX acts early during the SARS-
CoV-2 replication cycle, likely targeting the step of viral transcription.
139
DAXX restriction is SUMO-independent. DAXX is a small scaffold protein that acts by recruiting
other SUMOylated proteins in nuclear bodies through its C-terminal SUMO-Interacting Motif (SIM)
domain (46). The recruitment of these factors is required for the effect of DAXX on various cellular
processes such as transcription and apoptosis, and on its antiviral activities (32,47–49). DAXX can
also be SUMOylated itself (50), which may be important for some of its functions. To investigate the
role of SUMOylation in DAXX-mediated SARS-CoV-2 restriction, we used overexpression assays to
compare the antiviral activity of DAXX WT with two previously described DAXX mutants (51). First, we
used a version of DAXX in which 15 lysine residues have been mutated to arginine (DAXX 15KR),
which is unable to be SUMOylated; and second, a truncated version of DAXX that is missing its C-
terminal SIM domain (DAXXΔSIM) (48) and is unable to interact with its SUMOylated partners. A549-
ACE2 were refractory to SARS-CoV-2 infection upon transfection with any plasmid, precluding us from
using this cell line. Instead, we transfected 293T-ACE2 cells, another SARS-CoV-2 permissive cell line
(18).
We examined the effect of DAXX WT overexpression on the replication of SARS-CoV-2-
mNeonGreen (52) by microscopy. DAXX overexpression starkly reduced the number of infected cells
(**Fig. 4a-b**), revealing that DAXX-mediated restriction is not specific to A549-ACE2 cells. Using double
staining for HA-tagged DAXX and SARS-CoV-2, we found that most of the DAXX-transfected cells
were negative for infection, and conversely, that most of the infected cells did not express transfected
DAXX (**Fig. 4c**), indicating that DAXX imposes a major block to SARS-CoV-2 infection.

In order to quantify the antiviral effect of overexpressed DAXX WT and mutants, we assessed the
number of cells positive for the S protein (among transfected cells) by flow cytometry and the
abundance of viral transcripts by qRT-PCR. Western blot (**Fig. S4a**) and flow cytometry (**Fig. S4b**)
analyses showed that DAXX WT and mutants were expressed at similar levels, with a transfection
efficiency of around 40 to 50% for all three constructs. DAXX WT, 15KR and ΔSIM all efficiently
restricted SARS-CoV-2 replication. Indeed, at 24 hours p.i., the proportion of infected cells (among
HA-positive cells) was reduced by 2 to 3-fold as compared to control transfected cells for all 3
constructs (**Fig. 4d**). This effect was less pronounced but still significant at 48 hours p.i. (**Fig. 4e**).
Moreover, DAXX overexpression led to a significant reduction of the levels of two different viral
transcripts (**Fig. S5**), in line with our earlier results showing that DAXX targets viral transcription (**Fig.**
3a-b). Together, these results show that DAXX overexpression restricts SARS-CoV-2 replication in a
SUMOylation-independent mechanism.
171
SARS-CoV-2 infection triggers DAXX re-localization. DAXX mostly localizes in nuclear bodies (30),
whereas SARS-CoV-2 replication occurs in the cytoplasm. We reasoned that DAXX localization may
be altered during the course of infection in order for the restriction factor to exert its antiviral effect. To
test this hypothesis, we infected 293T-ACE2 cells with SARS-CoV-2 and used high-resolution
confocal microscopy to study the localization of endogenous DAXX (**Fig. 5**). As expected (30), DAXX
mostly localizes in the nuclei of non-infected cells, forming discrete *foci*. At 6h post-infection, DAXX re-
localizes to the cytoplasm, although nuclear *foci* can still be detected. At 24h post-infection, DAXX is
completely depleted from nuclear bodies, and is found almost exclusively in the cytoplasm of infected
cells, in close association with in close association with dsRNAs, likely representing SARS-CoV-2 viral
dsRNAs. These results suggest that early events following SARS-CoV-2 infection trigger the re-
localization of DAXX from the nucleus to the cytoplasm.
183
SARS-CoV-2 PLpro induces proteasomal degradation of DAXX. Next, we asked whether this
relocalization of DAXX following infection destabilizes the protein. Western blot analysis revealed that
SARS-CoV-2 infection induces a marked decrease of total DAXX expression in infected cells (**Fig.**
6a). In contrast, SARS-CoV-2 infection had no effect on DAXX mRNA levels (**Fig. S6**). Importantly, the
decrease in DAXX protein levels is likely not attributed to a global host cell shut down, as the levels of
Lamin B, HSP90, Actin, GAPDH, Tubulin, TRIM22 and RIG-I were unchanged following infection (**Fig.**
6a). These results suggest that DAXX may be actively and specifically targeted by SARS-CoV-2 for
degradation during the course of infection. SARS-CoV-2 papain-like protease (PLpro) is a possible
candidate for this activity, as it cleaves other cellular proteins such as ISG15 (53,54), and ULK1 (55). It
was also shown that foot-and-mouth disease virus (FDMV) PLpro degrades DAXX (56). Thus, we
treated cells with different inhibitors: GRL0617, an inhibitor of SARS-CoV-2 PLpro (54); MG132, a
well-described proteasome inhibitor; or Masitinib, an inhibitor of SARS-CoV-2 3CL protease (57).
These inhibitors had minimal effects on cell viability at the selected concentrations (**Fig. S7**).
Strikingly, GRL0617 treatment partially restored DAXX expression (**Fig. 6b**), especially at the highest
concentration. Similarly, MG132 also prevented DAXX degradation in SARS-CoV-2 infected cells. In
contrast, Masitinib treatment had no effect on DAXX levels. These results suggest that PLpro, but not
3CL, targets DAXX for proteasomal degradation. Consistently, GRL0617 treatment also restored
DAXX subcellular localization to nuclear bodies (**Fig. 6c**). As expected, GRL0617 treatment also
inhibited the production of SARS-CoV-2 proteins such as spike (**Fig. 6b**), and may thus have an
indirect effect on DAXX by inhibiting SARS-CoV-2 replication itself. However, the fact that Masitinib
also inhibits spike production but does not restore DAXX expression suggested that DAXX
degradation is not an unspecific consequence of viral replication but rather a specific activity of PLpro.
To investigate the potential direct contribution of PLpro to DAXX degradation, we assessed the impact
of overexpressing individual SARS-CoV-2 proteins in 293T-ACE2 cells on DAXX levels. We included
in the analysis mCherry-tagged SARS-CoV-2 Non-structural proteins (Nsp) (58), which are not
expressed from a lentiviral vector that may be targeted by DAXX antiviral activity (33). This included
Nsp3 (which encodes PLro), Nsp4, Nsp6, Nsp7, Nsp10, Nsp13 and Nsp14. All proteins were
expressed at similar levels (**Fig. S8a**). Only the overexpression of Nsp3 led to DAXX degradation (**Fig.**

6d). This effect was dose-dependent (**Fig. 6e and Fig. S8b**), and was abrogated when cells were
treated with GRL0617 (**Fig. 6f**). Taken together, these results strongly indicate that PLpro directly
induces the proteasomal degradation of DAXX.
215
216 **Discussion.**
217
Comparison with other screens. The whole-genome CRISPR/Cas9 screens conducted to date on
SARS-CoV-2 infected cells mostly identified host factors necessary for viral replication (24–29) and
did not focus on antiviral genes, as did our screen. Three overexpression screens, however, identified
ISGs with antiviral activity against SARS-CoV-2 (16,22,21). In the first one, Pfaender *et al.* screened
386 ISGs for their antiviral activity against the endemic human coronavirus 229E, and identified LY6E
as a restriction factor inhibiting both 229E and SARS-CoV-2. Our screen also identified LY6E as a top
hit (**Fig.1**), further validating the findings of both studies. Four additional genes had significant p-
values in both Pfaender *et al.* and our work: IFI6, HERC5, OAS2 and SPSB1 (**Table S5-S6**). We
showed that knocking-out LY6E and DAXX only partially rescued SARS-CoV-2 replication in IFN-
treated cells (**Fig. 2**), suggesting that other IFN effectors active against SARS-CoV-2 remain to be
identified. For instance, other ISGs, such as IFITMs, inhibit SARS-CoV-2 viral entry (17–19). In the
second screen, Martin Sancho *et al.* tested 399 ISGs against SARS-CoV-2. Among the 65 antiviral
ISGs identified, they focused on BST-2/Tetherin, which targets viral budding. BST-2/Tetherin was not
a significant hit in our screen (**Table S5-6**). This discrepancy is likely due to the fact that our screen
relies on the sorting of S-positive cells, and is therefore unable to detect factors restricting the late
stages of the viral replication cycle. The most recent overexpression screen assessed the contribution
of 539 human and 444 macaque ISGs in SARS-CoV-2 restriction, and further characterized the role of
OAS1 in sensing SARS-CoV-2 and restricting its replication through RNAseL. While we did not identify
OAS1 or RNAseL in our screen (**Table S5-6**), we did identify hits in common with this screen,
including IFI6 and OAS2 (that were also identified by Pfaender *et al.*). Of note, DAXX was absent from
the ISG libraries used by these overexpression screens, which explains why it was not previously
identified as an antiviral gene for SARS-CoV-2. Our sgRNA library, by including 1905 genes, targeted
a wider set of ISGs and "ISG-like" genes, including genes like DAXX that are not (or only weakly)
induced by IFN in some cell types (32,44). Interestingly, IFN has a stronger effect on DAXX
expression levels in cells from other mammals such as bats (59). Future studies may investigate
whether DAXX orthologs of different species are also able to restrict SARS-CoV-2 and whether DAXX
participates in IFN-mediated viral restriction in these species.
245
DAXX is a restriction factor for SARS-CoV-2. We identify DAXX as a potent antiviral factor
restricting the replication of SARS-CoV-2, acting independently of IFN and likely targeting an early
step of the viral life cycle such as transcription (**Fig. 3**). DAXX fulfills all of the criteria defining a *bona*
fide SARS-CoV-2 restriction factor: knocking-out endogenous DAXX leads to enhanced viral
replication (**Fig. 2**), while over-expression of DAXX restricts infection (**Fig. 4**). DAXX co-localizes with
viral dsRNAs (**Fig. 5**) and SARS-CoV-2 antagonizes DAXX to some extent, as evidenced by the
proteasomal degradation of DAXX induced by PLpro (**Fig. 6**). Although DAXX expression is not
upregulated by IFNα in A549 cells (**Fig. S3**), basal levels of expression are sufficient for its antiviral
activity, as has been shown for other potent restriction factors. Publicly available single-cell RNAseq
analyses (**Fig. S2**) indicated that DAXX is expressed in cell types targeted by the virus *in vivo*, such as
lung epithelial cells and macrophages. Interestingly, DAXX exhibited some degree of specificity in its
antiviral activity, as unrelated viruses such as YFV and MeV, as well as the closely related MERS-CoV
were not sensitive to its action, in contrast to SARS-CoV and SARS-CoV-2 (**Fig. 2**). Future work will
determine which viral determinants are responsible for this specific antiviral activity of DAXX.
260
261 **Mechanism of DAXX-mediated restriction.** DAXX is mostly known for its antiviral activity against
262 DNA viruses replicating in the nucleus, such as adenovirus 5 (AdV5) (60) and human papillomavirus
263 (HPV) (61). Most of these viruses antagonize PML and/or DAXX, which interacts with PML in nuclear
264 bodies (30). We show here that DAXX is also able to restrict SARS-CoV-2, a positive sense RNA virus

that replicates in the cytoplasm. Recent studies have shown that DAXX inhibits the reverse transcription of HIV-1 in the cytoplasm (32,33). Within hours of infection, DAXX subcellular localization was altered, with DAXX accumulating in the cytoplasm and colocalizing with incoming HIV-1 capsids (33). Here, we observed a similar phenomenon, with a rapid re-localization of DAXX from the nucleus to cytoplasmic viral replication sites (**Fig. 5**), where it likely exerts its antiviral effect. Early events in the replication cycle of both HIV-1 and SARS-CoV-2, such as viral fusion or virus-induced stress, may thus trigger DAXX re-localization to the cytoplasm. DAXX seems to inhibit SARS-CoV-2 by a distinct mechanism: whereas the recruitment of interaction partners through the SIM-domain is required for the effect of DAXX on HIV-1 reverse transcription (32), it was not the case in the context of SARS-CoV-2 restriction. This result was unexpected, since DAXX has no enzymatic activity and rather acts as a scaffold protein recruiting SUMOylated partners through its SIM domain (51). Some DAXX functions, such as interaction with the chromatin remodeler ATRX (30) or its recently described role as a chaperone protein (62) are, however, SIM-independent. Future work should determine which DAXX domains and residues are required for its antiviral activity.

Antagonism of DAXX by SARS-CoV-2. Our results suggest that SARS-CoV-2 developed a mechanism to antagonize DAXX restriction, with PLpro inducing its degradation to the proteasome (**Fig. 6**). his antagonism, however, is only partial, since knocking-out DAXX still enhances SARS-CoV-2 replication (**Fig. 2**). Another possibility is that DAXX, by acting early in the viral life cycle (i.e. as soon as 8 hours p.i., **Fig. 3**) may exert its antiviral effect before PLpro is able to complete its degradation. Proteins expressed by other viruses are also able to degrade DAXX: for instance, the AdV5 viral factor E1B-55K targets DAXX for proteasomal degradation (60), and FDMV PLpro cleaves DAXX (56). We showed in **Fig. 2** that SARS-CoV, but not MERS-CoV, is sensitive to DAXX. Thus, it will be interesting to test whether PLpro from these different coronaviruses differ in their ability to degrade DAXX, and whether this has an impact on their sensitivity to DAXX restriction. Future research may also establish whether PLpro induces the degradation of DAXX through direct cleavage, or whether it acts in a more indirect way, such as cleaving or recruiting cellular co-factors. Such investigations may be relevant for the development of PLpro inhibitors (63): indeed, in addition to directly blocking SARS-CoV-2 replication, PLpro inhibitors may also sensitize the virus to existing antiviral mechanisms such as DAXX restriction.

Material & Methods.

Cells, viruses & plasmids. HEK 293T (ATCC #CRL-11268) were cultured in MEM (Gibco #11095080) complemented with 10% FBS (Gibco #A3160801) and 2 mM L-Glutamine (Gibco # 25030081). VeroE6 (ATCC #CRL-1586), A549 (ATCC #CCL-185) and HEK 293T, both overexpressing the ACE2 receptor (A549-ACE2 and HEK 293T-ACE2, respectively), were grown in DMEM (Gibco #31966021) supplemented with 10% FBS (Gibco #A3160801), and penicillin/streptomycin (100 U/mL and 100 µg/mL, Gibco # 15140122). Blasticidin (10 µg/mL, Sigma-Aldrich #SBR00022-10ML) was added for selection of A549-ACE2 and HEK 293T-ACE2. All cells were maintained at 37°C in a 5% CO_2 atmosphere. Universal Type I Interferon Alpha (PBL Assay Science #11200-2) was diluted in sterile-filtered PBS 1% BSA according to the activity reported by the manufacturer. The strains BetaCoV/France/IDF0372/2020 (Lineage B); hCoV-19/France/IDF-IPP11324/2020 (Lineage B.1.1.7); and hCoV-19/France/PDL-IPP01065/2021 (Lineage B.1.351) were supplied by the National Reference Centre for Respiratory Viruses hosted by Institut Pasteur and headed by Pr. Sylvie van der Werf. The human samples from which the lineage B, B.1.1.7 and B.1.351 strains were isolated were provided by Dr. X. Lescure and Pr. Y. Yazdanpanah from the Bichat Hospital, Paris, France; Dr. Besson J., Bioliance Laboratory, saint-Herblain France; Dr. Vincent Foissaud, HIA Percy, Clamart, France, respectively. These strains were supplied through the European Virus Archive goes Global (Evag) platform, a project that has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement #653316. The hCoV-19/Japan/TY7-501/2021 strain (Lineage P1) was kindly provided by Jessica Vanhomwegen (Cellule d'Intervention Biologique d'Urgence; Institut Pasteur). The mNeonGreen reporter SARS-CoV-2 was provided by Pei-Yong Shi (52). SARS-CoV FFM-1 strain (64) was kindly provided by H.W. Doerr (Institute of Medical Virology, Frankfurt University Medical School, Germany). The Middle East respiratory syndrome (MERS) Coronavirus, strain IP/COV/MERS/Hu/France/FRA2 (Genbank reference KJ361503) isolated from one of the French cases (65) was kindly provided by Jean-Claude Manuguerra (Cellule d'Intervention Biologique

d'Urgence; Institut Pasteur). SARS-CoV-2 viral stocks were generated by infecting VeroE6 cells (MOI 0.01,
harvesting at 3 dpi) using DMEM supplemented with 2% FBS and 1 µg/mL TPCK-trypsin (Sigma-Aldrich #1426-
100MG). SARS-CoV and MERS-CoV viral stocks were generated by infecting VeroE6 cells (MOI 0.0001) using
DMEM supplemented with 5% FCS and harvesting at 3 dpi or 6 dpi, respectively. The Yellow Fever Virus (YFV)
Asibi strain was provided by the Biological Resource Center of the Institut Pasteur. The Measles Schwarz strain
expressing GFP (MeV-GFP) was described previously (70). Both viral stocks were produced on Vero NK cells.
The Human Interferon-Stimulated Gene CRISPR Knockout Library was a gift from Michael Emerman and is
available on Addgene (Pooled Library #125753). The plentiCRISPRv.2 backbone was ordered through Addgene
(Plasmid #52961). pMD2.G and psPAX2 were gifts from Didier Trono (Addgene #12259; #12260). pcDNA3.1
was purchased from Invitrogen. Plasmids constructs expressing WT and mutant HA-tagged DAXX constructs
were kindly provided by Hsiu-Ming Shih (51). The plasmids encoding mCherry-tagged viral proteins were a gift
from Bruno Antonny and ordered through Addgene: Nsp3 -mCherry (#165131); Nsp4-mCherry (#165132); Nsp6-
mCherry (#165133); Nsp7-mCherry (#165134); Nsp10-mCherry (#165135); Nsp13-mCherry (#165136); Nsp14-
mCherry (#165137).
334
Antibodies. For Western Blot, we used mouse anti-DAXX (diluted 1:1000, Abnova #7A11), rat anti-HA clone
3F10 (diluted 1:3000, Sigma #2158167001), mouse anti-GAPDH clone 6C5 (diluted 1:3000, Millipore
#FCMAB252F), Goat anti-Lamin B clone M-20 (diluted 1:500, Santa Cruz sc-6217), mouse monoclonal
HSP90α/β clone F-8 (diluted 1 :500, Santa Cruz sc-13119), mouse monoclonal β-actin clone AC-15 (1:3000
Sigma #A1978), mouse monoclonal α-Tubulin clone DMA1 (diluted 1:1000, Sigma #T9026), rabbit anti-TRIM22
(diluted 1 :1000, Proteintech #13744-1-AP) and mouse Monoclonal RIG-I clone Alme-1 (diluted 1: 1000,
adipoGen #AG-20B-0009). To detect SARS-CoV-2 Spike protein, we used mouse anti-spike clone 1A9 (diluted
1:1000, GeneTex GTX632604). Secondary antibodies were goat anti-mouse and anti-rabbit HRP-conjugates
(diluted 1:5000, ThermoFisher #31430 and #31460) and horse anti-goat HRP (diluted 1: 1000, Vector # PI-
9500). For immunofluorescence, we used rabbit anti-DAXX (diluted 1:50, Proteintech #20489-1-AP) and mouse
anti-dsRNA J2 (diluted 1:50, Scicons #10010200). Secondary antibodies were goat anti-rabbit AF555 and anti-
mouse AF488 (diluted 1:1000, ThermoFisher #A-21428 and #A-28175). For flow sorting of infected cells, we
used the anti-S2 H2 162 antibody (diluted 1:150), a kind gift from Dr. Hugo Mouquet, (Institut Pasteur, Paris,
France). Secondary antibody was donkey anti-mouse AF647 (diluted 1:1000, Invitrogen #A31571). For FACS
analysis, we used rat anti-HA clone 3F10 (diluted 1:100, Sigma #2158167001) and mouse anti-dsRNA J2
(diluted 1:500, Scicons #10010200). Secondary antibodies were goat anti-rat AF647 and anti-mouse AF488
(diluted 1:1000, ThermoFisher #A-21247 #A-28175). The pan-flavivirus anti-Env 4G2 antibody was a kind gift
from Phillipe Desprès.
353
Generation of CRISPR/Cas9 library cells. HEK 293T cells were transfected with the sgRNA library plasmid
together with plasmids coding for Gag/Pol (R8.2) and for the VSVg envelope (pVSVg) using a ratio of 5:5:1 and
calcium phosphate transfection. Supernatants were harvested at 36h and 48h, concentrated 80-fold by
ultracentrifugation (22,000 g, 4°C for 1h) and pooled. To generate the ISG KO library cells, $36x10^6$ A549-ACE2
cells were seeded in 6 well plates (10^6 cells per well) 24h before transduction. For each well, 100 µL of
concentrated lentivector was diluted in 500 µL of serum-free DMEM, supplemented with 10 µg/mL of DEAE
dextran (Sigma #D9885). After 48h, transduced cells were selected by puromycin treatment for 20 days (1
µg/mL; Sigma #P8833).
362
CRISPR/Cas9 screen. $4x10^7$ A549-ACE2 cells were treated with IFNα (200U/mL). 16h later, cells were infected
at a MOI of 1 in serum-free media complemented with TPCK-trypsin and IFNα (200 U/mL). After 90 min, the viral
inoculum was removed, and cells were maintained in DMEM containing 5% FBS and IFNα (200 U/mL). After
24h, cells were harvested and fixed for 15 min in Formalin 1%. Fixed cells were washed in cold FACS buffer
containing PBS, 2% Bovine Serum Albumin (Sigma-Aldrich #A2153-100G), 2 mM EDTA (Invitrogen #15575-
038) and 0.1% Saponin (Sigma-Aldrich #S7900-100G). Cells were incubated for 30 min at 4°C under rotation
with primary antibody diluted in FACS buffer. Incubation with the secondary antibody was performed during 30
min at 4°C under rotation. Stained cells were resuspended in cold sorting buffer containing PBS, 2% FBS, 25
mM Hepes (Sigma-Aldrich #H0887-100ML) and 5 mM EDTA. Infected cells were sorted on a BD FACS Aria
Fusion. Sorted and control (non-infected, not IFN-treated) cells were centrifugated (20 min, 2,000g) and
resuspended in lysis buffer (NaCl 300 mM, SDS 0.1%, EDTA 10 mM, EGTA 20 mM, Tris 10 mM) supplemented
with 1% Proteinase K (Qiagen #19133) and 1% RNAse A/T1 (ThermoFisher #EN0551) and incubated overnight
at 65°C. Two consecutive phenol-chloroform (Sigma #P3803-100ML) extractions were performed and DNA was
recovered by ethanol precipitation. Nested PCR was performed using the Herculase II Fusion DNA Polymerase
(Agilent, #600679) and the DNA oligos indicated in **Table S1**. PCR1 products were purified using QIAquick PCR

Purification kit (Qiagen #28104). PCR2 products were purified using Agencourt AMPure XP Beads (Beckman
Coulter Life Sciences #A63880). DNA concentration was determined using Qubit dsDNA HS Assay Kit (Thermo
Fisher #Q32854) and adjusted to 2 nM prior to sequencing. NGS was performed using the NextSeq 500/550
High Output Kit v2.5 75 cycles (Illumina #20024906).
382
Screen analysis. Reads were demultiplexed using bcl2fastq Conversion Software v2.20 (Illumina) and
fastx_toolkit v0.0.13. Sequencing adapters were removed using cutadapt v1.9.1 (66). The reference library was
built using bowtie2 v2.2.9 (67). Read mapping was performed with bowtie2 allowing 1 seed mismatch in --local
mode and samtools v1.9 (68). Mapping analysis and gene selection were performed using MAGeCK v0.5.6,
normalizing the data with default parameters. sgRNA and gene enrichment analyses are available in **Table S5**-
S6, respectively and full MAGeCK output at https://github.com/Simon-LoriereLab/crispr_isg_sarscov2.
389
Generation of multi-guide gene knockout cells. 3 sgRNAs per gene were designed (**Table S2**). 10 pmol of
NLS-Sp.Cas9-NLS (SpCas9) nuclease (Aldevron #9212) was combined with 30 pmol total synthetic sgRNA (10
pmol for each sgRNA) (Synthego) to form RNPs in 20 μL total volume with SE Buffer (Lonza #V5SC-1002). The
reaction was incubated at room temperature for 10 min. $2x10^5$ cells per condition were pelleted by centrifugation
at 100g for 3 min, resuspended in SE buffer and diluted to $2x10^4$ cells/μL. 5 μL of cell solution was added to the
pre-formed RNP solution and gently mixed. Nucleofections were performed on a Lonza HT 384-well nucleofector
system (Lonza #AAU-1001) using program CM-120. Immediately following nucleofection, each reaction was
transferred to a 96-well plate containing 200 μL of DMEM 10% FBS ($5x10^4$ cells per well). Two days post-
nucleofection, DNA was extracted using DNA QuickExtract (Lucigen #QE09050). Cells were lysed in 50 μL of
QuickExtract solution and incubated at 68°C for 15 min followed by 95°C for 10 min. Amplicons were generated
by PCR amplification using NEBNext polymerase (NEB #M0541) or AmpliTaq Gold 360 polymerase
(ThermoFisher #4398881) and the primers indicated in **Table S3**. PCR products were cleaned-up and analyzed
by Sanger sequencing. Sanger data files and sgRNA target sequences were input into Inference of CRISPR
Edits (ICE) analysis https://ice.synthego.com/#/ to determine editing efficiency and to quantify generated indels
(69). Percentage of alleles edited is shown in **Table 1** (n=3).
405
SARS-CoV-2, SARS-CoV and MERS-CoV infection assays. A549-ACE2 cells were infected by incubating the
virus for 1h with the cells maintained in DMEM supplemented with 1 μg/ml TPCK-trypsin (Sigma #4370285). The
viral input was then removed and cells were kept in DMEM supplemented with 2% FBS. For 293T-ACE2 cells,
infections were performed without TPCK-trypsin. MERS-CoV and SARS-CoV infections were performed in
DMEM supplemented with 2% FBS and cells were incubated 1h at 37°C 5% CO2. Viral inoculum was then
removed and replaced by fresh DMEM supplemented with 2% FBS. All experiments involving infectious material
were performed in Biosafety Level 3 facilities in compliance with Institut Pasteur's guidelines and procedures.
413
Yellow Fever Virus and Measles Virus infection assays. Cells were infected with YFV (at an MOI of 0.3) or
MeV-GFP (MOI of 0.2) in DMEM without FBS for 2h in small volume of medium to enhance contacts with the
inoculum and the cells. After 2h, the viral inoculum was replaced with fresh DMEM 10% FBS 1% P/S. FACS
analysis were performed at 24h p.i. Cells were fixed and permeabilized using BD Cytofix/Cytoperm (Fisher
Scientific, # 15747847) for 30 min on ice (all the following steps were performed on ice and centrifuged at 4°C)
and then washed tree times with wash buffer. Cells infected with YFV were incubated with the pan-flavivirus anti-
Env 4G2 antibody for 1h at 4°C and then with Alexa 488 anti-mouse IgG secondary antibodies (Thermo Fisher,
#A28175) for 45 min at 4°C in the dark. Non-infected, antibody-stained samples served as controls for signal
background. The number of cells infected with MeV-GFP were assessed with the GFP signal, using non-infected
cells as controls. Data were acquired with an Attune NxT Acoustic Focusing Cytometer (Life technologies) and
analyzed using FlowJo software.
425
Hit validation. $2.5x10^4$ A549-ACE2 KO cells were seeded in 96-well plates 18h before the experiment. Cells
were treated with IFNα and infected as described above. At 72h post-infection, supernatants and cellular
monolayers were harvested in order to perform qRT-PCR and plaque assay titration. Infectious supernatants
were heat-inactivated at 80°C for 10 min. For intracellular RNA, cells were lysed in a mixture of Trizol Reagent
(Invitrogen #15596018) and PBS at a ratio of 3:1. Total RNA was extracted using the Direct-zol 96 RNA kit
(Zymo Research #R2056) or the Direct-zol RNA Miniprep kit (Zymo Research #R2050). For SARS-CoV-2
detection, qRT-PCR was performed either directly on the inactivated supernatants or on extracted RNA using
the Luna Universal One-Step RT-qPCR Kit (NEB #E3005E) in a QuantStudio 6 thermocycler (Applied
Biosystems) or in a StepOne Plus thermocycler (Applied Biosystems). The primers used are described in **Table**
S4. Cycling conditions were the following: 10 min at 55°C, 1 min at 95°C and 40 cycles of 95°C for 10s and 60°C

for 1 min. Results are expressed as genome copies/mL as the standard curve was performed by diluting a
commercially available synthetic RNA with a known concentration (EURM-019, JRC). For SARS-CoV and
MERS-CoV, qRT-PCR were performed using FAM-labelled probes (Eurogentech) and the Superscript III
Platinum One-Step qRT-PCR System (Thermo Fisher Scientific, #11732020). The cycling conditions were the
following: 20 min at 55°C, 3 min at 95°C and 50 cycles of 95°C for 15 s and 58°C for 30 s. The primers used are
described in **Table S4**. Standard curves were performed using serial dilutions of RNA extracted from and SARS-
CoV and MERS-CoV viral culture supernatants of known infectious titer. For plaque assay titration, VeroE6 cells
were seeded in 24-well plates (10^5 cells per well) and infected with serial dilutions of infectious supernatant
diluted in DMEM during 1h at 37°C. After infection, 0.1% agarose semi-solid overlays were added. At 72h post-
infection, cells were fixed with Formalin 4% (Sigma #HT501128-4L) and plaques were visualized using crystal
violet coloration. Time-course experiments were performed the same way except that supernatants and cellular
monolayers were harvested at 0h, 2h, 4h, 6h, 8h, 10h and 24h post-infection.
448
Overexpression assay. $2x10^5$ 293T-ACE2 cells were seeded in a 24-well plate 18h before experiment. Cells
were transfected with 500 ng of plasmids expressing HA-DAXX WT, HA-DAXX 15KR and HA-DAXXΔSIM
plasmids, using Fugene 6 (Promega # E2691), following the manufacturer's instructions. HA-NBR1 was used as
negative control. After 24h cells were infected at the indicated MOI in DMEM 2% FBS. When indicated, cells
were treated with 10 mM of remdesivir (MedChemExpress #HY-104077) at the time of infection. For flow
cytometry analysis, cells were fixed with 4% formaldehyde and permeabilized in a PBS 1% BSA 0.025% saponin
solution for 30 min prior to staining with corresponding antibodies for 1h at 4°C diluted in the permeabilization
solution. Samples were acquired on a BD LSR Fortessa and analyzed using FlowJo. Total RNA was extracted
using a RNeasy Mini kit and submitted to DNase treatment (Qiagen). RNA concentration and purity were
evaluated by spectrophotometry (NanoDrop 2000c, ThermoFisher). In addition, 500 ng of RNA were reverse
transcribed with both oligo dT and random primers, using a PrimeScript RT Reagent Kit (Takara Bio) in a 10 mL
reaction. Real-time PCR reactions were performed in duplicate using Takyon ROX SYBR MasterMix blue dTTP
(Eurogentec) on an Applied Biosystems QuantStudio 5 (ThermoFisher). Transcripts were quantified using the
following program: 3 min at 95°C followed by 35 cycles of 15s at 95°C, 20s at 60°C, and 20s at 72°C. Values for
each transcript were normalized to expression levels of RPL13A. The primers used are indicated in **Table S4**.
464
Microscopy Immunolabeling and Imaging. 293T-ACE2 cells were cultured and infected with SARS-CoV-2 as
described above. When indicated, cells were treated with 50 μM of GRL0617 (MedChemExpress #HY-117043)
at the time of infection. Cultures were rinsed with PBS and fixed with 4% paraformaldehyde (electronic
microscopy grade; Alfa Aesar) in PBS for 10 min at room temperature, treated with 50 mM NH4Cl for 10 min,
permeabilized with 0.5% Triton X-100 for 15 min, and blocked with 0.3% BSA for 10 min. Cells were incubated
with primary and secondary antibodies for 1h and 30 min, respectively, in a moist chamber. Nuclei were labeled
with Hoechst dye (Molecular Probes). Images were acquired using a LSM700 (Zeiss) confocal microscope
equipped with a 63X objective or by Airyscan LSM800 (Zeiss). Image analysis and quantification was performed
using ImageJ.
474
Western blot. 293T-ACE2 cells were transfected with the indicated plasmids or treated with the indicated
concentrations of GRL0617; with 10 µM of Masitinib (MedChemExpress #HY-10209); or with 10µM of MG132
(SIGMA #M7449), an inhibitor of the proteasome and infected with SARS-CoV-2. Cell lysates were prepared
using RIPA lysis and extraction buffer (ThermoFisher #89901). Protein concentration was determined using
Bradford quantification. Proteins were denatured using 4X Bolt LDS Sample Buffer (Invitrogen) and 10X Bolt
Sample Reducing Agent (Invitrogen). 40 µg of proteins were denatured and loaded on 12% ProSieve gel and
then subjected to electrophoresis. Gels were then transferred (1h, 90V) to Western blotting membranes,
nitrocellulose (GE Healthcare #GE10600002) using Mini Trans-Blot Electrophoretic Transfer Cell (Biorad
#1703930EDU). Membranes were blocked with 5% BSA in PBS (blocking buffer) and incubated with primary
antibodies diluted in blocking buffer. Membranes were washed and incubated with secondary antibodies diluted
in blocking buffer. Chemiluminescent acquisitions were performed on a Chemidoc™ MP Imager and analysed
using Image Lab™ desktop software (Bio-Rad Laboratories).
487
488 **Flow cytometry.** For flow cytometry analysis, all cells were fixed with 4% formaldehyde. For intracellular
489 staining, cells were permeabilized in a PBS/1% BSA/0.025% saponin solution for 30 min prior to staining with
490 corresponding primary antibodies for 1h at 4°C and then secondary antibodies for 45min at 4°C, diluted in the
491 permeabilization solution. Acquisition was done with Fortessa Cytometer and analyses with FlowJo software
492 (Treestar Inc., Oregon, USA).
493

494   **Single-cell RNAseq analysis.** Single cell RNAseq analysis were performed in the BioTuring Browser Software
495   (v2.8.42) developed by BioTuring, using a dataset made available by Liao *et al.* (43) (ID: GSE145926). All
496   processing steps were done by BioTuring Browser (71). Cells with less than 200 genes and mitochondrial genes
497   higher than 10% were excluded from the analysis.
498
499   **Statistical analysis.** GraphPad Prism was used for statistical analyses. Linear models were computed using
500   Rstudio.

Figures.

Figure 1: ISG-focused CRISPR/Cas9 screening approach to identify restriction factors for SARS-CoV-2. a: CRISPR/Cas9 screen outline. A549-ACE2 cells were transduced with lentivectors encoding the ISG CRISPR/Cas9 library and selected by puromycin treatment for 20 days. Library cells were then pre-treated with 200 U/mL of IFNα for 16 hours, and infection with SARS-CoV-2 at MOI 1. At 24h p.i., infected cells were fixed with formalin treatment, permeabilized by saponin treatment and stained with a monoclonal anti-spike antibody. After secondary staining, infected cells were sorted and harvested. Non-infected, non-IFNα treated cells were harvested as a control. DNA was extracted from both cellular fractions and sgRNA *loci* amplification was carried out by PCR. Following NGS, bio-informatic analysis using the MAGeCK package was conducted. **b: Screen results**. By taking into account the enrichment ratios of each of the 8 different sgRNAs for every gene, the MAGeCK analysis provides a positive score for KO enriched in infected cells (*i.e.* restriction factor, represented in the top fraction of the graph) and a negative score for KO depleted in infected cells (*i.e.* proviral factors, represented in the bottom portion of the graph). Gene with an FDR < 0.05 are represented in black. 3 genes with a FDR > 0.05, but with a p-value < 0.005 were additionally selected and are represented in red. **c: Individual sgRNA enrichment.** For the indicated genes, the enrichment ratio of the 8 sgRNAs present in the library was calculated as the MAGeCK normalized read counts in infected cells divided by those in the original pool of cells and is represented in log2 fold change. As a control, the enrichment ratios of the 200 non-targeting control (NTCs) is also represented.

Gene	% of alleles edited
LY6E	96 ± 1.73
DAXX	79,67 ± 2.52
APOL6	99 ± 0
HERC5	97 ± 0
CTSL	91 ± 1
IFI6	88,33 ± 0.58
IFNAR1	76,67 ± 3.21

523
524 **Table 1: Gene editing efficiency**. The frequency of editing was determined using Sanger sequencing
525 and ICE analysis. Values are represented as mean ± SD (n=3).

526
Figure 2: DAXX is a restriction factor for SARS-CoV-2. a-c: Antiviral activity of ISGs against
SARS-CoV-2. A549-ACE2 knocked-out for the indicated genes were generated using a multi-guide
approach, leading to pools of KO cells with a high frequency of indels. KO cells were pre-treated with
0 (circles) or 200 (triangles) U/mL of IFNα 24h prior to triplicate infection with SARS-CoV-2 (MOI 0.1).
Supernatants were harvested at 72h p.i. The mean of three independent experiments, with infections
carried out in triplicate, is shown. **a:** For the titration of RNA levels, supernatants were heat inactivated
prior to quantification by qRT-PCR. Genome copies/mL were calculated by performing serial dilutions
of a synthetic RNA with a known concentration. Statistics: 2-way ANOVA using Dunnett's test, * = p-
value < 0.05, ** = p-value < 0.01, *** = p-value < 0.001, **** = p-value < 0.0001. **b:** For the titration of
infectious virus levels by plaque assay, supernatants were serially diluted and used to infect VeroE6
cells. Plaques formed after 3 days of infection were quantified using crystal violet coloration. Statistics:
Dunnett's test on a linear model, * p-value < 0.05, ** p-value < 0.01, *** p-value < 0.001. **c:** For each
of the indicated KO, the data shown in **a.** is represented as fold change in log10 titers (*i.e.* the triplicate
log10 titers of the non-treated condition divided by the mean of the triplicate log10 titers IFNα-treated
condition, n=3). Statistics: 2-way ANOVA using Sidak's test, ns = p-value > 0.05, **** = p-value <
0.001. **d-f: Antiviral activity of DAXX against SARS-CoV-2 variants and other viruses. d:** A549-
ACE2 WT or DAXX KO cells were infected in triplicates at an MOI of 0.1 with the following SARS-
CoV-2 strains: Lineage B (original strain); Lineage B.1.1.7. (Alpha variant); Lineage B.1.35.1 (Beta
variant); Lineage P1 (Gamma variant). Supernatants were harvested at 72h p.i. Supernatants were
heat inactivated prior to quantification by qRT-PCR. Genome copies/mL were calculated by
performing serial dilutions of a synthetic RNA with a known concentration. The mean of three
independent experiments, with infections carried out in triplicate, is shown. **e:** A549-ACE2 WT or
DAXX KO cells were infected in triplicates with Yellow Fever Virus (YFV, Asibi strain, MOI of 0.3) or
with Measles Virus (MeV, Schwarz strain expressing GFP, MOI of 0.2). At 24h p.i., the percentages of
cells positive for viral protein E (YFV) or GFP (MeV) was assessed by flow cytometry. The mean of 3
independent experiments is represented. **f:** WT or DAXX KO cells were infected in triplicates at an
MOI of 0.1 with SARS-CoV or MERS-CoV. Supernatants were harvested at 72h p.i. Supernatants
were heat inactivated prior to quantification by qRT-PCR. Serial dilutions of a stock of known
infectious titer was used as a standard. The mean of 2 independent experiments is represented.
Statistics: 2-way ANOVA using Dunnett's test, * = p-value < 0.05, *** = p-value < 0.001, **** = p-value
< 0.0001

Figure 3: DAXX restricts SARS-CoV-2 transcription. A549-ACE2 WT or DAXX KO were infected at MOI 1 in triplicates. Cell monolayers were harvested at the indicated time points, and total RNA was extracted. The levels of viral RNA (**a:** 5' UTR; **b:** RdRp) were determined by qRT-PCR and normalized against GAPDH levels. The mean of 3 independent experiments is represented. Statistics: Dunnett's test on a linear model, * p-value < 0.05, ** p-value < 0.01, *** p-value < 0.001.

565
Figure 4: DAXX restriction of SARS-CoV-2 is SUMOylation independent. a-c: DAXX
overexpression restricts SARS-CoV-2. 293T-ACE2 cells were transfected with DAXX WT. 24h after
transfection, cells were infected with the mNeonGreen fluorescent reporter SARS-CoV-2 at the
indicated MOI. Cells were either visualized with an EVOS fluorescence microscope (**a-b**) or stained
with an HA-antibody detecting DAXX and imaged by confocal microscopy (**c**). Scale bars correspond
to 200 µm (**a**) and 30 µm (**c**). Images shown in (**a**) were quantified using ImageJ software (**b**). Data
show the mean +/- SD of Fluorescence integrated densities. The analysis was performed on around
200 cells from 3 different fields. **d-e: DAXX mutants are still able to restrict SARS-CoV-2**. 293T-
ACE2 cells were transfected with HA-DAXX WT; HA-DAXX 15KR; HA-DAXXΔSIM; or with HA-NBR1
as negative control plasmid. 24h after transfection, cells were infected with SARS-CoV-2 at an MOI of
0.1. When indicated, cells were treated with remdesivir at the time of infection. After 24h or 48h,
infected cells were double-stained recognizing dsRNAs (to read out infection) and HA (to read out
transfection efficiency) and acquired by flow cytometry. The percentage of infected cells among HA-
positive (transfected) cells for one representative experiment is shown in **d**, for the mean of 3
independent experiments in **e**. Statistics: one-way ANOVA using Dunnett's test, Holm corrected, ns =
p-value > 0.05, * = p-value < 0.05, ** = p-value < 0.01, *** = p-value < 0.001.

582
583
584 **Figure 5: SARS-CoV-2 infection induces DAXX cytoplasmic re-localization to sites of viral**
585 **replication.** 293T-ACE2 cells were infected with SARS-CoV-2 at the indicated MOI 1. 24h post-
586 infection, cells were labelled with Hoescht and with antibodies against dsRNA (detecting viral RNA, in
587 green) and HA (detecting DAXX, in red). When indicated, the high-resolution Airyscan mode was
588 used. Scale bars correspond to 10 µm for confocal images, and 2 µm for the high-resolution images.

590
Figure 6: SARS-CoV-2 PLpro induces the proteasomal degradation of DAXX. a: DAXX
degradation after infection. 293T-ACE2 cells were infected with SARS-CoV-2 at MOI 0.1. After 24h,
cells were harvested and levels of DAXX, Lamin B, HSP90, Actin, GAPDH, Tubulin, TRIM22, RIG-I
and of the viral protein spike were analyzed by Western Blot. **b: GRL0617 and MG132 treatment**
restores DAXX expression. 293T-ACE2 cells were infected with SARS-CoV-2 at MOI 0.1. When
indicated, cells were pretreated 2h before infection with GRL0617 (at the indicated concentrations), or
with MG132 (10 µM), a proteasome inhibitor, or Masitinib (10 µM) a 3CL inhibitor. After 24h, cells were
harvested and levels of DAXX, GAPDH and of the viral protein spike were analyzed by Western Blot.
c: GRL0617 treatment restores DAXX localization. 293T-ACE2 cells were infected with SARS-CoV-
2 at MOI 0.1. 24h post-infection, cells were labelled with Hoescht and with antibodies against dsRNA
(detecting viral RNA, in green) and HA (detecting DAXX, in red). When indicated, cells were treated
with 50 µM of GRL0617 at the time of infection. Scale bars correspond to 10 µm. **d-f: Nsp3 induces**
DAXX degradation. D: 293T-ACE2 cells were transfected with 1 µg of the indicated viral proteins.
After 24h, the levels of DAXX and GAPDH were analyzed by Western Blot. **E:** 293T-ACE2 cells were
transfected with the indicated amounts of Nsp3. After 24h, the levels of DAXX and GAPDH were
analyzed by Western Blot. **f:** 293T-ACE2 cells were transfected with 1 µg of Nsp3. 6 hours post
transfection, cells were also, when indicated, treated with 50 µM of GRL0617. 24h after transfection,
the levels of DAXX and GAPDH were analyzed by Western Blot.

Acknowledgements. We thank the Cytometry Platform, Center for Technological Resources and Research, Institut Pasteur, for cell sorting experiments. This work was funded by the Institut Pasteur Coronavirus Task Force, CNRS (UMR 3569), the Labex IBEID (ANR-10-LABX-62-IBEID) and by the ANR (ANR-20-COVI-000, projects IDISCOVR to M.V. and Alpha-COV to S.N.). A.M.K. is supported by a grant of the French Ministry of Higher Education, Research and Innovation. G.M. is supported by a grant from the Agence nationale de recherches sur le sida et les hépatites virales (ANRS). We thank Michael Emerman, Daniel Marc and Ignacio Caballero-Posadas for helpful comments on the manuscript. Illustrative figures in this manuscript were created with BioRender.com.

Contributions. F.R. designed the research project. F.R. and M.V. secured the funding for the study. A.M.K., S.M.A., A.H., N.A., S.N., G.M., D.Q.T., M.C., T.V. and F.R. performed and analyzed the *in vitro* experiments. F.P. produced the stocks of lentiviruses. J.C.S., J.O. and K.H. generated and validated KO cell lines. T.B. performed the single-cell RNAseq data analysis. S.M. and F.D. performed the SARS-CoV and MERS-CoV experiments. A.B. and E.S.L. performed the bio-informatic analyses of the CRISPR/Cas9 screen. M.O., T.B., O.S., N.J., S.N., S.V.D.W. and M.V. analyzed the data and supervised the project. A.M.K., N.J. and F.R. wrote the manuscript. All authors edited the manuscript.

Competing Interests: J.C.S., J.O. and K.H. are employees and shareholders from Synthego Corporation.

Correspondence and requests for materials should be addressed to either M.V., N.J., S.N. or F.R.

Data availability: Raw NGS data was deposited to the NCBI GEO portal and is accessible with the number GSE173418.

References.

1.   Ruetsch C, Brglez V, Crémoni M, Zorzi K, Fernandez C, Boyer-Suavet S, et al. Functional Exhaustion of Type I and II Interferons Production in Severe COVID-19 Patients. Front Med. 2021 Jan 27;7:603961.

2.   Hadjadj J, Yatim N, Barnabei L, Corneau A, Boussier J, Smith N, et al. Impaired type I interferon activity and inflammatory responses in severe COVID-19 patients. Science. 2020 Aug 7;369(6504):718–24.

3.   Combes AJ, Courau T, Kuhn NF, Hu KH, Ray A, Chen WS, et al. Global absence and targeting of protective immune states in severe COVID-19. Nature. 2021 Mar 1;591(7848):124–30.

4.   Blanco-Melo D, Nilsson-Payant BE, Liu W-C, Uhl S, Hoagland D, Møller R, et al. Imbalanced Host Response to SARS-CoV-2 Drives Development of COVID-19. Cell. 2020 May;181(5):1036-1045.e9.

5.   Galani I-E, Rovina N, Lampropoulou V, Triantafyllia V, Manioudaki M, Pavlos E, et al. Untuned antiviral immunity in COVID-19 revealed by temporal type I/III interferon patterns and flu comparison. Nat Immunol. 2021 Jan;22(1):32–40.

6.   Bastard P, Rosen LB, Zhang Q, Michailidis E, Hoffmann H-H, Zhang Y, et al. Autoantibodies against type I IFNs in patients with life-threatening COVID-19. Science. 2020 Oct 23;370(6515):eabd4585.

7.   Zhang Q, Bastard P, Liu Z, Le Pen J, Moncada-Velez M, Chen J, et al. Inborn errors of type I IFN immunity in patients with life-threatening COVID-19. Science. 2020 Oct 23;370(6515):eabd4570.

8.   Sa Ribero M, Jouvenet N, Dreux M, Nisole S. Interplay between SARS-CoV-2 and the type I interferon response. PLOS Pathog. 2020 Jul 29;16(7):e1008737.

9.   Rebendenne A, Chaves Valadão AL, Tauziet M, Maarifi G, Bonaventure B, McKellar J, et al. SARS-CoV-2 Triggers an MDA-5-Dependent Interferon Response Which Is Unable To Control Replication in Lung Epithelial Cells. J Virol. 2021 Mar 25;95(8):e02415-20.

10.   Yin X, Riva L, Pu Y, Martin-Sancho L, Kanamune J, Yamamoto Y, et al. MDA5 Governs the
Innate Immune Response to SARS-CoV-2 in Lung Epithelial Cells. Cell Rep. 2021 Jan;34(2):108628.
11.   Felgenhauer U, Schoen A, Gad HH, Hartmann R, Schaubmar AR, Failing K, et al. Inhibition of
SARS–CoV-2 by type I and type III interferons. J Biol Chem. 2020 Oct 9;295(41):13958–64.
12.   Lokugamage KG, Hage A, de Vries M, Valero-Jimenez AM, Schindewolf C, Dittmann M, et al.
Type I Interferon Susceptibility Distinguishes SARS-CoV-2 from SARS-CoV. J Virol. 2020 Nov
9;94(23):e01410-20.
13.   Hoagland DA, Møller R, Uhl SA, Oishi K, Frere J, Golynker I, et al. Leveraging the antiviral
type I interferon system as a first line of defense against SARS-CoV-2 pathogenicity. Immunity. 2021
Jan;S1074761321000406.
14.   Busnadiego I, Fernbach S, Pohl MO, Karakus U, Huber M, Trkola A, et al. Antiviral Activity of
Type I, II, and III Interferons Counterbalances ACE2 Inducibility and Restricts SARS-CoV-2. mBio.
2020 Oct 27;11(5):e01928-20.
15.   Zhao X, Zheng S, Chen D, Zheng M, Li X, Li G, et al. LY6E Restricts Entry of Human
Coronaviruses, Including Currently Pandemic SARS-CoV-2. J Virol. 2020 Aug 31;94(18):e00562-20.
16.   Pfaender S, Mar KB, Michailidis E, Kratzel A, Boys IN, V'kovski P, et al. LY6E impairs
coronavirus fusion and confers immune control of viral disease. Nat Microbiol. 2020 Nov;5(11):1330–
9.
17.   Shi G, Kenney AD, Kudryashova E, Zani A, Zhang L, Lai KK, et al. Opposing activities of
IFITM proteins in SARS-CoV-2 infection. EMBO J. 2021 Feb 1;40(3):e106501.
18.   Buchrieser J, Dufloo J, Hubert M, Monel B, Planas D, Rajah MM, et al. Syncytia formation by
SARS-CoV-2-infected cells. EMBO J. 2020 Dec;39(23).
19.   Biering SB, Sarnik SA, Wang E, Zengel JR, Sathyan V, Nguyenla X, et al. Genome-wide,
bidirectional CRISPR screens identify mucins as critical host factors modulating SARS-CoV-2
infection. bioRxiv. 2021 Jan 1;2021.04.22.440848.
20.   Nchioua R, Kmiec D, Müller JA, Conzelmann C, Groß R, Swanson CM, et al. SARS-CoV-2 Is
Restricted by Zinc Finger Antiviral Protein despite Preadaptation to the Low-CpG Environment in
Humans. mBio. 2020 Oct 27;11(5):e01930-20.
21.   Wickenhagen A, Sugrue E, Lytras S, Kuchi S, Noerenberg M, Turnbull ML, et al. A prenylated
dsRNA sensor protects against severe COVID-19. Science. 2021 Sep 28;eabj3624.
22.   Martin-Sancho L, Lewinski MK, Pache L, Stoneham CA, Yin X, Becker ME, et al. Functional
Landscape of SARS-CoV-2 Cellular Restriction. Mol Cell. 2021 Apr 13;
23.   Bonaventure B, Rebendenne A, Garcia de GF, McKellar J, Tauziet M, Chaves Valadão AL, et
al. A genome-wide CRISPR/Cas9 knock-out screen identifies the DEAD box RNA helicase DDX42 as
a broad antiviral inhibitor. bioRxiv. 2020 Jan 1;2020.10.28.359356.
24.   Hoffmann H-H, Sánchez-Rivera FJ, Schneider WM, Luna JM, Soto-Feliciano YM, Ashbrook
AW, et al. Functional interrogation of a SARS-CoV-2 host protein interactome identifies unique and
shared coronavirus host factors. Cell Host Microbe. 2021 Feb;29(2):267-280.e5.
25.   Daniloski Z, Jordan TX, Wessels H-H, Hoagland DA, Kasela S, Legut M, et al. Identification of
Required Host Factors for SARS-CoV-2 Infection in Human Cells. Cell. 2021 Jan;184(1):92-105.e16.
26.   Wei J, Alfajaro MM, DeWeirdt PC, Hanna RE, Lu-Culligan WJ, Cai WL, et al. Genome-wide
CRISPR Screens Reveal Host Factors Critical for SARS-CoV-2 Infection. Cell. 2021 Jan;184(1):76-
91.e13.
27.   Schneider WM, Luna JM, Hoffmann H-H, Sánchez-Rivera FJ, Leal AA, Ashbrook AW, et al.
Genome-Scale Identification of SARS-CoV-2 and Pan-coronavirus Host Factor Networks. Cell. 2021
Jan;184(1):120-132.e14.
28.   Wang R, Simoneau CR, Kulsuptrakul J, Bouhaddou M, Travisano KA, Hayashi JM, et al.
Genetic Screens Identify Host Factors for SARS-CoV-2 and Common Cold Coronaviruses. Cell. 2021
Jan;184(1):106-119.e14.

29.   Baggen J, Persoons L, Vanstreels E, Jansen S, Van Looveren D, Boeckx B, et al. Genome-wide
CRISPR screening identifies TMEM106B as a proviral host factor for SARS-CoV-2. Nat Genet. 2021
Apr;53(4):435–44.
30.   Tang J, Wu S, Liu H, Stratt R, Barak OG, Shiekhattar R, et al. A novel transcription regulatory
complex containing death domain-associated protein and the ATR-X syndrome protein. J Biol Chem.
2004 May 7;279(19):20369–77.
31.   Porter SS, Stepp WH, Stamos JD, McBride AA. Host cell restriction factors that limit
transcription and replication of human papillomavirus. Virus Res. 2017 Mar 2;231:10–20.
32.   Maillet S, Fernandez J, Decourcelle M, El Koulali K, Blanchet FP, Arhel NJ, et al. Daxx
Inhibits HIV-1 Reverse Transcription and Uncoating in a SUMO-Dependent Manner. Viruses. 2020
Jun 11;12(6).
33.   Dutrieux J, Maarifi G, Portilho DM, Arhel NJ, Chelbi-Alix MK, Nisole S. PML/TRIM19-
Dependent Inhibition of Retroviral Reverse-Transcription by Daxx. PLoS Pathog. 2015
Nov;11(11):e1005280.
34.   OhAinle M, Helms L, Vermeire J, Roesch F, Humes D, Basom R, et al. A virus-packageable
CRISPR screen identifies host factors mediating interferon inhibition of HIV. eLife. 2018 Dec
6;7:e39823.
35.   Li W, Xu H, Xiao T, Cong L, Love MI, Zhang F, et al. MAGeCK enables robust identification
of essential genes from genome-scale CRISPR/Cas9 knockout screens. Genome Biol. 2014 Dec
5;15(12):554.
36.   Katopodis P, Anikin V, Randeva HS, Spandidos DA, Chatha K, Kyrou I, et al. Pan-cancer
analysis of transmembrane protease serine 2 and cathepsin L that mediate cellular SARS-CoV-2
infection leading to COVID-19. Int J Oncol. 2020 Aug;57(2):533–9.
37.   Malakhova OA, Yan M, Malakhov MP, Yuan Y, Ritchie KJ, Kim KI, et al. Protein ISGylation
modulates the JAK-STAT signaling pathway. Genes Dev. 2003 Feb 15;17(4):455–60.
38.   Broering R, Zhang X, Kottilil S, Trippler M, Jiang M, Lu M, et al. The interferon stimulated
gene 15 functions as a proviral factor for the hepatitis C virus and as a regulator of the IFN response.
Gut. 2010 Aug;59(8):1111–9.
39.   McLaren PJ, Gawanbacht A, Pyndiah N, Krapp C, Hotter D, Kluge SF, et al. Identification of
potential HIV restriction factors by combining evolutionary genomic signatures with functional
analyses. Retrovirology. 2015 May 16;12:41.
40.   Richardson RB, Ohlson MB, Eitson JL, Kumar A, McDougal MB, Boys IN, et al. A CRISPR
screen identifies IFI6 as an ER-resident interferon effector that blocks flavivirus replication. Nat
Microbiol. 2018 Nov;3(11):1214–23.
41.   Merkl PE, Orzalli MH, Knipe DM. Mechanisms of Host IFI16, PML, and Daxx Protein
Restriction of Herpes Simplex Virus 1 Replication. J Virol. 2018 May 15;92(10).
42.   Jacquet S, Pontier D, Etienne L. Rapid Evolution of HERC6 and Duplication of a Chimeric
HERC5/6 Gene in Rodents and Bats Suggest an Overlooked Role of HERCs in Mammalian Immunity.
Front Immunol. 2020;11:605270.
43.   Liao M, Liu Y, Yuan J, Wen Y, Xu G, Zhao J, et al. Single-cell landscape of bronchoalveolar
immune cells in patients with COVID-19. Nat Med. 2020 Jun 1;26(6):842–4.
44.   Haugh KA, Shalginskikh N, Nogusa S, Skalka AM, Katz RA, Balachandran S. The interferon-
inducible antiviral protein Daxx is not essential for interferon-mediated protection against avian
sarcoma virus. Virol J. 2014 May 28;11:100.
45.   Guo K, Barrett BS, Mickens KL, Hasenkrug KJ, Santiago ML. Interferon Resistance of
Emerging SARS-CoV-2 Variants. BioRxiv Prepr Serv Biol. 2021 Mar 21;
46.   Maillet S, Nisole S. Daxx, a broad-spectrum viral restriction factor. Virol Montrouge Fr. 2016
Oct 1;20(5):261–72.
47.   Kuo H-Y, Chang C-C, Jeng J-C, Hu H-M, Lin D-Y, Maul GG, et al. SUMO modification

negatively modulates the transcriptional activity of CREB-binding protein via the recruitment of Daxx.
Proc Natl Acad Sci U S A. 2005 Nov 22;102(47):16973–8.
48.   Shih H-M, Chang C-C, Kuo H-Y, Lin D-Y. Daxx mediates SUMO-dependent transcriptional
control and subnuclear compartmentalization. Biochem Soc Trans. 2007 Dec;35(Pt 6):1397–400.
49.   Sudharsan R, Azuma Y. The SUMO ligase PIAS1 regulates UV-induced apoptosis by
recruiting Daxx to SUMOylated foci. J Cell Sci. 2012 Dec 1;125(Pt 23):5819–29.
50.   Jang M-S, Ryu S-W, Kim E. Modification of Daxx by small ubiquitin-related modifier-1.
Biochem Biophys Res Commun. 2002 Jul 12;295(2):495–500.
51.   Lin D-Y, Huang Y-S, Jeng J-C, Kuo H-Y, Chang C-C, Chao T-T, et al. Role of SUMO-
interacting motif in Daxx SUMO modification, subnuclear localization, and repression of sumoylated
transcription factors. Mol Cell. 2006 Nov 3;24(3):341–54.
52.   Xie X, Muruato A, Lokugamage KG, Narayanan K, Zhang X, Zou J, et al. An Infectious cDNA
Clone of SARS-CoV-2. Cell Host Microbe. 2020 May 13;27(5):841-848.e3.
53.   Liu G, Lee J-H, Parker ZM, Acharya D, Chiang JJ, van Gent M, et al. ISG15-dependent
activation of the sensor MDA5 is antagonized by the SARS-CoV-2 papain-like protease to evade host
innate immunity. Nat Microbiol. 2021 Apr;6(4):467–78.
54.   Shin D, Mukherjee R, Grewe D, Bojkova D, Baek K, Bhattacharya A, et al. Papain-like
protease regulates SARS-CoV-2 viral spread and innate immunity. Nature. 2020 Nov;587(7835):657–
62.
55.   Mohamud Y, Xue YC, Liu H, Ng CS, Bahreyni A, Jan E, et al. The papain-like protease of
coronaviruses cleaves ULK1 to disrupt host autophagy. Biochem Biophys Res Commun. 2021
Feb;540:75–82.
56.   Saiz M, Martinez-Salas E. Uncovering targets of the Leader protease: Linking RNA-mediated
pathways and antiviral defense. Wiley Interdiscip Rev RNA. 2021 Feb 18;e1645.
57.   Drayman N, DeMarco JK, Jones KA, Azizi S-A, Froggatt HM, Tan K, et al. Masitinib is a
broad coronavirus 3CL inhibitor that blocks replication of SARS-CoV-2. Science. 2021 Aug
20;373(6557):931–6.
58.   Miserey-Lenkei S, Trajkovic K, D'Ambrosio JM, Patel AJ, Čopič A, Mathur P, et al. A
comprehensive library of fluorescent constructs of SARS-CoV-2 proteins and their initial
characterisation in different cell types. Biol Cell. 2021 Jul;113(7):311–28.
59.   Shaw AE, Hughes J, Gu Q, Behdenna A, Singer JB, Dennis T, et al. Fundamental properties of
the mammalian innate immune system revealed by multispecies comparison of type I interferon
responses. PLoS Biol. 2017 Dec 18;15(12):e2004086–e2004086.
60.   Schreiner S, Bürck C, Glass M, Groitl P, Wimmer P, Kinkley S, et al. Control of human
adenovirus type 5 gene expression by cellular Daxx/ATRX chromatin-associated complexes. Nucleic
Acids Res. 2013 Apr 1;41(6):3532–50.
61.   Guion LG, Sapp M. The Role of Promyelocytic Leukemia Nuclear Bodies During HPV
Infection. Front Cell Infect Microbiol. 2020;10:35.
62.   Huang L, Agrawal T, Zhu G, Yu S, Tao L, Lin J, et al. DAXX represents a new type of protein-
folding enabler. Nature. 2021 Sep 2;597(7874):132–7.
63.   Mahmoudvand S, Shokri S. Interactions between SARS coronavirus 2 papain-like protease and
immune system: A potential drug target for the treatment of COVID-19. Scand J Immunol. 2021
Oct;94(4):e13044.
64.   Drosten C, Günther S, Preiser W, van der Werf S, Brodt H-R, Becker S, et al. Identification of a
Novel Coronavirus in Patients with Severe Acute Respiratory Syndrome. N Engl J Med. 2003 May
15;348(20):1967–76.
65.   Guery B, Poissy J, el Mansouf L, Séjourné C, Ettahar N, Lemaire X, et al. Clinical features and
viral diagnosis of two cases of infection with Middle East Respiratory Syndrome coronavirus: a report
of nosocomial transmission. The Lancet. 2013 Jun;381(9885):2265–72.

66.   Martin M. Cutadapt removes adapter sequences from high-throughput sequencing reads.
EMBnet.journal. 2011 May 2;17(1):10.
67.   Langmead B, Salzberg SL. Fast gapped-read alignment with Bowtie 2. Nat Methods. 2012
Apr;9(4):357–9.
68.   Li H, Handsaker B, Wysoker A, Fennell T, Ruan J, Homer N, et al. The Sequence
Alignment/Map format and SAMtools. Bioinforma Oxf Engl. 2009 Aug 15;25(16):2078–9.
69.   Hsiau T, Conant D, Rossi N, Maures T, Waite K, Yang J, et al. Inference of CRISPR Edits from
Sanger Trace Data. bioRxiv. 2019 Jan 1;251082.
70.   Combredet C, Labrousse V, Mollet L, Lorin C, Delebecque F, Hurtrel B, et al. A molecularly
cloned Schwarz strain of measles virus vaccine induces strong immune responses in macaques and
transgenic mice. J Virol. 2003 Nov;77(21):11546–54.
71.   Le T, Phan T, Pham M, Tran D, Lam L, Nguyen T, et al. BBrowser: Making single-cell data
easily accessible. bioRxiv. 2020 Jan 1;2020.12.11.414136.