A homeostatic interferon-lambda response to bacterial microbiota stimulates preemptive

antiviral defense within discrete pockets of intestinal epithelium

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Abstract

Interferon-lambda (IFN-λ) protects intestinal epithelial cells (IECs) from enteric viruses by inducing

expression of antiviral IFN-stimulated genes (ISGs). Here, we find that bacterial microbiota stimulate a

homeostatic ISG signature in the intestine of specific pathogen-free mice. This homeostatic ISG expression

is restricted to IECs, depends on IEC-intrinsic expression of IFN-λ receptor (*Ifnlr1*), and is associated with

IFN-λ production by leukocytes. Strikingly, imaging of these homeostatic ISGs reveals localization to

pockets of the epithelium and concentration in mature IECs. Correspondingly, a minority of mature IECs

express these ISGs in public single-cell RNA sequencing datasets from mice and humans. Furthermore,

we assessed the ability of orally-administered bacterial components to restore localized ISGs in mice

lacking bacterial microbiota. Lastly, we find that IECs lacking *Ifnlr1* are hyper-susceptible to initiation of

murine rotavirus infection. These observations indicate that bacterial microbiota stimulate ISGs in localized

regions of the intestinal epithelium at homeostasis, thereby preemptively activating antiviral defenses in

vulnerable IECs to improve host defense against enteric viruses.

Introduction

Interferons (IFNs) are a family of cytokines produced in response to infection that signal

IFN receptor-bearing cells to induce transcription of hundreds of interferon-stimulated genes

(ISGs). These ISGs perform diverse functions, but many cooperate to induce an antiviral state

(Sadler and Williams, 2008; Schoggins and Rice, 2011). There are three types of IFNs: type I

IFNs (IFN-αs, IFN-β, others), type II IFN (IFN-γ), and type III IFNs (IFN-λs). These three types are

differentiated by receptor usage (type I IFN receptor: *Ifnar1*/*Ifnar2*; type II IFN receptor:

Ifngr1/*Ifngr2*; type III IFN receptor: *Ifnlr1*/*Il10rb*), but all three receptor complexes signal through

Janus-kinase (JAK) and signal transducer and activator of transcription (STAT) factors to

stimulate ISG transcription (Ingle et al., 2018; Schneider et al., 2014). Type I and III IFNs are

directly stimulated by host detection of microbe-associated molecular patterns (MAMPs) such as

viral nucleic acids, and the prominent contribution of these IFN types to antiviral defense is

reflected by the breadth of evasion strategies used by diverse viral families to prevent their

production or action (Levy and García-Sastre, 2001; Rojas et al., 2021; Taylor and Mossman,

2013). The type I IFN receptor is expressed broadly across most cell types, whereas the type III

IFN receptor, *Ifnlr1,* is primarily restricted to epithelial cells (Kotenko and Durbin, 2017;

Sommereyns et al., 2008). Accordingly, IFN-λ is of particular importance in effective antiviral

defense of barrier tissues.

Interestingly, previous studies in mice have noted that intestinal epithelial cells (IECs) are

hyporesponsive to type I IFN (Lin et al., 2016; Mahlakõiv et al., 2015; Pott et al., 2011; Van Winkle

et al., 2020). The responsiveness of IECs to type I IFN appears to be developmentally regulated

because the IECs of adult mice exhibit weaker type I responses than IECs of neonatal mice (Lin

et al., 2016). Additionally, infection of mice deficient in IFN receptors (*Ifnar1*, *Ifngr1*, *Ifnlr1*; single

or double knockouts) with enteric viruses indicates that IFN-λ is the predominant antiviral IFN type

that controls viral replication in the gastrointestinal epithelium (Mahlakõiv et al., 2015; Nice et al.,

2015; Pott et al., 2011). IECs can robustly respond to IFN-λ with upregulation of canonical antiviral

ISGs and increased resistance to infection by enteric viruses, such as rotaviruses and noroviruses

(Baldridge et al., 2017; Nice et al., 2015; Pott et al., 2011). Mouse rotavirus (mRV) is a natural

pathogen of mice that infects enterocytes located at the tips of villi in the small intestine (Burns et

al., 1995). Rotaviruses have developed mechanisms to antagonize the induction of IFN by

infected cells, suggesting that evasion of the IFN response is necessary for efficient epithelial

infection (Arnold et al., 2013). Indeed, prophylactic administration of IFN-λ significantly reduces

the burden of mRV infection, demonstrating its potential for mediating epithelial antiviral immunity

to this pathogen (Hernández et al., 2015; Lin et al., 2016; Pott et al., 2011; Van Winkle et al.,

2020). However, a protective role of the endogenous IFN-λ response to mRV infection is less

clear, perhaps reflecting the success of mRV evasion mechanisms.

Epithelial immunity in the gut must be appropriately balanced to protect the intestinal

epithelium while preventing loss of barrier integrity and intrusion by microbes that are abundant

within the gastrointestinal tract. The bacterial microbiota in the intestine perform critical functions

by aiding in host metabolism (Krajmalnik-Brown et al., 2012), providing a competitive environment

to defend against pathogens (Kim et al., 2017), and initiating and maintaining host immune

function during homeostasis (Honda and Littman, 2016; Rooks and Garrett, 2016). In this complex

environment host epithelial and immune cells detect bacteria and viruses using a suite of pattern

recognition receptors (PRRs) that sense the presence of MAMPs. Stimulation of PRRs, such as

the toll-like receptor (TLR) family, activates antimicrobial and antiviral defenses providing local

protection in many tissues (Chu and Mazmanian, 2013; Iwasaki and Medzhitov, 2015; Thompson

et al., 2011). TLR-dependent pathways induce production of IFNs, primarily by signaling through

TIR-domain-containing adapter-inducing interferon-β (TRIF) and myeloid differentiation primary

response 88 (MYD88) adapter proteins (Monroe et al., 2010; Odendall et al., 2017), providing a

mechanism by which bacterial MAMPs can initiate IFN responses.

Signals from the bacterial microbiota have been shown to elicit a steady-state type I IFN

response in systemic tissues and cell types that can prime antiviral immunity by several

independent studies (Abt et al., 2012; Bradley et al., 2019; Ganal et al., 2012; Steed et al., 2017;

Stefan et al., 2020; Winkler et al., 2020). Additionally, a steady-state ISG signal has been

observed in the intestine of uninfected mice (Baldridge et al., 2015; Lin et al., 2016; Stockinger et

al., 2014), but this intestinal response remained poorly characterized. Together with the observed

hypo-responsiveness of IECs to type I IFN, these findings suggested that bacterial microbiota

may stimulate an IFN-λ response in the gut. To explore this interaction, we undertook the present

study to assess the role of bacterial microbiota in induction of enteric ISGs at homeostasis using

a combination of broad-spectrum antibiotics (ABX) and genetically modified mice.

In this study, we uncovered an ISG signature in IECs that was dependent on the presence

of bacteria and IFN-λ signaling (hereafter referred to as 'homeostatic ISGs'). This panel of genes

was present in WT mice with conventional microbiota and was reduced in WT mice treated with

ABX and in mice lacking *Ifnlr1*. We revealed that homeostatic ISG expression is i) restricted to

the intestinal epithelium across both the ileum and colon, ii) independent of type I IFN signaling,

and iii) associated with IFN-λ transcript expression by epithelium-associated CD45+ leukocytes.

Surprisingly, we found that homeostatic ISGs are not expressed uniformly by all IECs; rather,

expression is concentrated in localized pockets of IECs and in differentiated IECs relative to crypt-

resident progenitors. These patterns of localized ISG expression are corroborated by

independently-generated single-cell RNA sequencing data from mouse and human IECs. We also

found that ISG expression can be increased in ABX-treated mice by reconstitution of bacterial

microbiota or administration of bacterial lipopolysaccharide (LPS). Finally, we found that this

microbiota-stimulated ISG signature provides protection from initiation of mRV infection.

Cumulatively, this study found that bacteria initiate preemptive IFN-λ signaling in localized areas

to protect IECs from enteric viruses.

Results

Bacterial microbiota stimulate IFN-λ response genes in the ileum at homeostasis

To determine the effect of bacterial microbiota on homeostatic IFN-λ responses, we

compared gene expression in whole ileum tissue for the following experimental groups: i) wild-

type C57BL/6J (WT) mice intraperitoneally-injected with IFN-λ as compared to unstimulated WT

mice, ii) WT mice with conventional microbiota as compared to WT mice treated with an antibiotic

cocktail (ABX) to deplete bacteria, iii) WT mice with conventional microbiota as compared to *Ifnlr1*$^{-}$

$^{/-}$ mice with conventional microbiota, and iv) *Ifnlr1*$^{-/-}$ mice with conventional microbiota compared

to *Ifnlr1*$^{-/-}$ mice treated with ABX (**Figure 1A**). To rule out contributions of *Ifnlr1* toward an altered

intestinal bacterial microbiota, we performed 16S rRNA sequencing on stool from *Ifnlr1*$^{+/+}$, *Ifnlr1*$^{+/-}$

, and *Ifnlr1*$^{-/-}$ mice and did not find statistically significant differences in alpha-diversity and beta-

diversity measurements with the statistical power available from 12 mice per group (**Figure S1**).

For each comparison of ileum gene expression shown in **Figure 1A,** we performed gene-set-

enrichment-analysis (GSEA) to determine enrichment or depletion of hallmark gene sets

(Liberzon et al., 2016). The hallmark gene set that was most enriched in IFN-λ-treated WT mice

compared to unstimulated WT mice was INTERFERON_ALPHA_RESPONSE (**Figures S2, 1B**).

Therefore, this gene set reflects differences in IFN-λ responses between experimental conditions.

To deplete bacterial microbiota, we administered a cocktail of broad-spectrum antibiotics,

and demonstrated that this treatment reduced bacterial 16S gene copies in stool to below the limit

of detection (**Figure S3)**. GSEA of WT mice treated with ABX showed a significant depletion

(negative enrichment score) of INTERFERON_ALPHA_RESPONSE hallmark genes in the ileum

relative to WT mice with conventional microbiota (**Figure 1C**). These data indicate that ISGs are

present at steady-state in the ileum of specific-pathogen-free mice with conventional microbiota

and suggest that microbiota stimulate expression of these genes in the ileum at homeostasis.

Type I, II, and III IFN responses have substantial gene expression overlap; therefore, to

prove that the IFN-λ receptor was necessary for expression of ISGs at homeostasis, we analyzed

gene expression in the ileum of *Ifnlr1*^{-/-} mice. Indeed, GSEA showed significant reduction of

INTERFERON_ALPHA_RESPONSE hallmark genes in the ileum of *Ifnlr1*^{-/-} mice compared to WT

mice (**Figure 1D**). Furthermore, expression of INTERFERON_ALPHA_RESPONSE hallmark

genes was not significantly decreased in *Ifnlr1*^{-/-} mice treated with ABX compared to *Ifnlr1*^{-/-} mice

with conventional microbiota (**Figure 1E**). In contrast to INTERFERON_ALPHA_RESPONSE,

other hallmark gene sets such as INFLAMMATORY_RESPONSE and

IL6_JAK_STAT3_SIGNALING were significantly decreased by ABX treatment in both WT mice

and *Ifnlr1*^{-/-} mice (**Figure S2**), which indicates a selective requirement for *Ifnlr1* to elicit ISGs and

a minimal effect of *Ifnlr1*-deficiency on other microbiota-dependent genes. Together, these

findings suggest that *Ifnlr1* is necessary for the bacterial microbiota-dependent expression of ISGs

in the ileum at homeostasis. Since ISGs are enriched in mice upon IFN-λ stimulation and are

decreased in *Ifnlr1*^{-/-} and ABX-treated mice, we conclude that the bacterial microbiota stimulates

IFN-λ responses in the ileum at homeostasis.

To define a core set of bacterial microbiota-dependent, *Ifnlr1*-dependent 'homeostatic

ISGs', we determined the overlap of differentially expressed genes (DEGs) by defining genes

with: i) increased expression upon IFN-λ stimulation in WT mice, ii) decreased expression upon

ABX treatment in WT mice, and iii) decreased expression in *Ifnlr1*^{-/-} mice relative to WT mice. The

DEGs shared by each of these comparisons comprised a set of 21 genes that are decreased

upon treatment with ABX and loss of *Ifnlr1*, and are induced in response to IFN-λ (**Figure 1F**).

This set of homeostatic ISGs includes antiviral genes that are dependent on bacterial microbiota

and the IFN-λ pathway. Comparison of homeostatic ISG transcript counts between experimental

treatments revealed similar insights as prior GSEA analysis. WT mice treated with IFN-λ had

higher expression of all homeostatic ISGs than untreated mice, whereas WT mice with a

conventional microbiota had higher expression of homeostatic ISGs than *Ifnlr1*^{-/-} mice and ABX-

treated mice of both genotypes (**Figure 1G**). We did not detect additional decreases in these

homeostatic ISGs in ABX-treated *Ifnlr1*^{-/-} mice relative to conventional *Ifnlr1*^{-/-} mice, suggesting

that *Ifnlr1* is necessary for expression of homeostatic ISGs (**Figure 1G**). These results indicate

that there is modest but significant expression of ISGs at homeostasis that is lost with *Ifnlr1*

deficiency or ABX treatment. Together, these analyses revealed a homeostatic signature of ISGs

in the ileum that depends upon the presence of bacterial microbiota and on intact IFN-λ signaling.

Figure 1. Bacterial microbiota stimulate IFN-λ response genes in the ileum at homeostasis.

A. Depiction of experimental treatments and comparison groups. Following the indicated treatments, a segment of whole ileum tissue was harvested and analyzed by RNA sequencing for differentially expressed genes between paired conditions. **B-E.** Gene-set enrichment analysis of INTERFERON_ALPHA_RESPONSE hallmark genes (ISGs) was performed with the following comparisons: WT mice treated with 25µg of IFN-λ relative to WT mice treated with PBS **(B)**, WT mice treated with ABX relative to untreated WT mice **(C)**, *Ifnlr1*$^{-/-}$ mice relative to WT mice **(D)**, and *Ifnlr1*$^{-/-}$ mice treated with ABX relative to untreated *Ifnlr1*$^{-/-}$ mice **(E)**. Normalized enrichment score (NES) and false-discovery rate (FDR) are overlaid for each comparison with significant FDR's highlighted (red). **F.** A Venn diagram depicting the total number of differentially expressed genes that are i) increased with IFN-λ stimulation (orange), ii) decreased with ABX treatment (green), or iii) decreased in *Ifnlr1*$^{-/-}$ mice relative to WT (blue). An overlapping subset of 21 genes was shared among all three comparisons (red box). **G.** A graph and heatmap of the relative expression of the 21 genes that overlap in all experimental groups in **(F)** ('homeostatic ISGs'). Statistical significance in **(G)** was determined by one-way ANOVA with Tukey's multiple comparisons where ns = p > 0.05, and **** = p < 0.0001.

Figure S1. *Ifnlr1*-deficiency does not alter intestinal bacterial microbiota. Stool was harvested from *Ifnlr1*$^{+/+}$, *Ifnlr1*$^{+/-}$, and *Ifnlr1*$^{-/-}$ mice and 16S rRNA genes were sequenced. Alpha-diversity metrics of observed bacterial species **(A)** and Shannon Diversity Index **(B)**. **C.** Principle component analysis of beta-diversity UniFrac distances. Statistical significance was determined one-way ANOVA with Tukey's multiple comparisons, where ns = p > 0.05.

Figure S2. Gene set enrichment analysis of hallmark gene sets. $\log_2$ counts from RNA

sequencing output were assessed for enrichment and depletion of hallmark gene sets by gene

set enrichment analysis. Graphs of normalized enrichment score (NES) are displayed for each

hallmark gene set and each comparison. Gene sets in red are statistically significantly altered in

their given comparison.

Figure S3. Treatment with antibiotics reduces enteric 16S gene copies to below the limit of

detection. rDNA was isolated from luminal contents of mice after 14 days of ABX-treatment. 16S

gene copies were assessed by qPCR and normalized to input. Limit of detection: dashed line.

Data points represent individual mice and are pooled from 2 independent experiments. Statistical

significance was determined by Mann Whitney, where *** = $p < 0.001$.

Homeostatic, microbiota- and *Ifnlr1*-dependent ISGs are primarily expressed in intestinal

tissues

To complement the results of the RNA-sequencing and extend this analysis to other tissue

sites**,** we quantified tissue-level expression of a panel of three ISGs by qPCR: *Ifit1, Oas1a*, and

Stat1. *Ifit1* and *Stat1* were present among the 21 homeostatic ISGs in the preceding analysis and

Oas1a was included as a representative canonical ISG that we hypothesized would be present in

the homeostatic signature, but did not meet the statistical criteria used to define the core set of

21 homeostatic ISGs (**Figure 1F-G**). We assessed absolute abundance of these ISG transcripts

in the ileum, colon, mesenteric lymph nodes (MLN), and spleen tissue of WT and *Ifnlr1*$^{-/-}$ mice

with or without ABX treatment (**Figures 2A-C**). Consistent with our RNA-seq data, these ISGs

were reduced in the ilea of *Ifnlr1*$^{-/-}$ mice and ABX-treated WT mice compared to WT mice with

conventional microbiota (**Figure 2A**). Secondly, homeostatic ISGs were expressed in WT colonic

tissue and were significantly decreased in colonic tissue of *Ifnlr1*$^{-/-}$ mice and ABX-treated WT mice

(**Figure 2B**). These data indicate that homeostatic ISGs in both the ileum and colon were

dependent on *Ifnlr1* and the bacterial microbiota; however, these homeostatic ISGs were more

abundantly expressed in ileal tissue than colonic tissue (**Figure S4**). To confirm that treatment

with ABX does not ablate the ability of the intestine to respond to IFN-λ, we stimulated ABX-

treated mice with intraperitoneal IFN-λ and harvested ileum tissue. Stimulation with small amounts

of IFN-λ rescued ISG expression in whole tissue (**Figure S5**), indicating that that reduction of

homeostatic ISG expression upon treatment with ABX is not due to an inability of the intestine to

respond to IFN-λ.

Enteric colonization by bacteria was shown to stimulate systemic type I IFN responses

(Abt et al., 2012; Bradley et al., 2019; Ganal et al., 2012; Steed et al., 2017; Stefan et al., 2020;

Winkler et al., 2020), so we assessed whether the decreases in ISGs upon ABX treatment or loss

of *Ifnlr1* in the ileum were recapitulated in systemic immune tissues. We quantified *Ifit1*, *Stat1,*

and *Oas1a* expression in the MLN and the spleen and found that ABX treatment and *Ifnlr1* deletion

did not reduce ISGs in these tissues (**Figure 2C**). Although we observe increases in *Ifit1*

expression in MLN upon treatment with ABX, these results are not recapitulated by *Stat1* and

Oas1a expression, and no significant changes in ISG expression were detected in the spleen.

Cumulatively, these data indicate that homeostatic ISGs include genes beyond the core signature

identified in **Figure 1** (e.g. *Oas1a*), that homeostatic ISGs are present in colonic tissue, and that

homeostatic IFN-λ stimulated genes are most prominent in enteric tissues.

Figure 2. Homeostatic, microbiota- and *Ifnlr1*-dependent ISGs are primarily expressed in intestinal tissues. A segment of ileum or colon tissue from WT or *Ifnlr1$^{-/-}$* mice was harvested following H_2O or ABX treatment and the ISGs *Ifit1*, *Stat1*, and *Oas1a* were analyzed by qPCR. Transcripts were quantified in ileum **(A)**, colon **(B),** or MLN and spleen **(C)** with normalization to untreated WT mice. Data points represent individual mice and data are pooled from 10-20 independent experiments in **A-B** and 15 independent experiments in **C**. Statistical significance was determined by one-way ANOVA with Tukey's multiple comparisons in **A-B** and Dunnett's multiple comparisons in **C**. * = $p < 0.05$, ** = $p < 0.01$, *** = $p < 0.001$, **** = $p < 0.0001$.

Figure S4. Homeostatic ISGs are more abundantly expressed in the ileum than in the colon. *Ifit1*, *Stat1*, and *Oas1a* expression was quantified from the ileum and colon tissue of WT mice. Data points represent individual mice and are pooled from 5 independent experiments. Statistical significance was determined by paired t-test where *** = $p < 0.001$ and **** = $p < 0.0001$.

Figure S5. Treatment with antibiotics does not ablate responsiveness to IFN-λ. *Ifit1*, *Stat1*,

and *Oas1a* expression was quantified in the ileum of WT mice treated with or without ABX and

was normalized to untreated mice. Increasing quantities of IFN-λ were intraperitoneally injected

into ABX-treated mice to rescue basal ISG expression. Data points represent individual mice and

are pooled from 3 independent experiments. Statistical significance was determined by Kruskal-

Wallis test with Dunn's multiple comparisons with *** = $p < 0.001$, and **** = $p < 0.0001$.

Homeostatic ISG expression in the intestine is independent of type I IFN

To determine whether detection of enteric bacteria by TLRs stimulates homeostatic ISGs,

we measured tissue ISG expression in mice that were deficient in TRIF or MYD88. Signaling

through TRIF results in activation of interferon regulatory factors (IRFs), such as IRF3 and IRF7,

that commonly contribute to IFN induction (Honda et al., 2005a; Osterlund et al., 2007; Schmid et

al., 2010). Additionally, signaling through MYD88 can aid initiation of IFN expression, through

nuclear factor kappa-light-chain-enhancer of activated B cells (NF-κB) transcription factor family

members (Osterlund et al., 2007) and IRF7 (Honda et al., 2005b; Tomasello et al., 2018). *Ifit1*

expression in the ileum and colon of *Trif*^{-/-} mice was not significantly different than in WT mice,

and *Ifit1* expression was reduced with ABX in *Trif*^{-/-} mice (**Figure 3A**). However, we found that

mice lacking *Myd88* exhibited tissue-specific decreases in *Ifit1* expression, with significant

decreases in the ileum, but not in the colon, relative to WT mice **(Figure 3A)**. These data are

consistent with a previous report (Stockinger et al., 2014) and suggest that signaling through

MYD88, but not TRIF, is necessary for homeostatic ISG expression in the ileum, whereas other

factors may dominate in the colon.

To expand these findings, we assessed the role of IRF3 and IRF7 transcription factors

that are commonly activated downstream of MYD88 and TRIF. We did not observe significant

decreases in *Ifit1* expression in the ileum or the colon of *Irf3*^{-/-} mice as compared to WT (**Figure**

3B), indicating that IRF3 is not required for homeostatic IFN-λ induction. However, we observed

a modest (two-fold) decrease in *Ifit1* expression in both the ileum and colon of *Irf7*$^{-/-}$ mice when

compared to WT mice (**Figure 3B**). Although IRF7 is implicated by these data, it does not appear

to be strictly required for homeostatic expression of *Ifit1* because expression is further reduced

by ABX treatment (**Figure 3B**). These data suggest that IRF7 is not necessary for the homeostatic

ISG response to the bacterial microbiota.

Type I and III IFNs stimulate overlapping ISG responses that are both dependent on

STAT1. Therefore, to further investigate the contribution of type I IFN signaling to homeostatic

ISG expression, we quantified *Ifit1* expression in ileum and colon tissue from *Ifnar1*$^{-/-}$ or *Stat1*$^{-/-}$

mice. *Ifit1* expression was not significantly different in either ileum or colon tissue of *Ifnar1*$^{-/-}$ mice

compared to WT (**Figure 3C**). However, *Ifit1* expression was significantly lower in ileum and colon

tissue of *Stat1*$^{-/-}$ mice compared to *Ifnar1*$^{-/-}$ and WT mice. Importantly, treatment of *Stat1*$^{-/-}$ mice

with ABX did not further reduce *Ifit1* expression, emphasizing the necessity of STAT1 for this

homeostatic ISG response.

Lastly, to determine whether type I IFN signaling plays a compensatory role in homeostatic

ISG expression in the absence of *Ifnlr1*, we bred mice with heterozygous expression of both *Ifnlr1*

and *Ifnar1* (*Ifnlr1*^{Het}/*Ifnar1*^{Het}) with mice that lack *Ifnlr1* and *Ifnar1* (*Ifnlr1*^{KO}/*Ifnar1*^{KO}). This breeding

scheme produced littermate-matched mice that were *Ifnlr1*^{Het}/*Ifnar1*^{Het}, *Ifnlr1*^{KO}/*Ifnar1*^{KO}, and mice

singly deficient in *Ifnlr1* (*Ifnlr1*^{KO}/*Ifnar1*^{Het}) or *Ifnar1* (*Ifnlr1*^{Het}/*Ifnar1*^{KO}). We found that *Ifit1*

expression was not significantly different in *Ifnlr1*^{Het}/*Ifnar1*^{KO} relative to *Ifnlr1*^{Het}/*Ifnar1*^{Het} controls

in ileal tissue (**Figure 3D**). *Ifit1* expression in *Ifnlr1*^{KO}/*Ifnar1*^{Het} was significantly lower compared to

Ifnlr1^{Het}/*Ifnar1*^{Het} controls, but was not significantly different from *Ifnlr1*^{KO}/*Ifnar1*^{KO} mice (**Figure**

3D). Cumulatively, these data indicate that homeostatic ISG expression in the intestine is partly

dependent on MYD88, and is independent of type I IFN signaling.

Figure 3. Homeostatic ISG expression is independent of type I IFN. *Ifit1* expression levels

were assessed by qPCR from the ileum or colon of **(A)** *Trif*^{-/-} and *Myd88*^{-/-}, **(B)** *Irf3*^{-/-} *and Irf7*^{-/-}, or

(C) *Ifnar1*^{-/-} and *Stat1*^{-/-} mice treated with or without ABX normalized to untreated, WT mice. Some

WT controls are shared across experiments in **(A-C). D.** *Ifit1* expression was measured by qPCR

in ileum tissue of indicated genotypes. Data points represent individual mice and are pooled from

at least six independent experiments in **(A-C)** and two independent experiments in **(D)**. Statistical

significance was determined by one-way ANOVA with Dunnett's multiple comparisons in **(A-C)**

and one-way ANOVA with Tukey's multiple comparisons in D, where * = $p < 0.05$, ** = $p < 0.01$,

*** = $p < 0.001$, **** = $p < 0.0001$.

Homeostatic ISG expression in the intestine is restricted to epithelial cells

Given the primarily epithelial expression of *Ifnlr1*, we assessed which compartment of the

ileum expresses homeostatic ISGs by isolating a stripped intestinal epithelial fraction and

digesting the underlying lamina propria. We assessed ISG expression in these two fractions from

WT and *Ifnlr1*^{-/-} mice treated with or without ABX. Treatment with ABX or loss of *Ifnlr1* reduced

homeostatic ISGs in the IEC fraction, but the lamina propria had low expression of these ISGs

relative to the epithelium of untreated WT mice, regardless of treatment or genotype (**Figure 4A**).

IECs express abundant *Ifnlr1*, but other intra-epithelial cell types do not (Mahlakõiv et al.,

2015; Sommereyns et al., 2008). To determine whether *Ifnlr1* expression by IECs was required

for homeostatic ISG expression, we used mice with IECs that are conditionally deficient in *Ifnlr1*

(*Ifnlr1*[ΔIEC]) and littermates that retain normal *Ifnlr1* expression (*Ifnlr1*[flox/flox]) (Baldridge et al., 2017).

Ifit1 and *Oas1a* expression in the ileum (**Figure 4B**) and colon (**Figure 4C**) of *Ifnlr1*[flox/flox] mice was

decreased upon treatment with ABX, consistent with the phenotype observed in WT mice.

Conditional deletion of *Ifnlr1* in IECs reduced *Ifit1* and *Oas1a* to a similar extent as the reduction

observed in *Ifnlr1*^{-/-} animals, above (**Figures 2A-B**). Together, these findings indicate that

homeostatic ISGs are dependent on *Ifnlr1*-expression by IECs.

Figure 4. Homeostatic ISG expression in the intestine is restricted to epithelial cells. **A.** *Ifit1*, *Stat1*, and *Oas1a* expression was quantified in stripped epithelial cells or in the lamina propria cells of the ileum. Comparisons were performed between WT and *Ifnlr1*$^{-/-}$ mice with or without ABX treatment, and ISG expression was normalized to WT values. **B-C.** *Ifit1* and *Oas1a* expression from the **(B)** ileum or **(C)** colon of mice with conditional presence (flox) or absence (ΔIEC) of *Ifnlr1* in intestinal epithelial cells. Data points represent individual mice and are pooled from three independent experiments in **(A)** and two independent experiments in **(B-C)**. Statistical significance was determined by one-way ANOVA with Dunnett's multiple comparisons. * = p < 0.05, ** = p < 0.01, *** = p < 0.001.

Bacterial microbiota stimulate expression of *Ifnl2/3* by CD45-positive cells

A previous study (Mahlakõiv et al., 2015) noted the presence of IFN-λ transcripts (*Ifnl2/3*) at homeostasis in CD45+ cells within the stripped intestinal epithelium, but not in the lamina propria. To extend these findings and to determine whether CD45+ cells in the intestinal epithelium produce IFN-λ in response to bacterial microbiota at homeostasis, we enriched cell subsets from epithelial or lamina propria fractions of the ileum for quantification of *Ifnl2/3* by qPCR. We treated WT mice with control, ABX, or stimulation with a synthetic dsRNA analogue (poly I:C). We then magnet-enriched EpCAM+ or CD45+ cells from stripped intestinal epithelium or digested lamina propria ileal tissue (**Figure S6**). We found that CD45+ cells from the intestinal epithelial and lamina propria fraction expressed detectable *Ifnl2/3* at homeostasis, but EpCAM+ cells did not, which is consistent with Mahlakõiv et al. Furthermore, we found that expression of *Ifnl2/3* in CD45+ cells from the epithelial fraction was significantly reduced with ABX-treatment, and CD45+ cells from lamina propria had a non-statistically-significant (p = 0.0523) reduction in *Ifnl2/3* expression with ABX-treatment (**Figure 5A**). From these data, we conclude that epithelium-associated CD45+ leukocytes are the likely source of homeostatic IFN-λ in response to bacterial microbiota, but we do not rule out additional involvement of CD45+ cells in the lamina propria.

Similar to *Ifnl2/3*, we found that CD45+ cells of the epithelial fraction modestly expressed
IFN-β transcript (*Ifnb1*) at homeostasis. Additionally, CD45+ cells of the lamina propria robustly
expressed *Ifnb1* at homeostasis. However, unlike *Ifnl2/3*, *Ifnb1* was not decreased in mice treated
with ABX (**Figure 5B**). These data indicate that *Ifnb1* expression by CD45+ cells in the intestine
is less dependent on stimulation by bacterial microbiota relative to *Ifnl2/3*, consistent with the
dominant role of IFN-λ responses in driving homeostatic ISG expression in the epithelium.

Figure 5. Bacterial microbiota stimulate expression of *Ifnl2/3* by CD45-positive cells. A-B.
Cellular suspensions from the ileal epithelium and lamina propria was harvested from WT mice
treated with H_2O, ABX, or stimulated with poly I:C. Resulting cells were enriched for EpCAM-

positive and CD45-positive cells by magnetic separation. *Ifnl2/3* expression **(A)** and *Ifnb1*

expression **(B)** was quantified from each enriched cellular fraction by qPCR. Data points represent

individual mice and are pooled from 2 independent experiments. Statistical significance was

determined by two-way ANOVA with Dunnett's multiple comparisons, where * = p < 0.05 and ****

= p < 0.0001.

Figure S6. Enrichment of EpCAM+ and CD45+ cells from the intestinal epithelium and

lamina propria. A-C. The ileal epithelium and lamina propria was harvested from WT mice

treated with H_2O, ABX, or stimulated with poly I:C. Resulting cell suspensions were enriched for

EpCAM-positive and CD45-positive cells and the purity of all live and dead cells pre- and post-

enrichment were quantified by flow cytometry. The percentage of live and dead cell events with

surface expression of **(A)** EpCAM or **(B)** CD45 prior to- and following- enrichment from stripped

intestinal epithelium. **C.** The percentage of live and dead cell events with surface expression of

CD45 prior to and following CD45 enrichment from isolated lamina propria. Mean fold enrichment

for each condition is noted above each column. Data points represent individual mice and are

pooled from 2 independent experiments.

Homeostatic ISG expression in the small intestine is highly localized

Homeostatic ISG expression in the ileum was of relatively low magnitude when compared

to IFN-λ treatment (**Figures 1-2**). Therefore, we hypothesized that a low abundance of

homeostatic ISG expression would be uniformly distributed between IECs of the intestinal

epithelium, and we sought to assess the distribution of the homeostatic ISG, *Ifit1*, using *in situ*

hybridization (RNAscope). Contrary to our hypothesis, RNAscope staining of the ileum from

untreated WT mice revealed localized pockets of robust *Ifit1* expression in individual villi rather

than ubiquitously low expression throughout the intestinal epithelium (**Figure 6A**). Additionally,

Ifit1 localization was skewed away from the crypt and towards the tips of individual villi within the

ileum, and this localization was not specific to *Ifit1* because the distinct ISG *Usp18* co-localized

with *Ifit1* (**Figure 6A**). These data indicate that homeostatic ISGs are sporadically expressed in

individual villi and are primarily localized to mature enterocytes that are most distally located in

villi. We determined that localized ISG expression within individual villi was not due to a localized

ability to respond to IFN-λ because stimulation with exogenous IFN-λ resulted in *Ifit1* expression

within all intestinal villi, but not intestinal crypts (**Figure S7**). The minimal expression of *Ifit1* within

intestinal crypts following exogenous IFN-λ treatment suggests that homeostatic ISGs are

localized to mature enterocytes because intestinal crypts do not exhibit robust responses to IFN-

λ. Additionally, the non-uniform distribution of homeostatic *Ifit1* expression was ablated in the

ileum of mice treated with ABX (**Figures 6B-D**), consistent with a dependency on bacterial

microbiota. To determine whether localized *Ifit1* expression was dependent on IEC expression of

Ifnlr1, we assessed the distribution of *Ifit1* expression in the ilea of littermate *Ifnlr1*^{flox/flox} and

Ifnlr1^{ΔIEC} mice. We found that the localized *Ifit1* expression observed in untreated WT mice was

recapitulated in *Ifnlr1*^{flox/flox} mice (**Figure 6E**), but these areas of ISG expression were ablated in

Ifnlr1^{ΔIEC} mice (**Figures 6F-G**). Lastly, we found that this discrete localization of the homeostatic

ISG response is not limited to the ileum, as localized *Ifit1* staining is also observed in the colonic

epithelium (**Figure S8**). Together, our analyses indicated that homeostatic ISGs are expressed in

a highly localized manner within the intestinal epithelium.

Figure 6. Homeostatic ISG expression in the small intestine is highly localized. The ilea of WT, *Ifnlr1*^{flox/flox}, or *Ifnlr1*^{ΔIEC} mice were harvested, processed into a Swiss rolls, and stained by *in situ* hybridization for the ISGs, *Ifit1* (red) and *Usp18* (green), with a DAPI (blue) counterstain. **A.** Representative high-magnification images of co-localized *Ifit1* (red) and *Usp18* (green) expression in the ileum of WT mice, see arrows. **B-D.** WT mice treated with H_2O control or ABX with quantification of *Ifit1* area relative to the total area of the section across replicate mice. **E-G.** *Ifnlr1*^{flox/flox} or *Ifnlr1*^{ΔIEC} mice at homeostasis with quantification of *Ifit1* area relative to the total area

of the section across replicate mice. Scale bar = 100µm in **(A)** and 500µm in **(B-G)** and. Statistical

significance was calculated by unpaired t-test where ** = $p < 0.01$. Each data point in **(D)** and **(G)**

represents an individual mouse from 2 independent experiments.

Figure S7. The entire intestinal epithelium is responsive to IFN-λ. Wild-type mice were

injected with PBS or 3µg of pegylated IFN-λ3. The ileum was harvested after four hours and a

small section was assessed for expression of the ISGs: *Ifit1* **(A)**, *Isg15* **(B)**, and *Mx2* **(C)** by qPCR.

The remaining tissue was stained by RNAscope for the ISG, *Ifit1* (red), with a DAPI (blue)

counterstain. **D.** Quantification of *Ifit1* area relative to the total area of the section across replicate

mice. **E-F.** Representative images from the ileum of mice injected with PBS **(E)** or IFN-λ **(F).**

Scale bar = 500µm in insets. Data points represent individual mice from a single experiment.

Statistical significance was determined by unpaired t-test with ** = $p < 0.01$, *** = $p < 0.001$, and

**** = $p < 0.0001$.

Figure S8. Homeostatic ISG expression is also highly localized in the colon. The colon of *Ifnlr1*^Het^/*Ifnar1*^Het^, *Ifnlr1*^Het^/*Ifnar1*^KO^, *Ifnlr1*^KO^/*Ifnar1*^Het^, and *Ifnlr1*^KO^/*Ifnar1*^KO^ mice was harvested and stained by RNAscope for the ISG, *Ifit1* (red), with a DAPI (blue) counterstain. Representative images from **(A)** *Ifnlr1*^Het^/*Ifnar1*^Het^, **(B)** *Ifnlr1*^Het^/*Ifnar1*^KO^, **(C)** *Ifnlr1*^KO^/*Ifnar1*^Het^, and **(D)** *Ifnlr1*^KO^/*Ifnar1*^KO^ mice with **(E)** quantification of *Ifit1* area from individual mice. Data are representative of two independent experiments. Scale bar = 500µm.

Mature enterocytes express homeostatic ISGs in public single-cell datasets from mouse and human

To determine the extent of conservation of homeostatic ISG expression by IECs, we performed orthogonal analyses of publicly available single-cell RNA-seq (scRNA-seq) datasets from mouse (Haber et al., 2017) and human (Elmentaite et al., 2020) IECs. Recently, Haber et al. published a large single-cell RNA sequencing dataset that profiled sorted IECs from the small intestine of specific-pathogen-free mice and defined 15 distinct IEC subtypes (Haber et al., 2017). We analyzed IECs from this dataset, and found that of the 21 homeostatic ISGs identified in **Figure 1D**, 19 were present in the Haber et al. single-cell dataset. We determined the percentage of each epithelial cell subtype that expresses each individual homeostatic ISG, and generated a heatmap with hierarchical clustering to group IEC subtypes that have similar ISG expression patterns (**Figure 7A**). Homeostatic ISGs were predominantly expressed in mature enterocyte subtypes, which clustered separately from crypt-resident progenitor IECs such as transit amplifying (TA) cells and stem cells (**Figure 7A**). To compare homeostatic ISG expression between polar extremes of the crypt-villus axis, we grouped IEC subtypes that represented enterocytes (mature enterocyte cells) and crypt-associated cells (TA cells and stem cells) to compare the overall proportions of these cells with homeostatic ISG expression. We found that a significantly higher percentage of enterocytes express homeostatic ISGs than crypt-associated cells, but that these homeostatic ISGs were expressed in a relatively small proportion of enterocytes (< 20%) (**Figure 7B**). Notably, *Ifit1* (highlighted in red) was present in ~5% of enterocytes by scRNA-seq, which is consistent with our observation of 1-4% *Ifit1*-positive area by imaging the mouse small intestine (**Figures 6B-G**). Furthermore, the relative absence of ISG-positive crypt-associated cells in this scRNA-seq data is consistent with our observation that intestinal crypts lacked *Ifit1* and *Usp18* expression by imaging.

We expanded our investigation to a scRNA-seq dataset from the ileum of healthy, human, pediatric patients that was previously described (Elmentaite et al., 2020). IECs from this dataset

were previously clustered by Elmentaite et al and annotated as: enterocytes, early enterocytes,

tuft cells, enteroendrocrine cells, BEST4 enterocytes, goblet cells, TA cells, and crypt. For our

analysis of homeostatic ISG expression, we excluded IEC sub-types with fewer than 20

constituent cells, which retained five annotated groups: enterocytes, early enterocytes, goblet

cells, TA cells, and crypt. Of the 21 homeostatic ISGs identified in **Figure 1D**, 14 orthologous

human genes were present in these data. Similar to analysis in **Figure 7A,** we determined the

percentage of each group that expressed each individual homeostatic ISG and generated a

heatmap of these data with hierarchical clustering to group IEC subtypes that have similar ISG

expression patterns (**Figure 7C**). Enterocyte, early enterocyte, and goblet subtypes clustered

separately from TA cells and crypt, with the highest proportion of homeostatic ISGs being present

in the enterocyte subtype (**Figure 7C**). As with mouse IEC data, above, we grouped annotated

cells that localize in the crypt (TA cells and crypt) and compared overall proportions of homeostatic

ISG expression with the mature enterocyte subtype (**Figure 7D**). Similar to mice, homeostatic

ISGs were present in significantly more enterocytes than crypt-associated cells, and most

homeostatic ISGs in this human dataset were present in a relatively small proportion of cells (<

20%). These human data suggest that ISGs may be present in a small proportion of IECs from

healthy, human ileal tissue at homeostasis and may share the localization observed in our murine

analyses. Our analysis of a murine scRNA-seq dataset support our previous observations that

homeostatic ISGs are not ubiquitously expressed throughout the intestinal epithelium; rather, they

are expressed in a minority of IECs and skewed towards mature enterocytes along the crypt-villus

axis. Our analysis of a human scRNA-seq dataset are consistent with observations in the murine

model, though future studies will be required to definitively address the existence of homeostatic

ISGs in human tissue.

Figure 7. Mature enterocytes express homeostatic ISGs in public single-cell datasets from mouse and human. A-B. A mouse IEC single-cell transcriptional dataset (Haber et al., 2017) (GSE92332) was analyzed to determine the percentage of each epithelial cell subtypes that express homeostatic ISGs. **A.** Heatmap depicting the proportion of each epithelial cell type expressing nineteen of the twenty-one homeostatic ISGs identified in **Figure 1**. **B.** Enterocyte subtypes (blue text) and crypt-resident progenitor subtypes (green text) cells were grouped and the percentage of cells that express each homeostatic ISG was compared. **C-D.** A human IEC single-cell transcriptional dataset (Elmentaite et al., 2020) (E-MTAB-8901) was analyzed for the percentage of epithelial cell subtypes that express homeostatic ISGs. **C.** A heatmap depicting the percentage of IEC subtypes that express human orthologs of murine homeostatic ISGs identified

494 in **Figure 1**. **D.** The mature enterocyte subtype (blue text) and crypt-resident progenitor subtypes

495 (green text) were grouped and the percentage of cells that express each homeostatic ISG was

496 compared. Lines in **(B)** and **(D)** link paired ISGs in each IEC subset. Statistical significance in **(B)**

497 and **(D)** was calculated by Wilcoxon test where * = p < 0.05, and *** = p < 0.001.

499 **Assessing the effect of peroral bacterial products on homeostatic ISGs in ABX-treated**

500 **mice**

501   To further define the relationship between bacteria and homeostatic ISGs, we assessed

502 whether oral administration of fecal contents or purified LPS (a bacterial MAMP and TLR4 agonist)

503 could restore localized ISG expression in mice with depleted bacterial microbiota. Control groups

504 of *Ifnlr1*$^{flox/flox}$ mice with conventional microbiota (**Figure 8A**) retained a localized *Ifit1* expression

505 pattern, whereas ABX-treated *Ifnlr1*$^{flox/flox}$ mice (**Figure 8B**) and *Ifnlr1*$^{\Delta IEC}$ mice (**Figure 8C**) lacked

506 *Ifit1* expression. Oral LPS administered to conventional *Ifnlr1*$^{flox/flox}$ mice did not significantly alter

507 the distribution or frequency of localized *Ifit1* expression (**Figure 8D**). However, localized *Ifit1*

508 expression was visible in 4/12 ABX-treated *Ifnlr1*$^{flox/flox}$ mice administered LPS (**Figure 8E, 8H-I**).

509 In ABX-treated *Ifnlr1*$^{flox/flox}$ mice treated with fecal transplant of conventional microbes, localized

510 expression of *Ifit1* was visible in 4/8 mice (**Figure 8F, 8H-I**). Importantly, we did not observe

511 localized *Ifit1* expression in *Ifnlr1*$^{\Delta IEC}$ mice following LPS administration (**Figure 8G**), indicating

512 that LPS-stimulated *Ifit1* depends on IEC expression of *Ifnlr1*.

513   We noted that the visibility of localized *Ifit1* signal following LPS administration or fecal

514 transplant appeared largely binary (i.e. present or absent) in our imaging data (**Figures 8E and**

515 **8F**, representative *Ifit1*-positive and *Ifit1*-negative images). Using quantification of *Ifit1* area

516 (**Figure 8H**), we stratified mice into *Ifit1*-postive and *Ifit1*-negative groups (**Figure 8I-J**) based on

517 a cut-off set at the maximal *Ifit1* area value of *Ifnlr1*$^{\Delta IEC}$ mice (dashed line in **Figure 8H**). Results

518 of this unbiased stratification were consistent with visible *Ifit1* staining and indicated that 8/8

519 conventional *Ifnlr1*$^{flox/flox}$ mice, 0/8 ABX-treated control mice, 4/12 LPS-treated mice, and 4/8 fecal

transplant mice were *Ifit1*-positive (**Figure 8I-J**). Statistical analysis by Fisher's exact test

indicated that LPS administration non-significantly increased (p = 0.1022) the proportion of mice

that were *Ifit1*-positive, whereas fecal reconstitution of ABX-treated mice significantly increased

the likelihood of these mice being *Ifit1*-positive (**Figure 8J**). Importantly, mice that received fecal

transplant had full restoration of 16S gene copies (**Figure 8K**) despite only 4/8 having homeostatic

Ifit1 expression. These findings suggest that reconstitution of the homeostatic ISG signal by fecal

transfer has incomplete penetrance at this timepoint, underscoring the incomplete presence of

localized *Ifit1* expression (4/12) in ABX-treated mice administered peroral LPS.

To corroborate and extend these findings, we performed orthogonal analyses of *Ifit1*,

Stat1, and *Oas1a* expression in ileum tissue of WT mice treated with ABX followed by fecal

transplant, LPS administration, administration of the TLR5 agonist: flagellin, or administration of

TLR9 agonist: CpG DNA (**Figure S9**). Similar to imaging data, these qPCR data exhibited high

variance. However**,** stratification of tissues into positive and negative for each ISG indicated that

peroral administration of LPS to ABX-treated mice increased the proportion of ISG-positive

tissues by 21-36% (*Ifit1*: p=0.065; *Stat1,* p<0.05; *Oas1a*, p<0.05)**.** Additionally, peroral

administration of flagellin significantly increased the proportion of ISG-positive mice by 25-44%

(*Ifit1*: p=0.052; *Stat1,* p<0.01; *Oas1a*, p<0.05), whereas CpG DNA did not significantly increase

the proportion of ISG-positive mice (**Figure S9**). Together, these data suggest that LPS and

flagellin are sufficient to stimulate homeostatic ISG expression in a significant proportion of ABX-

treated mice. The ability of multiple PRR ligands to stimulate homeostatic ISGs suggests that

exposure to a variety of bacterial MAMPs is the basis for localized, homeostatic ISG expression.

Figure 8. Assessing the effect of peroral bacterial products on localized homeostatic ISGs in ABX-treated mice. The ilea of treated WT, *Ifnlr1*^flox/flox^, and *Ifnlr1*^ΔIEC^ mice were harvested, processed into Swiss rolls, and stained by *in situ* hybridization for the ISG, *Ifit1* (red), with a DAPI (blue) counterstain. **A-C.** Representative images from *Ifnlr1*^flox/flox^ mice treated with H_2O control followed by PBS stimulation **(A)**, ABX followed by PBS stimulation **(B)**, or from *Ifnlr1*^ΔIEC^ mice **(B)**. **D.** Representative images of *Ifnlr1*^flox/flox^ mice treated with H_2O control followed by LPS stimulation. **E-F.** Two representative images of *Ifnlr1*^flox/flox^ mice treated with ABX followed by LPS stimulation **(E)** or ABX followed by fecal transplantation **(F)**. **G.** A representative image of *Ifnlr1*^ΔIEC^ mice treated with ABX followed by LPS stimulation. **H.** Quantification of *Ifit1* area relative to the total area of each tissue section with a dashed line at the highest *Ifnlr1*^ΔIEC^ value. The proportion of *Ifit1*-positive mice (above dashed line) and *Ifit1*-negative mice (below dashed line) are tabulated **(I)** and graphed **(J)** for *Ifnlr1*^flox/flox^ mice of each condition. **K.** rDNA was isolated from the luminal contents of mice at endpoint harvest. 16S gene copies were assessed by qPCR and normalized to input. Limit of detection: dashed line. Where depicted, scale bar = 500µm. Data points represent individual mice and are pooled from 4 independent experiments in **(A-J)** and from 2 independent experiments in **(K)**. Statistical significance was determined by Kruskal-Wallis with Dunn's multiple comparisons in **(H)**, by one-way ANOVA with Dunnett's multiple comparisons in **(K)**, and by Fisher's exact tests in **(J)** where * = $p < 0.05$, ** = $p < 0.01$, and **** = $p < 0.0001$.

Figure S9. Assessing the effect of peroral bacterial products on homeostatic ISGs in ABX-treated mice. The ileum of treated WT, *Ifnlr1*flox/flox, and *Ifnlr1*ΔIEC mice was harvested and *Ifit1* **(A)**, *Stat1* **(B)**, and *Oas1a* **(C)** was quantified by qPCR. Delineation of positive ISG expression was

conservatively selected as one standard deviation above the mean of ABX-treated mice (dashed

line). Mice were binned into ISG-positive (above dashed line) or ISG-negative (below dashed line)

groups and are tabulated for each condition in **D**. The proportion of mice with expression of *Ifit1*

(E), *Stat1* **(F)**, and *Oas1a* **(G)** are graphed for each condition. Data points represent individual

mice and are pooled from 3-9 independent experiments. Statistical significance was determine

by Kruskal-Wallis with Dunn's multiple comparisons **(A-C)** and by Fisher's exact test **(E-G)** where

* = p < 0.05, ** = p < 0.01, and **** = p < 0.0001.

The homeostatic IFN-λ response preemptively protects IECs from murine rotavirus

infection

To assess the capacity of homeostatic ISGs to protect IECs from viral infection, we utilized

infection with murine rotavirus (mRV), an IEC-tropic pathogen. Prior studies of rotaviruses have

identified viral immune evasion genes that block IFN induction through multiple mechanisms

(Arnold et al., 2013). However, we reasoned that pre-existing ISG expression stimulated by the

bacterial microbiome at homeostasis may preemptively protect IECs from the infection before

viral gene expression is initiated. To determine the role of an epithelial IFN-λ response over the

course of mRV infection in adult mice, we monitored daily shedding of viral genomes in the stool

of *Ifnlr1*$^{flox/flox}$ mice and *Ifnlr1*$^{\Delta IEC}$ littermates. We first detected mRV shedding in the stool on day

two after inoculation and, at this early timepoint, *Ifnlr1*$^{\Delta IEC}$ mice shed 20-fold more mRV genomes

into their stool than *Ifnlr1*$^{flox/flox}$ mice (**Figure 9A**). However, at the peak of viral shedding between

days three and five, there were no significant differences between *Ifnlr1*$^{flox/flox}$ and *Ifnlr1*$^{\Delta IEC}$

littermates (**Figure 9A**). This similarity at peak of viral shedding was consistent with an ability of

mRV to evade the host IFN response once infection is established. Together, these findings

suggest that *Ifnlr1*$^{\Delta IEC}$ mice have defects in protection against initiation of mRV infection and that

the protective capacity of endogenous IFN-λ signaling against mRV is primarily prophylactic in

nature.

To more stringently assess the capacity of *Ifnlr1* to protect IECs against the earliest stages

of mRV infection, we inoculated mice with 5000 SD50 (50% shedding dose) of mRV to maximize

the likelihood of uniform viral exposure throughout the intestine. At 24 hours post-inoculation, we

quantified mRV genomes in the epithelial fraction and the proportion of infected IECs (live,

EpCAM-positive, CD45-negative, and mRV-positive) by flow cytometry. At 24 hours post-

inoculation, we found that *Ifnlr1*$^{\Delta IEC}$ mice had 20-fold more mRV genomes than *Ifnlr1*$^{flox/flox}$ mice

(**Figure 9B**). In addition, we found that a three-fold greater proportion of IECs were infected with

mRV in *Ifnlr1*$^{\Delta IEC}$ mice than *Ifnlr1*$^{flox/flox}$ mice at 24 hours post-infection (**Figures 9C-F**). However,

the median fluorescence intensity (MFI) of mRV antigen was equivalent in mRV-infected IECs

from *Ifnlr1*$^{flox/flox}$ and *Ifnlr1*$^{\Delta IEC}$ mice (**Figure 9G**) and the MFI of mRV did not correlate (r^2 = 0.0003)

with the percentage of infected IECs (**Figure 9H**). This equivalent mRV antigen burden in infected

cells from *Ifnlr1*$^{flox/flox}$ and *Ifnlr1*$^{\Delta IEC}$ mice in combination with the lack of correlation between antigen

burden and percentage of infected cells suggests that the protective role of *Ifnlr1* is to prevent

infection of IECs rather than to limit replication within IECs after they are infected. We assessed

an earlier timepoint at 12 hours post-inoculation and observed similar trends toward an increased

proportion of IEC infection in *Ifnlr1*$^{\Delta IEC}$ relative to *Ifnlr1*$^{flox/flox}$ littermates, but the extent of infection

was 10-100 fold lower and near the limit of detection (**Figure S10**). Thus, the 12- and 24-hour

timepoints capture the earliest detectable infection of IECs by mRV, and this early infection is

significantly reduced by IFN-λ signaling.

To further contextualize the localization of ISGs and mRV-infected cells over time, we

performed *in situ* hybridization for mRV genomes and *Ifit1* in the ileum of WT mice at 12, 24, and

96 hours post-inoculation. Quantification of co-staining for *Ifit1* in mRV-infected cells indicated

that a minority (~30%) were *Ifit1*+ at 12hr or 24hr post-inoculation, whereas a majority (~63%) of

mRV-infected cells were *Ifit1*+ at 96hr post-inoculation (**Figure 9I-J, S11**). These co-staining data

are consistent with early mRV evasion of IFN responses within infected IECs, at the same

timepoints that we observed increased infection of *Ifnlr1*$^{\Delta IEC}$ mice (**Figures 9B-F, S10**).

Furthermore, we found mRV inoculation did not increase the area of *Ifit1* expression in the

intestine at 12-24 hours post-inoculation. However, at 96 hours post-inoculation, we found a

significant increase in epithelial *Ifit1* expression in the ileum that coincided with increased viral

genomes and antigen (**Figure S12**), suggesting that *Ifit1* expression at 12 and 24 hours post-

inoculation is primarily due to the preexisting homeostatic response rather than in response to

mRV infection. Therefore, we propose that homeostatic ISGs stimulated by *Ifnlr1* expression on

IECs plays an early protective role against viral infection that preempts viral IFN evasion

mechanisms.

Figure 9. The homeostatic IFN-λ response preemptively protects IECs from murine rotavirus infection. *Ifnlr1*^{flox/flox} and *Ifnlr1*^{ΔIEC} mice were infected with 100 SD50 **(A)** or 5000 SD50 **(B-H)** of mRV and stool **(A)** or stripped ileal intestinal epithelial cells **(B-G)** were assessed for mRV infection. **A.** Timecourse of mRV genome copies detected in the stool of *Ifnlr1*^{flox/flox} and *Ifnlr1*^{ΔIEC} mice by qPCR. **B-G.** Mechanically stripped intestinal epithelial cell fractions were analyzed by qPCR for mRV genome copies **(B)** or flow cytometry for mRV antigen-positive IECs **(C-G).** Representative flow cytometry plots of naïve **(C)**, *Ifnlr1*^{flox/flox} **(D)**, and *Ifnlr1*^{ΔIEC} **(E)** mice infected with mRV with quantification in **(F)**. **G.** The MFI of mRV antigen in infected cells relative to uninfected cells. **H.** A linear correlation plot of mRV+ cells and mRV MFI with 95% confidence intervals (dashed lines). **I-J.** WT mice were infected with 5000 SD50 of mRV and the ilea were processed into Swiss rolls and stained by *in situ* hybridization for the ISG, Ifit1, or murine rotavirus. The percentage of mRV-infected cells that were *Ifit1*-positive and *Ifit1*-negative were determined. Additional representative images for **(I-J)** are depicted in **Figure S11**. Where designated in **(A-G)**, dashed lines = LOD as set by naïve mice. Data points represent individual mice and are pooled from 2-3 independent experiments. Statistical significance was determined by two-way ANOVA with Sidak's multiple comparisons **(A)**, by Mann Whitney **(B, F)**, unpaired t-test **(G)**, or Kruskal-Wallis with Dunn's multiple comparisons **(J)**, where * = p < 0.05 and *** = p < 0.001.

Figure S10. The homeostatic IFN-λ response preemptively protects IECs from murine rotavirus infection. *Ifnlr1*$^{flox/flox}$ and *Ifnlr1*$^{\Delta IEC}$ mice were infected with 5000 SD50 of mRV by oral gavage and stripped ileal intestinal epithelial cell fractions were analyzed by qPCR for mRV genome copies **(A)** or flow cytometry for mRV antigen-positive IECs **(B-F)**. Representative flow cytometry plots of naïve **(B)**, *Ifnlr1*$^{flox/flox}$ **(C)**, and *Ifnlr1*$^{\Delta IEC}$ **(D)** mice infected with mRV. **E.** The percentage of mRV+ live IECs for each genotype. **F.** The MFI of mRV antigen in infected cells relative to uninfected cells. **G.** A linear correlation plot of mRV+ cells and mRV MFI with 95% confidence intervals (dashed lines). Where designated in **(A, E-F)**, dashed lines = LOD as set by naïve mice. Data points represent individual mice and are pooled from 3 independent experiments. Statistical significance was calculated by Mann Whitney **(A, E)**, or unpaired t-test **(F)** where * = $p < 0.05$.

Figure S11. mRV and *Ifit1* co-incidence. WT mice were infected with 5000 SD50 of mRV by oral gavage and the ilea were processed into Swiss rolls and stained by *in situ* hybridization for the ISG, *Ifit1* (red), and mRV RNA (white), with a DAPI (blue) counterstain. Representative images of ileum from **(A)** 12hr post-inoculation, **(B)** 24hr post-inoculation, and **(C)** 96hr post-inoculation, where each image represents an individual mouse. **D**. The percentage of mRV-infected cells that are *Ifit1*-positive and negative for each individual mouse. Where displayed, scale bar = 200µm.

Figure S12. Murine rotavirus infection increases the distribution of *Ifit1* expression at late times post-inoculation. WT mice were infected with 5000 SD50 of mRV and the ilea were processed into Swiss rolls and stained by *in situ* hybridization for the ISG, *Ifit1* (red) with a DAPI (blue) counterstain. **A.** Quantification of *Ifit1* area relative to the total area of each tissue section with highlighted area representing historical range of *Ifit1* area in naive WT mice. In parallel, stripped ileal intestinal epithelial cell fractions were analyzed by qPCR for mRV genome copies **(B)** or flow cytometry for mRV antigen-positive IECs **(C)**. For comparison in **(B-C)**, 24hr data is historical and duplicated from *Ifnlr1*[flox/flox] samples presented in **Figure 9**. Where displayed, scale bar = 500µm, and where designated, dashed lines = LOD as set by naïve mice. Data points represent individual mice and are pooled from 2 independent experiments. Statistical significance was calculated by one-way ANOVA with Tukey's multiple comparisons **(A)** and Mann Whitney **(B-C)**, where ** = $p < 0.005$ and **** = $p < 0.0001$.

Discussion

Here, we report that bacterial microbiota induce an enteric IFN-λ response in IECs at

homeostasis (**Figures 1-4**). Although there are previous reports of basal, non-receptor-dependent

ISG expression in immortalized and primary cell lines (Hakim et al., 2018), the homeostatic

response that we report here is dependent on the IFN-λ receptor. Furthermore, we find this

response is independent of type I IFN signaling (**Figure 3**), indicating that IFN-λ signaling plays a

dominant and active role in the gastrointestinal epithelium. We also find minimal changes in ISG

expression within the spleen and MLN after ABX treatment, suggesting that homeostatic ISGs

are predominantly expressed in the intestine. These findings differ slightly from prior descriptions

of systemic type I IFN responses that are dependent on bacterial microbiota (Abt et al., 2012;

Bradley et al., 2019; Ganal et al., 2012; Steed et al., 2017; Stefan et al., 2020; Winkler et al.,

2020). However, differences in the specific tissues and cell types analyzed make it difficult to draw

direct comparisons across these studies. Therefore, we conclude that homeostatic ISGs are

substantially present in IECs, but do not dispute the prior findings that relatively low homeostatic

ISG expression induced by type I IFN plays an important role in extra-intestinal tissues and non-

epithelial cell types.

A prior study by Mahlakõiv et al. noted the presence of *Ifnl2/3* transcripts in CD45+ cells

within the stripped intestinal epithelium, but not the lamina propria, at homeostasis. We have

confirmed these findings and have extended them to show that this homeostatic expression of

Ifnl2/3, but not *Ifnb1*, is dependent on bacterial microbiota (**Figure 5**). However, we have been

unable to detect IFN-λ transcripts by RNA scope *in situ* hybridization in mice at homeostasis,

consistent with recently published data (Ingle et al., 2021). This suggests that the production of

IFN-λ is below the limit of detection by imaging or highly transient in nature. It is also unclear

which CD45+ cell type produces homeostatic IFN-λ. Swamy et al. showed that T cell receptor

stimulation led intraepithelial lymphocytes to produce IFN-λ (Swamy et al., 2015) and Mahlakõiv

et al. suggested that the primary producers of IFN-λ at steady-state are intraepithelial lymphocytes

due to the abundance of intraepithelial lymphocytes in the epithelial fraction. However, myeloid

cells also reside near the intestinal epithelium and can sample luminal contents by various

mechanisms (Chieppa et al., 2006; McDole et al., 2012; Niess et al., 2005). Although the cell type

that produces homeostatic IFN-λ is unknown, enrichment for *Ifnl2/3* in CD45+ cells within the

intestinal epithelial fraction suggests that proximity to bacterial stimuli may be a primary

determinant in this response. We suggest that these cells may be actively surveying the intestinal

epithelium to detect bacterial MAMPs. The specific CD45+ cell types responsible for producing

homeostatic IFN-λ will be a topic of interest for future studies.

We initially anticipated that the distribution of homeostatic ISGs would be uniform among

IECs. Instead, we found that this IFN-λ response is highly localized within enteric tissues.

Homeostatic ISGs are observed in a minority of small intestinal villi and are primarily present in

mature epithelium towards the villus tips (**Figure 6**). Likewise, homeostatic ISGs are present

within patches of the mature epithelium in the colon (**Figure S8**). The surprising finding of

localized ISGs in the ileum are supported by analysis of independently-generated scRNA-seq

datasets from mouse and human small intestinal IECs that depict expression of homeostatic ISGs

in a minority of cells with predominant expression in mature enterocytes (**Figure 7**).

The basis for localized ISG expression is unknown; however, it may reflect the distribution

of cells capable of sensing bacterial microbiota, distinct microenvironments within the

gastrointestinal tract, or qualitative differences in bacterial colonization. Given the results of our

data in **Figures 8** and **Figure S9**, we suggest that LPS administration, flagellin administration, or

fecal transplant can partially restore the expression of homeostatic ISGs in the small intestine.

This interpretation supports the concept that localized ISG-positive regions may be uniquely

exposed or responsive to a variety of bacterial MAMPs. Indeed, we find that MYD88 is required

for WT levels of homeostatic ISG expression in the small intestine (**Figure 3**). However, MYD88

is dispensable for homeostatic ISG expression in the colon, and TRIF is not required in either

small intestine or colon (**Figure 3**). These data suggest that the bacterial microbiota broadly

stimulates homeostatic IFN-λ through multiple, redundant PRRs. Furthermore, the presence of

localized *Ifit1* expression in ABX-treated mice following LPS administration (**Figure 8**) suggests

that localization is an intrinsic property of homeostatic ISG stimulation and is not likely to be due

to qualitative differences in bacterial colonization.

ISG localization may be indicative of regional differences in access of luminal bacterial

MAMPs to IFN-λ-producing cells. One host mechanism to limit bacterial interactions with the

intestinal epithelium is the presence of mucus layers (Atuma et al., 2001; Johansson et al., 2011).

Intriguingly, the single mucus layer in the small intestine is much less adherent than the mucus

layers present in the colon (Johansson et al., 2011), which might allow occasional direct bacterial

interactions with IECs or other cells near the intestinal epithelium. However, soluble components

from enteric bacteria may also readily diffuse through mucus layers. In this case, there may be

sporadic defects in tight junction proteins that are required to maintain the intestinal epithelium.

Tight junction remodeling is essential to maintain intestinal integrity during apoptosis and

extrusion of IECs that are regularly shed from the intestinal epithelium (Williams et al., 2015).

Future studies will be necessary to determine whether defects in epithelial barrier integrity during

extrusion events are linked to the local ISG responses that we observe and further delineation of

the factors that render specific regions "responsive" will be of great interest for follow-up studies.

The preceding findings (**Figure 4)** suggested that the homeostatic ISG response in IECs

would provide protection against IEC-tropic viruses, such as mRV. Although bacterial-associated,

IFN-independent mechanisms of mRV clearance have been reported (Shi et al., 2019; Zhang et

al., 2014), we found that the signature of homeostatic ISGs in ileum tissue included well-

characterized antiviral ISGs (**Figures 1-2**). To investigate whether these homeostatic ISGs

protect against MRV, we used *Ifnlr1*$^{\Delta IEC}$ mice that lack homeostatic ISGs (**Figure 4 and 6**) rather

than using ABX-treatment, which introduces pleiotropic effects on rotavirus infection (Uchiyama

et al., 2014) and dramatically increases transit time through the intestine (Baldridge et al., 2015).

Using *Ifnlr1*$^{\Delta IEC}$ mice, we found increase in IEC infection by mRV at early stages of infection

compared to *Ifnlr1*^{flox/flox} littermates (**Figure 9** and **Figure S10**). However, the protection offered

by IEC expression of *Ifnlr1* was lost by the middle and late stages of infection, consistent with the

ability of mRV to antagonize induction of IFN responses once infection is established (Arnold et

al., 2013). Our observations during initiation of infection may provide important context to

observations in other studies that report differing capacity for infection-induced IFN-λ to protect

against mRV infection (Lin et al., 2016; Pott et al., 2011). Ultimately, it is clear that prophylactic

administration of exogenous IFN-λ protects against mRV infection (Lin et al., 2016; Pott et al.,

2011; Van Winkle et al., 2020), providing precedent that homeostatic IFN-λ would also be

protective when induced by bacterial microbiota prior to infection.

Although we found that homeostatic ISGs provide protection during initiation of mRV

infection, it remains unclear how these localized ISG pockets impart this protection. Given our

findings in **Figure 8** and **Figure S9**, we suggest that these localized ISGs may be indicative of

locations that are particularly vulnerable to viral infection if ISGs were not present at the time of

viral exposure. However, alternative explanations for the protective effects that we observe are

also plausible, such as: i) an inability to detect the full magnitude of ISG expression by imaging,

or ii) an unknown temporal component to homeostatic ISG signaling that may be coincident with

durable ISG protein expression. Given the magnitude of signal amplification in RNAscope *in situ*

hybridization and the similarity of *Ifit1* expression in our imaging data to *Ifit1* expression in public

single-cell sequencing datasets, we find it unlikely that there is more widespread homeostatic ISG

expression below the limit of our detection by imaging. However, we do think an uncharacterized

temporal component of homeostatic ISG signaling is plausible, wherein individual villi may be

rapidly and transiently expressing homeostatic ISGs in response to sensing of bacterial

microbiota. This temporal model may also include a more durable ISG protein response that is

not fully concordant with expression of ISG transcripts. In sum, these findings indicate that

preexisting, homeostatic ISGs present in *Ifnlr1*-sufficient mice are protective during initiation of

mRV infection, but that endogenous IFN-λ does not reduce mRV burden in infected cells. These

data highlight the possibility that detection of bacterial microbiota in particularly exposed areas

may preemptively activate homeostatic ISGs as a form of anticipatory immunity to protect the

intestinal epithelium from enteric viruses.

Methods

Mice

All mice were bred using the C57BL/6 background and used within the age of 8-12 weeks; C57BL/6J mice (stock # 000664) were purchased from Jackson Laboratories (Bar Harbor, ME) and used as wild-type. Genetically modified mice included *Ifnlr1$^{-/-}$* and *Ifnlr1$^{flox/flox}$* (generated from *Ifnlr1$^{tm1a(EUCOMM)Wtsi}$* as published (Baldridge et al., 2017)), *Ifnar1$^{-/-}$* (B6.129.Ifnar1^{tm1}), *Trif$^{-/-}$* (JAX C57BL/6J-*Ticam1^{Lps2}*/J, stock #005037), *Myd88$^{-/-}$* (JAX B6.129P2(SJL)-*Myd88$^{tm1.1Defr}$*/J, stock #009088), *Irf3$^{-/-}$* (B6.129S/SvEv-Bcl2l12/Irf3^{tm1Ttg}), *Irf7$^{-/}$* (B6.129P2-Irf7tm1Ttg/TtgRbrc), *Stat1$^{-/-}$* (B6.129.-Stat1^{tm1Dlv}), and Villin-cre (B6.Cg-Tg(Vil1-cre)997Gum/J) mice. *Ifnlr1$^{-/-}$* and *Ifnar1$^{-/-}$* mice were bred to *Ifnlr1^{Het}*/*Ifnar1^{Het}* mice to generate littermate *Ifnlr1^{Het}*/*Ifnar1^{Het}*, *Ifnlr1^{Het}*/*Ifnar1^{KO}*, *Ifnlr1^{KO}*/*Ifnar1^{Het}*, *Ifnlr1^{KO}*/*Ifnar1^{KO}* offspring.

All mice were maintained in specific-pathogen-free facilities at Oregon Health & Science University (OHSU) and Washington University in St. Louis (WUSTL). Animal protocols were approved by the Institutional Animal Care and Use Committee at OHSU (protocol #IP00000228) and WUSTL (protocol #20190162) in accordance with standards provided in the *Animal Welfare Act*.

For all experiments, mice were allocated into experimental groups based on genotype with equal representation of individual litters and equal sex ratios.

Mouse Treatments

Mice were administered an *ad libitum* antibiotic cocktail consisting of: 1 g/L ampicillin, 1 g/L metronidazole, 1 g/L neomycin, and 0.5 g/L vancomycin (Sigma, St. Louis, MO) in autoclaved H_2O (OHSU) or in 20 mg/mL grape Kool-Aid (Kraft Foods, Northfield, IL) (WUSTL). Sterile H_2O (OHSU) or Kool-Aid (WUSTL) alone was used as a control. Mice were maintained on antibiotics or control for 2 weeks prior to harvest.

Recombinant IFN-λ was provided by Bristol-Myers Squibb (New York City, NY) as a monomeric conjugate comprised of 20kDa linear PEG attached to the amino-terminus of murine

IFN-λ. Mice were injected intraperitoneally with IFN-λ or an equal volume of PBS vehicle as

indicated in figure legends at the indicated time prior to analysis.

Mice were stimulated with of 100µg of the synthetic dsRNA analogue, poly I:C (R&D,

#4287) or PBS by intraperitoneal injection in a 200µL volume, 2 hours prior to harvest.

25µg of the bacterial product lipopolysaccharide (Sigma #L4391), flagellin (Invivogen #tlrl-

bsfla; from *Bacillus subtilis*) or CpG (Invivogen #tlrl-1585; Class A CpG oligonucleotide) were

perorally administered to mice in 25µL of sterile PBS. Mice were treated on days 15 and 16 of

antibiotic treatment or H_2O control prior to harvest on day 17.

For transplantation of fecal material, antibiotic treatment was stopped and mice were fed

25uL of fecal mixture by pipet for two consecutive days. Fecal mixture was prepared by collecting

fecal samples from control mice; a single stool pellet was resuspended in 200uL of sterile PBS,

stool was broken apart by pipetting, and large particulate was allowed to settle for several minutes

prior to administration.

Cell Isolation

Epithelial fractions were prepared by non-enzymatic dissociation as previously described

(Nice et al., 2016). Briefly, mouse ileum was opened longitudinally and agitated by shaking in

stripping buffer (10% bovine calf serum, 15 mM HEPES, 5 mM EDTA, and 5 mM dithiothreitol

[DTT] in PBS) for 20 min at 37°C. Lamina propria fractions were prepared by enzymatic digestion

and dissociation with the Lamina Propria Dissociation Kit and GentleMacs Dissociator (Miltenyi

Biotec, Bergisch Gladbach, Germany). Dissociated cells were collected for use in qPCR analysis,

flow cytometry, and magnet enrichment.

Rotavirus infection of mice

Mouse rotavirus (EC strain) was graciously provided by Andrew Gewirtz (Georgia State

University). Viral stocks were generated by inoculating 4- to 6-day-old neonatal BALB/c mice and

harvesting the entire gastrointestinal tract upon presentation of diarrheal symptoms 4 to 7 days

later. Intestines were freeze-and-thawed, suspended in PBS, and homogenized in a bead beater

using 1.0-mm zirconia-silica beads (BioSpec Products). These homogenates were clarified of

debris, aliquoted, and stored at -70°C. The 50% shedding dose (SD50) was determined by

inoculation of 10-fold serial dilutions in adult C57BL/6J mice. For stool time-course studies, mice

were inoculated by peroral route with 100 SD50 and a single stool pellet was collected daily for

viral quantitation by qPCR. For protection studies, mice were inoculated by intragastric gavage

with 5000 SD50, and ileum was isolated and mechanically stripped 12- and 24-hours later for

quantitation of viral burden by qPCR and flow cytometry.

RNA isolation, rDNA isolation, qPCR, and analysis

RNA from tissue and stripped IECs was isolated with TRIzol (Life Technologies, Carlsbad,

CA) according to the manufacturer's protocol. RNA from magnet-enriched cells was purified by

Zymo *Quick*-RNA Viral Kit (Zymo Research, Irvine, CA). The larger of either 1μg of RNA or 5μL

of RNA were used as a template for cDNA synthesis by the ImProm-II reverse transcriptase

system (Promega, Madison, WI) after DNA contamination was removed with the DNAfree kit (Life

Technologies). 16S bacterial rDNA was isolated from stool and intestinal contents with a

ZymoBIOMICS DNA kit (Zymo Research, Irvine, CA) kit. Quantitative PCR was performed using

PerfeCTa qPCR FastMix II (QuantaBio, Beverly, MA) and the absolute quantities of transcript

were determined using standard curves composed of gBlocks (IDT) containing target sequences.

Absolute copy numbers from tissue samples were normalized to the housekeeping gene,

ribosomal protein S29 (*Rps29*). Taqman assays for selected genes were ordered from IDT

(Coralville, IA): *Rps29* (Mm.PT.58.21577577), *Ifit1* (Mm.PT.58.32674307), *Oas1a*

(Mm.PT.58.30459792), *Mx2* (Mm.PT.58.11386814), *Stat1* (Mm.PT.58.23792152), *Isg15*

(Mm.PT.58.41476392.g). Taqman assays for *Ifnl2/3* and *Ifnb1* were designed previously (Van

Winkle et al., 2020) and consisted of the following primer-probe sequences: *Ifnl2/3* (Primer 1 –

GTTCTCCCAGACCTTCAGG, Primer 2 – CCTGGGACCTGAAGCAG, Probe –

CCTTGCAGGCTGAGGTGGC); *Ifnb1* (Primer 1 – CTCCAGCTCCAAGAAAGGAC, Primer 2 –

GCCCTGTAGGTGAGGTTGAT, Probe – CAGGAGCTCCTGGAGCAGCTGA). Murine rotavirus

was detected using Taqman primer-probe sets specific for 422-521 of GeneBank sequence

DQ391187 as previously described (Fenaux et al., 2006) with the following sequences: Primer 1

– GTTCGTTGTGCCTCATTCG, Primer 2 – TCGGAACGTACTTCTGGAC, Probe –

AGGAATGCTTCAGCGCTG; and universal bacterial 16S rDNA was detected using Taqman

primer-probe sets with previously designed sequences (Nadkarni et al., 2002): Primer 1 –

GGACTACCAGGGTATCTAATCCTGTT, Primer 2 – TCCTACGGGAGGCAGCAGT, Probe –

CGTATTACCGCGGCTGCTGGCAC.

RNAscope

Swiss rolls of intestinal tissue were fixed in 10% neutral-buffered formalin for 18-24hr and

paraffin-embedded. Tissue sections (5µm) were cut and maintained at room temperature with

desiccant until staining. RNA *in situ* hybridization was performed using the RNAscope Multiplex

Fluorescent v2 kit (Advanced Cell Diagnostics, Newark, CA) per protocol guidelines. Staining with

anti-sense probes for detection of *Ifit1* (ACD, #500071-C2), *Usp18* (ACD, #524651-C1) and MRV

(ACD, #1030611-C1) was performed using ACDBio protocols and reagents. MRV probes were

designed to target 2-1683 of DQ391187 against NSP3, VP7, and NP4. Slides were stained with

DAPI and mounted with ProLong Gold antifade reagent (ThermoFisher), and imaged using a

Zeiss ApoTome2 on an Axio Imager, with a Zeiss AxioCam 506 (Zeiss).

Collected images were batch processed in Zeiss Zen 3.1 using unstained control slides to

set background values and quantified using ImageJ. Area of *Ifit1* was determined by positive *Ifit1*

fluorescent area relative to the total fluorescent area of the tissue section. *Ifit1*+ mRV-infected

cells were defined as mRV+ particles with greater than 5µm area with a maximum *Ifit1* intensity

greater than 10% above background. These *Ifit1*+ cells were then divided by the total number

mRV+ cells to determine the percentage of *Ifit1*+ mRV-infected cells.

Flow Cytometry and Magnet Enrichment

Dissociated cells were collected and stained for flow cytometry. Cells were stained with

Zombie Aqua viability dye (BioLegend), Fc receptor-blocking antibody (CD16/CD32; BioLegend),

anti-EpCAM (clone G8.8; BioLegend), and anti-CD45 (clone 30-F11; BioLegend). For analysis of

murine rotavirus infection, cells were stained with anti-rotavirus (polyclonal; ThermoFisher, #PA1-

7241) followed by goat anti-rabbit secondary (ThermoFisher). All data were analyzed using

FlowJo software (BD Biosciences). Gates were set based on unstained and single-fluorophore

stains. IECs were selected by gating on live, EpCAM-positive, CD45-negative cells. Gates for

murine rotavirus infection were set based on naïve samples.

Where indicated, dissociated cells were enriched using MojoSort Mouse anti-APC

Nanobeads (BioLegend, #480072) after flow cytometry staining for anti-EpCAM and anti-CD45

with APC fluorophores by following manufacturer protocols.

RNA sequencing and expression analysis

Wild-type C57BL/6J or *Ifnlr1*^{-/-} mice were administered *ad libitum* Kool-aid or ABX for two

weeks, or wild-type mice were administered 25µg recombinant IFN-λ for one day, then ileal

segments lacking Peyer's patches were harvested and RNA sequencing was performed as prior

(Park et al., 2016). mRNA from ilea was purified with oligo-dT beads (Invitrogen, Carlsbad, CA)

and cDNA was synthesized using a custom oligo-dT primer containing a barcode and adaptor-

linker sequence, degradation of RNA-DNA hybrid following single-strand synthesis, and ligation

of a second sequencing linker with T4 ligase (New England Biolabs, Ipswich, MA). These

reactions were cleaned up by solid phase reversible immobilization (SPRI), followed by

enrichment by PCR and further SPRI to yield strand-specific RNA-seq libraries. Libraries were

sequenced with an Illumina HiSeq 2500 with three to four mice were included in each group.

Samples were demultiplexed with second mate, reads were aligned with STAR aligner and then

counted with HT-Seq. Differentially expressed genes were identified using DESeq2 (Love et al.,

2014) based on cutoffs of 2-fold change, and an inclusive p-value < 0.5. Standard gene set

enrichment analysis was performed to identify enrichments in IFN-λ response genes. RNA-seq

data were uploaded to the European Nucleotide Archive (accession #: PRJEB43446).

16S rRNA gene Illumina sequencing and analysis

911   For sequencing of the 16S rRNA gene, primer selection and PCRs were performed as

912 described previously (Caporaso et al., 2011). Briefly, each sample was amplified in triplicate with

913 Golay-barcoded primers specific for the V4 region (F515/R806), combined, and confirmed by gel

914 electrophoresis. PCR reactions contained 18.8µL RNase/DNase-free water, 2.5µL of 10X High

915 Fidelity PCR Buffer (Invitrogen, 11304-102), 0.5µL of 10 mM dNTPs, 1µL 50 of mM MgSO4, 0.5µL

916 each of forward and reverse primers (10 µM final concentration), 0.1µL of Platinum High Fidelity

917 Taq (Invitrogen, 11304-102), and 1.0µL genomic DNA. Reactions were held at 94°C for 2 min to

918 denature the DNA, with amplification proceeding for 26 cycles at 94°C for 15 s, 50°C for 30 s, and

919 68°C for 30 s; a final extension of 2 min at 68°C was added to ensure complete amplification.

920 Amplicons were pooled and purified with 0.6x Agencourt AMPure XP beads (Beckman-Coulter,

921 A63882) according to the manufacturer's instructions. The final pooled samples, along with

922 aliquots of the three sequencing primers, were sent to the DNA Sequencing Innovation Lab

923 (Washington University School of Medicine) for sequencing by the 2 X 250bp protocol with the

924 Illumina MiSeq platform.

925   Read quality control and the resolution of amplicon sequence variants were performed in

926 R with DADA2 (Callahan et al., 2016). Non-bacterial amplicon sequence variants were filtered

927 out. The remaining reads were assigned taxonomy using the Ribosomal Database Project (RDP

928 trainset 16/release 11.5) 16S rRNA gene sequence database (Cole et al., 2014). Ecological

929 analyses, such as alpha-diversity (richness, Shannon diversity) and beta-diversity analyses

930 (UniFrac distances), were performed using PhyloSeq and additional R packages (McMurdie and

931 Holmes, 2013). 16S sequencing data have been uploaded to the European Nucleotide Archive

932 (accession #: PRJEB43446).

933 **Single-cell RNA Sequencing Analyses**

934   A mouse single-cell RNA sequencing dataset generated by Haber et al. was accessed

935 from NCBI's Gene Expression Omnibus (GEO), accession #: GSE92332. A human pediatric

936 single-cell RNA sequencing dataset generated by Elmentaite et al. was accessed in processed

form from The Gut Cell Atlas, with raw data also available on EMBL-EBI Array Express, accession

#: E-MTAB-8901. Files were analyzed in R using Seurat (v. 3.2.2) (Stuart and Butler et al., 2019).

For the Haber et al. dataset, UMI counts were normalized to counts per million, log2 transformed,

and homeostatic ISGs were selected for analysis. Data was collated by previously annotated cell-

type and proportion of cells expressing each individual ISG was calculated. For Elmentaite et al,

data was restricted to healthy controls and then collated by previously annotated cell-type to

determine the proportion of cells expressing individual ISGs.

Statistical Analyses

Sample size estimation was performed based on historical data. Data were analyzed with

Prism software (GraphPad Prism Software), with specified tests as noted in the figure legends.

Data availability.

RNA sequencing data obtained in this study have been deposited in the European

Nucleotide Archive (accession #: PRJEB43446).

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Author Contributions

Conceptualization, J.A.V., M.T.B., and T.J.N.; Methodology, J.A.V., M.T.B., and T.J.N.; Investigation, J.A.V., S.T.P., E.A.K., M.W., H.I., R.R., C.D., D.C., A.W., M.A., S.L., and T.J.N.; Writing – Original Draft, J.A.V.; Writing – Review & Editing, J.A.V., M.T.B., and T.J.N.; Visualization, J.A.V.; Supervision, M.T.B. and T.J.N.; Project Administration, L.L., M.T.B., and T.J.N.; Funding Acquisition, M.T.B. and T.J.N.

Disclosure

We declare no competing interests.

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