Transcriptomic analysis of sorted lung cells revealed a proviral activity of the NF-κB pathway towards SARS-CoV-2

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Abstract

Investigations of cellular responses to viral infection are commonly performed on mixed populations of infected and uninfected cells or using single-cell RNA sequencing, leading to inaccurate and low-resolution gene expression interpretations. Here, we performed deep polyA$^+$ transcriptome analyses and novel RNA profiling of SARS-CoV-2 infected lung epithelial cells, sorted based on the expression of the viral spike (S) protein. Infection caused a massive reduction in mRNAs and lncRNAs, including transcripts coding for antiviral factors, such as interferons (IFN). This absence of IFN signaling probably explained the poor transcriptomic response of bystander cells co-cultured with S$^+$ ones. NF-κB pathway and the inflammatory response escaped the global shutoff in S$^+$ cells. Functional investigations revealed the proviral function of the NF-κB pathway and the antiviral activity of CYLD, a negative regulator of the pathway. Thus, our transcriptomic analysis on sorted cells revealed additional genes that modulate SARS-CoV-2 replication in lung cells.

Introduction

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), which emerged in Wuhan, China, at the end of 2019 is the causative agent of Coronavirus Disease-2019 (COVID-19). Infection may be asymptomatic or it may cause a wide spectrum of symptoms, from mild upper respiratory tract infection to life-threatening pneumonia [1]. Viral replication is not limited to the respiratory tract, but rather occurs in numerous organs, including the blood, heart, vessels, intestines, brain and kidneys [2]. Severity of the disease correlates with an excessive pro-inflammatory immune response [3–5], which may be responsible for the symptoms observed in patients. Inflammation is a vital defense mechanism that is required to initiate an adaptive immune response *via* the recruitment and activation of immune cells. However, the non-resolution of acute inflammation leads to tissue damage [6].

SARS-CoV-2 infection is also characterized by a suppression of interferon (IFN) response in infected cells [7]. IFNs are potent antiviral cytokines secreted by various cell types. The IFN response is initiated by the recognition of viral nucleic acids by cellular receptors. Once activated, these receptors recruit adaptor proteins and kinases that trigger the nuclear translocation of the transcription factors IRF3 and NF-κB, which, in turn, induce the rapid expression of IFNs and proinflammatory cytokines [8]. In particular, type I (IFNα and β) and type III (IFN-λ1 and IFN-λ2/3) IFNs play crucial roles in protecting infected and neighboring cells from virus replication and spread. Once secreted, they will signal in a paracrine and autocrine manner through their receptors, activating a signaling cascade that induces the expression of up to 2000 IFN-stimulated genes (ISGs). Their concerted actions establish the antiviral state by targeting specific stages of viral replication [9,10]. SARS-CoV-2 overcomes IFN responses *via* a wide array of mechanisms involving viral proteins [11–13] and a virus-derived microRNA [14,15]. These viral strategies likely contribute to an impaired IFN response in COVID-19 patients [16] and, consequently, high levels of viral replication.

Several transcriptomic analyses of human cells infected with SARS-CoV-2 have been performed to describe the perturbation of cellular pathways induced by infection, using several cellular models, such as human cells derived from lung, bronchial or colorectal tissue [17–19], as well as post-mortem lung samples of COVID-19 patients [17] and bronchoalveolar lavage fluids (BALF) from patients [20]. These genome-wide investigations of host cellular responses to SARS-CoV-2 infection were performed exclusively using bulk RNA-sequencing (RNA-seq) technologies, *i.e.* by analyzing gene perturbations in mixed populations of infected and uninfected cells. Previous studies on Zika virus infected cells have estimated that only 10% of the repressed and about 30% of the induced genes can be identified in a mixed population containing around one third of infected cells [21]. Bulk transcriptome signals are thus partly drawn into noise background, rendering impossible to efficiently and exhaustively portray the full variation of the host transcripts. The perturbation of cellular responses in SARS-CoV-2 infected and bystander cells have also been analyzed using single-cell (sc) RNA-seq methods. Such studies were performed in a variety of cellular models, including COVID-relevant ones, such as human intestinal organoids [22], human tracheal-bronchial epithelial cells [23,24], human lung cell lines [19] and BALF from patients [25]. However, the technical variability, high noise and massive sample size of scRNA-seq data raise challenges in analyzing the total number of differentially expressed genes (DEGs) [26] out of a limited list of only 1000 to 3000 most expressed genes in individual cells. The balance between the number of cells to be sequenced and the sequencing depth to extract the maximum amount of information from the experiment also affects the results [27].

Moreover, most bulk and single-cell transcriptomic studies performed to investigate the cellular response to SARS-CoV-2 focused on the expression of the referenced coding genome, largely ignoring non-coding and unannotated information, mainly represented by long non-coding RNAs (lncRNAs). These RNAs, which are at least 200 nucleotides (nt) in length, are of specific interest since they play fundamental roles in cellular identity, development and disease progression through epigenetic or post-transcriptional regulation of mRNA expression [28]. Combined RNA-seq data from multiple sources reported over 20 000 lncRNA loci in the human genome [29]. Future studies will plausibly increase this number, since lncRNAs are more cell-type specific [30] and expressed at lower levels than mRNAs [29]. Most of them are independently transcribed by RNA polymerase II and, like protein-coding RNAs, they can be 5'-capped, polyadenylated, and spliced by the cellular machinery [31]. Increasing evidence suggests the involvement of lncRNAs in virus-host interactions and antiviral immunity [32–34]. Current efforts focus on uncovering unannotated RNAs, which could encompass a variety of RNA biotypes, from rare mRNA isoforms to unannotated intergenic long noncoding RNAs, using reference-based approach with the human gencode annotation [35]. However, so far, none of these strategies have been engaged to dissect virus-cell interactions.

Here, we investigated the coding and non-coding transcriptional landscape of lung cells infected with SARS-CoV-2, sorted according to the expression of the viral protein spike (S). Our deep transcriptome analysis using annotated RNA genes and reference-based RNA profiler uncovered

pathways that are directly affected by infection and identified coding and non-coding genes contributing

to an optimal SARS-CoV-2 replication.

Results

Transcriptional landscapes of SARS-CoV-2-infected and bystander lung cells uncovered a global

expression shutoff

To analyze transcriptomic changes in infected and bystander cells, human alveolar basal epithelial

carcinoma cells (A549) stably expressing the viral receptor ACE2 (A549-ACE2) were infected with a

MOI of 1 for 24 hours, fixed, stained intracellularly using antibodies against S proteins and sorted into

S-positive (infected cells, S$^+$) and S-negative (bystander, S$^-$) populations (Fig. 1A and 1B). Around 15%

of A549-ACE2 cells were positive for S protein (Fig. 1B). Cells negative for S protein represent either

uninfected cells or cells at an early stage of infection, prior to viral protein production. Mock-infected

cells served as negative controls. The experiment was performed twice independently in triplicates.

PolyA+ RNAs were isolated from mock-infected, S$^+$ and S$^-$ cells. Around 85% of the total reads mapped

to the viral genome in S$^+$ cells, while less than 5% of the total reads aligned with the viral genome in S$^-$

cells (Fig. 1C), validating our sorting approach. The large dominance of viral reads over cellular reads

illustrates the ability of the virus to hijack the cellular machinery for its replication. A similar proportion

of SARS-CoV-2 reads in the RNA pool was previously reported in lung epithelial carcinoma Calu-3

cells infected for 8 hours [18]. These differences in the representation of viral RNA between S$^+$ and S$^-$

cells altered the robustness of the statistical analysis used to identify DEGs. To overcome this limitation,

the samples were depleted of viral RNAs (vRNAs) using a set of oligonucleotide probes covering the

entire viral genome (Fig. 1A). Following depletion, viral reads represented between 0,01 and 2,8% of

the total reads both in S$^+$ and S$^-$ cells (Fig. 1C).

Coding and long non-coding genes were identified using gencode annotation (v32), while

unannotated RNAs were recovered with Scallop assembler [35] (Fig. 1D-F, Fig. S1A-B and tables S1-

S3). Principal component analysis (PCA) of polyA+ transcriptomes segregated S$^+$ cells from S$^-$ and

mock-infected ones (Fig. 1D). This segregation based on S expression represented around 92% of the

transcriptomic differences between the samples (Fig. 1D). Only subtle differences (2,5%) distinguished

bystander and mock-infected cells (Fig. 1D), suggesting that the transcriptional landscapes of these 2

cell populations were very similar. An absence of response of S$^-$ cells was unexpected since cytokines,

which are commonly secreted by virally infected cells, activate an antiviral state in bystander cells

through surface receptors.

Analysis of gene expression allowed identification of thousands of annotated coding and non-

coding genes that were differentially expressed (absolute fold change $\geq$2, p-value < 0.05) in S$^+$ cells as

compared to S$^-$ or mock-infected ones (Fig. 1E-F and tables S1-S3). We identified around 13 times more

downregulated coding genes than upregulated ones in S$^+$ cells (Fig. 1E-F), suggesting that infection

triggers a massive, but incomplete, shutoff of gene expression and/or degradation of host RNAs. Among
the top upregulated coding genes in S^{+} cells, we confirmed candidates revealed by previous analyses
performed in non-sorted non-vRNA-depleted A549-ACE2 cells, such as CXCL8, CCL20, IL6 and
NFKB1 [17,36,37], but also novel highly significant candidates, including IL32 and ITGAM (table S1).
The genes encoding IFN type I and type III were not upregulated in S^{+} cells, as compared to mock-
infected cells (Fig. S1C). Accordingly, ISGs were not upregulated either in S^{+} cells. This absence of
innate immune response in infected cells agrees with previous analyses performed in mixed population
of A549-ACE2 cells infected with SARS-CoV-2 [17,36,37]. Such absence of innate response reflects
the ability of the virus to potently inhibit the IFN response *via* numerous mechanisms in human cells
[12]. Around 1260 annotated lncRNAs were downregulated in S^{+} cells as compared to mock-infected
cells, and 184 were upregulated (Fig. 1E-F and table S2). RFPL3S, ADIRF-AS1 and WAKMAR2 were
among the top 15 upregulated lncRNAs in S^{+} cells. RFPL3S and ADIRF-AS1 have no known functions,
whereas WAKMAR2 restricts NF-kB-induced production of inflammatory chemokines in human
keratinocytes [38]. Among the top downregulated lncRNAs, we identified HOXA-AS2 and NKILA,
which are negative regulators of NF-kB signaling, in endothelial cells and breast cancer cell lines,
respectively [39,40]. Altered expression of WAKMAR2, HOXA-AS2 and NKILA in infected cells
could thus play a role in viral-associated inflammation. From the 1400 unannotated transcripts we
detected using Scallop assembler [35], around 800 unannotated polyA+ transcripts were also
differentially expressed in S+ cells as compared to S[-] ones (Fig. 1E-F and table S3).

In agreement with the PCA (Fig. 1D), volcano plots and heat maps revealed that S^{-} bystander cells
and mock-infected control cells exhibited very similar transcriptomic profiles (Fig. 1E-1F and Fig. S1A-
S1B). Only around 170 polyA+ transcripts were differentially expressed in S^{-} cells as compared to
mock-infected ones (Fig. 1E and tables S1-S3). As a comparison, over 13000 DEGs were identified in
S[+] as compared to mock-infected cells (Fig. 1E and tables S1-S3). These analyses further suggest that
S+ cells present none or very little paracrine signaling response. Among the 69 coding genes that were
upregulated in S^{-} cells as compared to mock-infected, 29 were also upregulated in S^{+} cells (Fig. S1B
and table S3). Some of these common genes were inflammatory genes, such as IL32, IL6 and CCL20.
Among the 39 upregulated coding genes that were unique to S^{-} cells, 16 were ISGs (examples include
MX1, APOL1 and IFI6). The expression of these inflammatory genes and ISGs in bystander cells could
be induced early in infection, prior to the production of S protein.

Our approach reveals that SARS-CoV-2 infection triggers a major down-regulation of gene
expression in A549-ACE2 cells. It also shows that S^{-} cells do not exhibit a strong transcriptional
signature despite being cultured with S^{+} cells, suggesting the absence of an efficient paracrine
communication.

Separating lung cells based on the expression of the viral S protein improved discovery of DEGs

To compare our differential deep analyses with known datasets, we analyze publicly available
polyA+ RNA-seq raw data of unsorted A549-ACE2 infected with SARS-CoV-2 at a MOI of 0.2 [17].
Viral reads represented around 50% of the total number of reads in these unsorted bulk population of
cells [17], which was expectedly less than in A549-ACE2 cells positive for S (Fig. 1C). The 2 analyses
shared 150 upregulated protein-coding genes and 238 downregulated ones (Fig. 2A, table S4). The vast
majority (about 80%) of the downregulated mRNAs that we identified were classified as 'unchanged'
in the analysis of unsorted cells (Fig. 2A, table S4). Thus, sorting cells based on S expression and
depleting viral RNA allowed the identification of over 30 times more downregulated coding genes than
in unsorted cells (Fig. 2A, table S4). The poor sensibility of analysis of mixed cell population in
detecting downregulated genes is likely due to the large proportion of non-infected cells, in which the
majority of genes remained normally expressed, thus masking any decrease of gene expression in the
pool of infected cells. Indeed, an artificial reconstruction of a mixed cell population (80% S$^-$ and 20%
S$^+$) supports this hypothesis (Fig. S2). About 41% of the upregulated protein-coding genes and 16% of
downregulated ones that we identified were not detected in conventional RNA-seq analysis of mixed
populations [17]. This comparison highlights the accuracy and the depth of our analysis.

To validate the sorting approach combined with vRNA-depletion, we compared mRNA
abundances of a few DEGs in a bulk population of cells infected with SARS-CoV-2 for 24 hours, as
well as in sorted S$^+$ and bystander S$^-$ cells infected in the same condition. As expected, S+ cells produced
approximately 200-fold more intracellular viral RNAs than did S$^-$ cells (Fig. 2B). These qPCR analyses
confirm that some S$^-$ cells are at an early stage of viral replication, prior to viral protein expression (Fig.
1B). We included in the analysis three coding transcripts (IL32, ITGAM and TRAF1), two lncRNAs
(WAKMAR2 and AL132990.1) and one unannotated transcript (XLOC_007519) that were identified
amongst the most upregulated RNAs in S$^+$ A549-ACE2 cells (Fig. 2C, S3A, S3B and tables S1-S3). The
abundance of IL32 mRNA did not increase significantly in the infected bulk population, as compared
to mock-infected cells (Fig. 2C). By contrast, IL32 mRNA levels increased around 30-fold in S$^+$ cells,
compared to those in mock-infected cells (Fig. 2C). This difference explains why IL32 was not identified
as an up-regulated gene in previous RNA-seq analysis performed in mixed population of infected A549-
ACE2 cells [17,36]. Similarly, the expression of ITGAM, TRAF1, WAKMAR2, AL132990.1 and
XLOC_007519 showed a modest increase in the bulk population and a significant increase in S$^+$ cells,
as compared to mock-infected cells (Fig. 2C and S3B). The decreased expression of transcripts
identified as top downregulated hits in the RNA-seq analysis of S+ cells, such as the coding transcripts
FEN1 and SNRPF, the lncRNAs AC016747.1, DANCR and TP53TG1, as well as the unannotated RNA
XLOC_049236 (Fig. 2D, S3A and S3C), was significantly more pronounced in S$^+$ cells than in the
mixed population of cells, when compared to mock-infected cells (Fig. 2D and S3C). Analysis of RNA
abundances in sorted cells thus highlighted the increased accuracy of our approach, compared to
classical methods, in detecting up- and down- regulated genes.

To identify pathways affected by infection in A549-ACE2 cells, we performed Gene Ontology
(GO) terms and KEGG pathway enrichment analysis on the upregulated coding genes in S^+ cells, as
compared to mock-infected cells (Fig. 2E). We observed a significant enrichment in several
inflammatory signaling pathways, including TNF and NF-κB signatures, which were previously
identified in bulk transcriptomic analysis of infected A549 and Calu-3 cells [36,37] and in scRNA-seq
analysis of infected colon and ileum organoids [22]. Members of the superfamily of TNF proteins are
multifunctional proinflammatory cytokines. NF-κB plays an important role in promoting inflammation,
as well as regulating cell proliferation and survival [41]. Activation of NF-κB is one of the signals
transduced by the TNF-superfamily members [42]. These inflammatory signatures are also consistent
with those observed in peripheral blood immune cells of severe or critical COVID-19 patients [16].
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Inflammatory cytokines, but not IFNs, are produced and secreted by infected cells.
We wondered whether the underwhelming response of the bystander S^- cell population could be
explained by a defect in paracrine communication between S^+ and S^- cells. Despite being present in high
abundance in S^+ cells as compared to mock-infected cells (table S1 and Fig. 2E), inflammatory cytokine
transcripts may not be translated. Indeed, initiation of translation seems to be impaired in SARS-CoV-
2 infected cells via two potential mechanisms: acceleration of cytosolic cellular mRNA degradation [18]
and blockade of the mRNA entry channel of ribosomes by the viral protein Nsp1 [43–45]. Moreover,
viral proteins Nsp8 and Nsp9 disrupt protein secretion in HEK293T cells [43], raising the possibility
that cytokines are produced but not secreted by S^+ cells.
To investigate these possibilities, we selected 5 inflammatory chemokines (IL-6, CXCL1, CCL2,
CXCL8/IL-8 and CCL20) whose expression was upregulated in S^+ cells upon infection (table S1) and
quantified their intracellular and secreted levels in lysates and supernatants of A549-ACE2 cells infected
for 24 hours (Fig. 3A-B). For comparison, A549-ACE2 cells transfected with the immuno-stimulant
poly(I:C) were included in the analysis. In a mixed population of S^+ and S^- cells, mRNAs of these 5
cytokines were significantly more abundant than in mock-infected cells (Fig. S4A), in agreement with
the increased levels of mRNAs detected in S^+ cells by RNA-seq (table S1). Their expression was also
induced by poly(I:C) (Fig. S4A). All five cytokines were expressed at detectable levels in cells
stimulated by viral infection or poly(I:C) (Fig. 3A), indicating that infection does not hamper the
translation of the corresponding mRNAs. As expected, based on their mRNA abundance (Fig. S3A),
intracellular levels of IL-6, CCL2 and IL-8 significantly increased upon poly(I:C) stimulation as
compared to unstimulated control cells (Fig. 3A). By contrast, despite being induced by poly(I:C)
downstream signaling (Fig. S4A), CXCL1 and CCL20 levels were comparable in stimulated and
unstimulated cells (Fig. 3A). This could be due to a short protein half-life, protein degradation and/or
rapid secretion. Intracellular levels of CXCL1 increased significantly upon infection compared to mock-
infected cells (Fig. 3A) while intracellular levels of IL-6, CCL2, IL-8 and CCL20 were similar in both
conditions. However, all 5 cytokines were significantly more secreted by infected cells than mock-

infected ones (Fig. 3B). Infected cells secreted even more IL-6 and CXCL1 than cells stimulated by
poly(I:C) (Fig. 3B). Thus, inflammatory cytokines are expressed and secreted by A549-ACE2 cells
infected with SARS-CoV-2, which is in line with the excessive inflammatory response reported in other
cellular models [17,19,22,24,37] and characteristic of severe cases of COVID-19 [3–5]. The absence of
paracrine communication that was revealed by the RNA-seq analysis of S$^-$ cells (Fig. 1) is thus unlikely
to be linked to a defect in cytokine expression and secretion in S$^+$ cells. It may be explained by the
apparent absence of IFN signaling. Indeed, and consistently with prior RNA-seq studies conducted in
bulk A549-ACE2 cells [17,36,37], we failed to observe a significant IFN- signature in S$^+$ cells (table
S1, Fig. 2E and Fig. S1D), despite a robust induction of NF-κB activity (Fig. 2E).

To validate this further, we compared the level of IFNβ, IFN-λ1 and IFN-λ2/3 transcripts in
A549-ACE2 cells infected for 24 hours. Cells treated with poly(I:C) were used as positive controls for
IFN production. Cells infected with Measles virus (MeV), a respiratory RNA virus known to trigger an
IFN response in A549 cells [46], were also included in the analysis for comparison. Flow cytometry
analysis identified on average 20 to 30% of cells positive for viral proteins upon SARS-CoV-2 or MeV
infection (Fig. 3C). As expected, the level of IFNβ, IFN-λ1 and IFN-λ2/3 transcripts increased in
poly(I:C)-treated cells compared to cells exposed to the transfecting reagent lipofectamine only (Fig.
S3B). Amounts of IFNβ, IFN-λ1 and IFN-λ2/3 transcripts were several orders of magnitude higher in
MeV-infected cells than in SARS-CoV-2 infected cells (Fig. S4B). Consistently with mRNA level
analysis (Fig. S4B), around 200 and 850 pg/ml of IFNβ were secreted by MeV-infected cells and
poly(I:C)-treated cells, respectively (Fig. 3D). SARS-CoV-2 infected cells secreted as little as 50 pg/ml
of IFNβ, which was similar to the quantity secreted by mock-infected cells and lipofectamine-exposed
cells, likely representing baseline levels (Fig. 3D). MeV infected cells secreted around 1000 pg/ml of
IFN-λ1 and 5000 pg/ml of IFN-λ2/3 while no IFN-λ was detected in the supernatant of SARS-CoV-2
infected cells (Fig. 3D). This baseline level of IFN type-I secretion and absence of IFN type-III release
by SARS-CoV-2-infected cells is likely to be responsible for the lack of paracrine signaling revealed by
the RNA-seq analysis (Fig. 1). These analyses indicates that inflammatory cytokines, but not IFNs, are
produced and secreted by infected cells.

Coding and non-coding NF-κB targets escaped the virus-induced cellular shutoff
Numerous genes associated with the NF-κB signaling pathway fall into the category of genes that
escaped the virus-induced cellular shutoff (Fig. 2E). To determine which of these genes were directly
controlled by NF-κB, we cross-compared the upregulated genes with known NF-κB target genes.
Among the 68 upregulated NF-κB-targets in S$^+$ cells, we identified cytokines such as CXCL8/IL8 and
IL32 (Fig. 4A, S5A and table S5). NFKB1, which codes for the p105/p50 subunit of the transcription
factor, and is itself a NF-κB-target gene [47,48], also showed a significant transcriptional induction in
S$^+$cells (Fig. 4A and S5A), as well as in a bulk population of infected cells (Fig. S5B). Such mechanism
generates an auto-regulatory feedback loop in the NF-κB response [47].

To identify NF-κB-driven lncRNAs, we analyzed NF-κB chromatin immunoprecipitation (ChIP)-
sequencing data generated in A549 cells stimulated with TNFα [49] and searched for known NF-κB
binding motifs [103]. The analysis recovered 15 NF-κB-targets among the 184 upregulated lncRNAs in
S$^+$ cells (Fig 4A and table S5), including PACERR, which is known to modulates the expression of NF-
κB-target genes *via* a direct interaction with the p50 subunit in U937 macrophages [50]. Novel NF-κB
target genes were also identified among unannotated genes (Fig 4A and table S5).

To determine whether the lncRNAs identified by the *in silico* analysis were indeed NF-κB targets,
RT-qPCR analysis were performed to assess the levels of three lncRNAs (CYLD-AS1, lnc-RASSF5
and lnc-HS3ST3B1-1:2) following 3 hours of TNFα treatment, and, as a comparison, after 24 hours of
SARS-CoV-2 infection (Fig. S6). IL6, CXCL8 and CCL20 were included as positive controls for NF-
κB activation. As expected, both TNFα treatment and SARS-CoV-2 infection significantly increased
the levels of IL6, CXCL8 and CCL20 mRNAs, as compared to non-treated cells (Fig. S6A). The
transcription of CYLD-AS1, lnc-RASSF5 and lnc-HS3ST3B1-1:2 was also induced in TNFα-treated
cells (Fig. S6B), as well as in SARS-CoV-2 infected cells, albeit not significantly for lnc-RASSF5 (Fig.
S6B). This suggests that transcription of these three lncRNAs occurs via activation of the NF-κB
pathway. To confirm that the NF-κB subunit p65 directly binds the upstream promoter of the lncRNAs
of interest, a Cut & Run assay was performed to identify direct p65 targets upon TNFα stimulation in
A549-ACE2 cells (Fig. 4B). Sequencing results confirmed the presence of direct p65 docking upstream
of transcription starts sites (TSS) of the 15 NF-κB-driven lncRNAs identified *in-silico*, except ADIRF-
AS1 (Fig. 4B). Thus, coding and non-coding NF-κB targets escaped the virus-induced cellular shutoff.

The NF-κB signaling pathway is required for an optimal SARS-CoV-2 replication

For functional analysis, we selected NFKB1, CXCL8/IL8 and IL32, which were among the top
upregulated NF-κB target genes identified in S$^+$ cells (Fig. 4A). NFKB1 served as a positive control in
these experiments since reducing its expression was previously shown to decrease SARS-CoV-2 protein
expression in A549-ACE2 cells [36]. These results were initially unexpected since NF-κB commonly
acts as antiviral factor [41]. Analysis of mRNA abundances showed a significant transcriptional
induction of NFKB1 and CXCL8/IL8 in a bulk population of A549-ACE2 cells infected by SARS-CoV-
2 for 24 hours, as compared to mock-infected cells (Fig. S5B), validating the RNA-seq analysis
performed on S$^+$ cells (Fig. 1). We had previously confirmed that IL32 transcripts were significantly
more abundant in S$^+$ cells than in mock-infected cells (Fig. 2C). We explored the potential ability of
NFKB1, CXCL8 and IL32 to modulate the replication of SARS-CoV-2 using siRNA-mediated knock-
down approaches. siRNA pools efficiently reduced the expression of their respective targets in A549-
ACE2 cells (Fig. 4C). Reduced expression of NFKB1, CXCL8 and IL32 significantly decreased
intracellular viral RNA yield twenty-four hours post-infection (Fig. 4D). The number of cells positive
for the viral protein S, as well as infectious viral particle production, were also significantly reduced in

cells expressing low levels of NFKB1, CXCL8 and IL32, as compared to cells transfected with control
siRNA pools (Fig. 4E-F). These results confirmed the pro-SARS-CoV-2 activity of NFKB1 in A459-
ACE2 cells [36] and revealed that CXCL8 and IL32 also exhibited significant proviral functions. Thus,
our sorting approaches identified upregulated NF-κB target genes that contribute to an optimal SARS-
CoV-2 replication.

CYLD reduced SARS-CoV-2 infection by dampening inflammation
CYLD-AS1 is one of the NF-κB dependent lncRNAs induced by SARS-CoV-2 infection that was
detected via the *in silico* approach and validated by the Cut & Run analysis (Fig. 5A) It caught our
attention since it arises from the strand opposite to the protein-coding gene CYLD, which is also
upregulated by SARS-CoV-2 infection (Table S1). CYLD-AS1 and CYLD share the same promoter for
bidirectional transcription, within which we detected a peak for direct p65 binding (Fig. 5A). CYLD has
deubiquitinating activity and negatively regulates the NF-κB pathway, thus limiting persistent
inflammation [51]. It does so by removing poly-ubiquitin tails from upstream signaling factors such as
TRAF2 and TRAF6, thus terminating signal transduction [51]. To investigate the role of CYLD in
SARS-CoV-2 infection, we used siRNAs to knock-down its expression prior to infection. Knockdown
efficiency was confirmed at the transcript and protein levels (Fig. 5B-C). Consistent with our RNA-Seq
data, infection increased the abundance of CYLD, leading to a partial rescue of CYLD transcript levels
after siRNA treatment (Fig. 5B). The proportion of S^+ cells was significantly higher in cells expressing
reduced levels of CYLD compared to control cells (Fig. 5D). As expected based on its known function
[51], depletion of CYLD led to increased expression levels of the mRNAs of the inflammatory cytokines
IL-6, CCL2 and IL-8 /CXCL8 upon infection (Fig. 5E). In agreement with this, less IL-6, CCL2 and IL-
8 were secreted in unstimulated cells expressing reduced levels of CYLD compared to control cells (Fig.
5F). These results suggest that CYLD acts as an antiviral factor for SARS-CoV-2, most likely by
negatively regulating the proviral NF-κB pathway (Fig. 5G).

Discussion
Transcriptomic analysis of lung A549-ACE2 cells sorted based on Spike expression permitted deep
sequencing of many cells synchronized for viral protein expression. Depletion of viral RNA from the
samples prior to RNA-seq allowed for a robust identification of host cell DEGs. Our approach thus
unveiled an accurate and comprehensive picture of genome-wide signaling networks that are directly
affected by SARS-CoV-2 replication in human lung cells. It revealed a massive, but somehow selective,
gene expression shutoff in S^+ cells. Such reduction of cellular transcripts was underestimated in analysis
performed on bulk population of infected A549-ACE2 cells [17,36,37] but was detected by RNA-seq
analysis performed on bulk population of Calu-3 cells infected at an high MOI [18]. This is probably
due to the fact that Calu-3 cells express high levels of ACE2 [52] and are thus naturally permissive to
SARS-CoV-2, ensuring a high proportion of infected cells in the mixed culture. SARS-CoV-2 employs

several strategies to decrease the level of cellular mRNAs in infected cells, including inhibition of

nuclear mRNA export [18,43] and accelerated mRNA degradation as compared to control cells [18].

SARS-CoV-1 and SARS-CoV-2 Nsp1 largely contribute to these processes by interacting with the

mRNA export machinery [53] and by inducing endonucleolytic cleavage of the 5′ UTR of capped

mRNAs bound to 40S ribosomes [18,54–56]. SARS-CoV-2 RNAs are protected from Nsp1-mediated

degradation by their 5' end leader sequence [18,57], which explains why we observed, in agreement

with previous studies performed in A549-ACE2 cells [17] and Calu-3 cells [18], a large dominance of

viral RNA over the cellular RNA pool at 24 hpi.

One consequence of this drastic shutoff is the suppression of induction of innate immune genes,

such as IFN type I and type III. In agreement with previous RNA-seq studies performed in bulk

populations of infected A549-ACE2 cells [17,36] and kidney HEK293T-ACE2 cells [58], our

transcriptomic profiling combined with analysis of mRNA levels and IFN secretion showed that infected

cells failed to mount an antiviral response. Besides global gene expression reduction in host cells, SARS-

CoV-2 has evolved numerous mechanisms to specifically counteract the IFN induction and signaling

pathways [12]. For instance, the viral proteins Nsp6 and Nsp13 bind and block the ability of TANK

binding kinase 1 (TBK1) to phosphorylate IRF3 [11] and several viral proteins, including the N and

Orf6 proteins, dampen STAT1/2 phosphorylation or nuclear translocation [11,59,60]. Consistent with

an absence of IFN secretion by S^+ cells and, consequently, a poor paracrine response, the transcriptome

of bystander S^- cells largely overlapped with the one of mock-infected cells.

Absence of IFN response is not, however, a universal feature of SARS-CoV-2 infection. Viral

replication induces a type I and III IFN response in Calu-3 cells [61–64], primary airway epithelia

cultured at the air-liquid interface [61,63], human intestinal epithelial cells [65], organoid-derived

bronchioalveolar models [66] and intestinal organoids [67]. When infected at a high MOI, A549-ACE2

cells also induced expression of IFN and ISGs [17]. Thus, *in vitro*, the magnitude of the IFN response

elicited by SARS-CoV-2 is cell-type specific and dependent on the viral load. Nevertheless, RNA-seq

analysis of postmortem lung tissues from lethal cases of COVID-19 failed to detect IFN-I or IFN-III

[17]. Type I IFN responses were highly impaired in peripheral white blood cells of patients with severe

or critical COVID-19, as indicated by transcriptional analysis [16]. Moreover, infected patients had no

detectable circulating IFN-β, independently of the severity of the disease [16]. Thus, our results

corroborate these clinical studies highlighting the efficient shutdown of IFN production by the virus.

Although our RNA-seq analysis identified over 12000 host transcripts that were significantly

reduced during SARS-CoV-2 infection as compared to control cells, it also recovered around 1500

transcripts whose levels were significantly elevated and 2800 transcripts whose levels were unchanged

upon infection. Among top upregulated genes in S^+ cells, we identified numerous proinflammatory

cytokines, such as IL6, CXCL1, CCL2, IL8/CXCL8 and CCL20. ELISA analysis confirmed that

infected cells were producing these inflammatory cytokines. They were previously identified in bulk or

sc-RNAseq analysis of A549-ACE2 cells as upregulated [17,36,37], while others, such as IL32, were

underreported. High levels of proinflammatory cytokine transcripts have been also observed in infected

primary bronchial cells [17], lung macrophages [25] and post-mortem lung samples of COVID-19-

positive patients [17]. Thus, SARS-CoV-2 appears to selectively inhibit IFN signaling while allowing

chemokine production in lung cells.

GO and KEGG pathway analyses confirmed the upregulation of an inflammatory response in S$^+$

cells, including TNF- and NF-κB- transcriptional signatures. An NF-κB transcriptional footprint was

previously identified in RNA-seq analysis of bulk population of SARS-CoV-2-infected tracheal-

bronchial epithelial cells [24] and in scRNA-seq analysis of infected A549-ACE2 cells [36]. Microarray

analysis of Calu-3 cells infected with SARS-CoV-2 also showed a specific bias towards an NF-κB

mediated inflammatory response [37]. Finally, inflammatory genes specifically up-regulated in

peripheral blood immune cells of severe patients or critical COVID-19 patients mainly belonged to the

NF-κB pathway [16]. Consistently, among the 741 upregulated protein-coding genes that we identified

in S$^+$ cells, 68 possess an NF-κB binding site in their promoter regions. Examples include IL6,

CXCL8/IL8 and IL32. We also identified NF-κB binding site in the promoter regions of lncRNAs that

were upregulated in S$^+$ cells, such as CYLD-AS1 and PACERR, both by *in silico* and Cut-and-Run

analysis. NF-κB contribution to the antiviral response is well described and is supported by numerous

in vivo experiments showing that mice deficient in different NF-κB subunits are more susceptible to

viral infection than wild-type mice [41]. Consistently, many viruses have evolved strategies to

counteract the NF-κB-mediated antiviral response [68]. However, certain human viruses, such as HIV-

1, Epstein-Barr virus and influenza A virus, activate NF-κB to block apoptosis and prolong survival of

the host cell to gain time for replication [69]. Our data show that disruption of NF-κB function through

silencing of its subunit p105/p50 diminished the production of viral RNAs and proteins at 24 hpi in

A549-ACE2 cells, confirming its proviral role [36,37]. Several SARS-CoV-2 proteins could contribute

to the activation of NF-κB signaling in infected cells. When individually expressed, Orf7a and Nsp14

activate NF-κB signaling pathway and induce cytokine expression, in Hela and HEK293T cells,

respectively [70,71]. Nsp5 also induces the expression of several inflammatory cytokines, such as IL-6

and TNF-α, through activation of NF-κB in Calu-3 and THP1 cells [72]. Further studies are required to

understand how SARS-CoV-2 benefits from hijacking NF-κB-driven functions.

Consistent with a proviral role of NF-κB in the context of SARS-CoV-2 infection, we found that

diminished expression of two NF-κB target genes (IL32 and CXCL8/IL8,) significantly decreased viral

RNA, viral protein production and infectious viral titers. IL-32 is a proinflammatory interleukin secreted

by immune and non-immune cells that induces the expression of other inflammatory cytokines,

including TNF-*α*, IL-6, and IL1*β* [73]. IL-32 was previously described as an antiviral factor in the

context of infection with several RNA and DNA viruses. For instance, its secretory isoform reduces the

replication of Hepatitis B virus by stimulating the expression of IFN-λ1 [74]. Its antiviral activity was

also demonstrated in U1 macrophages infected with HIV-1 [75] and canine kidney cells infected with

influenza A [76], using silencing and over-expression approaches, respectively. Further studies are

required to understand the pro-SARS-CoV-2 function of endogenous IL-32. It may support SARS-CoV-
2 replication *via* its ability to activate NF-κB [77]. IL-8 is a potent neutrophil chemotactic factor. It was
previously shown to possess proviral functions in the context of infection by several unrelated RNA and
DNA viruses, probably via inhibition of the antiviral action of IFN-α [78,79]. It could act in a similar
manner in SARS-CoV-2 infected A549-ACE2 cells. CYLD, which is an upregulated gene in S+ cells,
is a negative regulator of the NF-κB pathway [51] but its role in SARS-CoV-2 has not been documented
so far. Our data suggest that it acts as an antiviral factor, further confirming the proviral role of NF-κB
in the context of SARS-CoV-2 infection.

As for coding genes, there was a higher proportion of down- *versus* up-regulated lncRNAs in S$^+$
cells. GO cannot be extrapolated from lncRNAs since most of them have no known function, indicating
the need for future studies in this area. Several RNA-seq and microarray studies have identified hundreds
of lncRNAs induced by IFN stimulation or viral infection in diverse human and mice cell types
[33,34,80–82]. Analysis of a handful of them has provided a glimpse of the potential regulatory impact
of this class of RNAs on the IFN response itself [83] and on ISG expression [33,80,82]. However, the
investigation of the precise role of individual lncRNAs in IFN-mediated antiviral response is still in its
infancy stage. By analyzing publicly available SARS-CoV-2-infected transcriptome data, several
studies recovered lncRNAs that were misregulated upon infection of human lung epithelial cell lines,
primary normal human bronchial epithelial cells and BALF [84–87]. However, no lncRNA with a direct
action on the life cycle of SARS-CoV-2 has been identified yet.

Finally, our analysis profiled about 600 differentially expressed unannotated polyA+ transcripts in
S+ and bystander cells. The identification of these unannotated genes confirms that the human genome
is far from being well characterized. Having specific RNAs expressed in particular conditions could
open the way for the identification of pro- or anti-viral genes that could be used for better prognosis of
at-risk patients or for the follow up of the disease severity.

Our data suggests that the genes that are refractory to the viral-induced shutoff are mostly proviral
genes. Understanding the molecular mechanisms underlying the selectivity of the shut-off would be
interesting. Since coronavirus Nsp1 induces the cleavage of the 5'UTR of capped transcripts bound to
40S ribosomes, the 5'UTR length and/or structure may affect Nsp1 binding and subsequent degradation.
Alternatively, the extent of transcript reduction may be linked to their GC content and/or their lengths,
which could affect the specificity of the host RNase that is presumably recruited by Nsp1. Discovering
the host RNase responsible for transcript degradation in SARS-CoV-2-infected cells will shed light on
the mechanism of selectivity of the viral-induced shutoff.

Material and Methods

Cell lines. Human lung epithelial A549-ACE2 cells, which have been modified to stably express
ACE2 *via* lentiviral transduction, were generated in the laboratory of Pr. Olivier Schwartz (Institut
Pasteur, Paris, France). A549-ACE2 and African green monkey Vero E6 cells (ATCC CRL-1586) were

cultured in high-glucose DMEM media (Gibco), supplemented with 10% fetal bovine serum (FBS;
Sigma) and 1% penicillin-streptomycin (P/S; Gibco). Cells were maintained at 37°C in a humidified
atmosphere with 5% CO_2.

Virus and infections. Experiments with SARS-CoV-2 isolates were performed in a BSL-3
laboratory, following safety and security protocols approved by the risk prevention service of Institut
Pasteur. The strain BetaCoV/France/IDF0372/2020 was supplied by the National Reference Centre for
Respiratory Viruses hosted by Institut Pasteur (Paris, France) and headed by Pr. S. van Der Werf. The
human sample from which the strain was isolated has been provided by Dr. X. Lescure and Pr. Y.
Yazdanpanah from the Bichat Hospital, Paris, France. Viral stocks were produced by amplification on
Vero E6 cells, for 72 h in DMEM 2% FBS. The cleared supernatant was stored at 80°C and titrated on
Vero E6 cells by using standard plaque assays to measure plaque-forming units per ml (PFU/ml). A549-
ACE2 were infected at MOI of 1 in DMEM without FBS. After 2 h, DMEM with 5% FBS was added
to the cells. The Measles Schwarz strain expressing GFP (MeV-GFP) was described previously [88]
and was used at an MOI of 1.

Poly I:C and TNF-α stimulation. Cells were stimulated with 10 ng/µL Poly(I:C) (HMW, #vac-
pic Invivogen) using Lipofectamine 3000 Reagent (Thermo Fisher Scientific) according to
manufacturer's protocol. Treatment was maintained for 24 hours, concomitantly with infection.
Recombinant human TNF-α (R&D Systems 210-TA/CF) was added directly to cell culture medium at
a final concentration of 10 ng/mL and maintained for 3 or 24 hours as indicated.

Flow cytometry. Cells were detached with trypsin, washed with PBS and fixed in 4% PFA for 30
min at 4°C. Intracellular staining was performed in PBS, 2% BSA, 2mM EDTA and 0.1% Saponin
(FACS buffer). Cells were incubated with antibodies recognizing the spike protein of SARS-CoV-2
(anti-S2 H2 162, a kind gift from Dr. Hugo Mouquet, Institut Pasteur, Paris, France) and subsequently
with secondary anti-human AlexaFluor-647 antibody (1:1000, A21455 Thermo) for 30 min at 4°C. Data
were acquired using Attune NxT Acoustic Focusing Cytometer (Thermo Fisher) and analyzed using
FlowJo software.

Western Blotting. Cells were lysed in radioimmunoprecipitation assay (RIPA) buffer (Sigma-
Aldrich) supplemented with a protease and phosphatase inhibitor cocktail (Roche) for 15 minutes at 4
°C under agitation. Supernatants were recovered and samples were denatured in 4X Protein Sample
Loading Buffer (Li-Cor Bioscience) under reducing conditions (NuPAGE reducing agent, Thermo
Fisher Scientific) at 70 °C for 10 minutes. Proteins were separated by SDS-PAGE (NuPAGE 4 to 12%
Bis-Tris gel; Invitrogen) and transferred to nitrocellulose membranes (Bio-Rad) using a Trans-Blot
Turbo Transfer system (Bio-Rad). Membranes were blocked with PBS-0.1% Tween 20 (PBS-T)
containing 5% milk and were incubated with rabbit monoclonal anti-CYLD (1:500, #8462 Cell
Signaling) and mouse monoclonal anti-β-actin (1:5,000, A5316; Sigma) diluted in blocking buffer
overnight at 4°C. The membranes were then incubated with anti-rabbit/mouse IgG [H+L] DyLight

800/680secondary antibodies diluted in blocking buffer for 1h at room temperature. Images were

acquired using an Odyssey CLx infrared imaging system (Li-Cor Bioscience).

SARS-CoV-2 infected and bystander cell-sorting and RNA extraction on fixed samples for

RNA-seq. A549-ACE2 cells were seeded the day prior to infection. Cells were infected with SARS-

CoV-2 at MOI 1 or mock infected. Infections were done in two independent repeats with three technical

replicates each. At 24 h post infection, cells were detached with trypsin, fixed in 4% PFA for 30 min on

ice and stained for spike protein as described above for flow cytometry, with RNasin added to FACS

buffer (1:100 dilution) just before use to prevent RNA degradation. Infected cell samples were

resuspended in PBS 2%, 25 mM Hepes, 5 mM EDTA (sorting buffer) and sorted at 4°C on a FACSAria

Fusion4L Sorter into infected (presence of S protein expression) and bystander (absence of viral protein

expression) cell populations. Cells were collected in FBS-coated tubes containing buffer with RNasin

to minimize RNA degradation. After sorting, cells were pelleted at 500g for 5 min at 4°C and RNA was

extracted with the RecoverAll Total Nucleic Acid Isolation Kit starting at the protease digestion step.

Digestion was performed for 15 min at 50°C and 15 min at 80°C in the presence of RNasin. Extraction

was performed according to manufacturer's instructions and the addition of RNAsin to all buffers just

before use until final elution of RNA in DNAse-free water. Residual DNA was further digested using

DNAse I (Invitrogen AM1906). RNAs were sorted at -80°C until further analysis.

Library preparation, viral RNA depletion and RNA-sequencing. 500-1000 ng of total RNA

were depleted of SARS-CoV-2 RNA using custom designed probes. The probes were synthesized using

the NC_045512.2 Wuhan-Hu-1 complete genome reference. The design was made by Illumina and is

composed of 459 probes, separated into two pools synthetized by IDT. For the SARS-CoV-2 depletion,

we mixed both pools and used 1µl of this mix per sample, replacing the Ribozero+ probes at the

ribodepletion reaction step of the Illumina Stranded Total RNA prep ligation protocol. The SARS-CoV-

2 depleted RNA samples were normalized to 300ng and ERCC Spike was added as recommended by

the protocol ERCC RNA Spike-In Control mixes User Guide. The libraries were prepared using the

Illumina Stranded mRNA Prep Ligation Reference Guide.

PolyA+ RNA-sequencing analysis of sorted cells. Dataset consists of 9 paired-end libraries (150

nt), 3 replicates per condition: mock, bystander and infected cells. Adaptors were trimmed with Trim

Galore v0.6.4 [89] (wrapper for cutadapt v2.10 [90] and FastQC v0.11.9 [91]), with options --stringency

5 --trim-n -q 20 --length 20 --paired --retain_unpaired. Reads were mapped to a reference containing

human genome (hg38), SARS-CoV-2 (NC045512.2) and ERCC sequences. STAR v2.7.3a [92] was

used to map the reads, with default parameters. Bam files were then filtered using SAMtools v1.10 [93]

to retained reads flagged as primary alignment, and with mapping quality > 30 (option -q 30 -F 0x100 -

F 0x800). Read coverage was computed for each strand with bamCoverage (deepTools v3.5.0 [94]) with

options --binSize 1 --skipNAs --filterRNAstrand forward/reverse. For the detection of unannotated

transcripts, Scallop v0.10.5 [35] was used to reconstruct transcripts, with options --library_type first --

min_transcript_coverage 2 --min_splice_bundary_hits 5 --min_flank_length 5. Scallop was run on each

library, and the resulting annotations were merged using cuffmerge v1.0.0 [95], with gencode annotation
(v32) as reference (-g option). Then BEDtools v2.29.2 [96] was used to retain only intergenic and
antisens transcripts regarding gencode annotation. Gene expression quantification was performed using
featureCounts v2.0.0 [97], with options -O -M --fraction -s 2 -p, using a merged annotation of gencode
v32, SARS-CoV-2 (NC045512.2), newly annotated transcripts and ERCC transcripts. Subsequent
analyses were performed in R v3.6.2 [98]. Differential expression analysis was performed using DESeq2
package [99], after filtering out genes with less than 10 raw counts for all replicates in at least one
condition. Gene counts were normalized on ERCC counts, using *estimateSizeFactorsForMatrix*
function from DESeq2. All pairwise comparisons were performed (mock vs infected, mock vs bystander
and bystander vs infected), and genes were retained as differential if adjusted p-value was < 0.05 and
log fold-change > 1 or < -1. All plots were made using custom script, except for heatmaps that were
done using pheatmap package (RRID:SCR_016418).

PolyA+ RNA-sequencing analysis of bulk population of infected cells (from a public dataset).
Fastq files produced in the study of Blanco-Melo et al (2020)[17] were retrieved from GEO repository
(GSE147507). Dataset consist of single-end libraries (150 nt). We compared A549-ACE2 "mock" cells
(SRR11517680, SRR11517681 & SRR11517682) *versus* A549-ACE2 cells infected with SARS-CoV-
2 at MOI 0.2 (SRR11517741, SRR11517742 & SRR11517743). Adaptors were trimmed with Trim
Galore v0.6.4 [89], with options --stringency 5 --trim-n -q 20 --length 20. Reads were mapped on a
reference containing human genome (hg38) and SARS-CoV-2 (NC045512.2) sequence. Bam files were
then filtered using SAMtools v1.10 [93] to retained reads flagged as primary alignment, and with
mapping quality > 30 (option -q 30 -F 0x100 -F 0x800). Gene expression quantification was performed
using featureCounts v2.0.0 [97], with options -O -M --fraction -s 2, using a merged annotation of
gencode v32, SARS-CoV-2 (NC045512.2) and newly annotated transcripts. Gene counts were
normalized on the full count matrix, using *estimateSizeFactorsForMatrix* function from DESeq2 [99].
Differential analysis was performed as described above.

GO enrichment analysis. The GO enrichment and KEGG pathway analysis were performed using
DAVID online tool (updated version 2021) [100,101]. Upregulated protein-coding genes from each
comparison were taken for the analysis with default background for *Homo sapiens*.
GOTERM_BP_DIRECT and KEGG pathway were retained and top 10 results based on adjusted p-
value (Benjamini) were plotted using ggplot2 R package (v 3.3.0).

Identification of NF-κB target genes. A list of coding genes that are known targets of NF-kB is
available on Gilmore's laboratory website (https://www.bu.edu/nf-kb/gene-resources/target-genes). We
selected genes from this list that were shown to be direct targets of NF-κB, and for which the gene
symbol could be retrieved in gencode annotation (354 genes). For identifying lncRNAs and
unreferenced RNAs that possess NF-κB binding site in their promoter, we used p65 ChIP-seq data from
GEO dataset GSE34329 [49] - one input file and 2 ChIP replicates, 38nt long reads, single-end. Reads
were mapped using bowtie2 v2.4.1 using hg38 as reference, and SAMtools was used to retain the one

flagged as primary alignment, with mapping quality > 30, and to remove PCR duplicates (markdup,
with -r option). NF-κB binding sites were then detected using macs2 v2.2.7.1 [102], with command
callpeak -t ChIP_BamFile1 ChIP_BamFile2 -c input_BamFile -f BAM -g hs -s 38 --keep-dup all. Peaks
in the first decile of the -log10(qvalue) value were discarded. NF-kB motif genomic coordinates in the
human genome were retrieved using EMBOSS fuzznuc v6.6 [103], using motif 5'-
G(3)[AG]N[CT](3)C(2) - 3' [104], on forward and reverse strand (option -complement Y). Peaks and
NF-κB motif coordinates were compared using BEDtools [96]; if a motif was contained in a peak, the
motif strand was assigned to the peak. LncRNA and un-references transcripts were identified as NF-κB
potential targets if their promoter region (1kb before transcript TSS) had a peak containing a motif or a
peak for which the -log10(qvalue) was in the top 5%.

CUT & RUN. The experiment was performed in monoplicate, following the protocol from
Henikoff Lab with some adjustments (Skene et al, 2018). Briefly, untreated cells and cells treated for
3h with 10 ng/mL of TNF-α were pelleted after scraping and resuspended in wash buffer (HEPES
20mM, NaCl 150mM, Spermidine 0.5mM) at 10^7 cells/ml. At room temperature, per sample, 10 µl of
Concanavalin A beads slurry washed in bead activation buffer (HEPES 20mM, KCl 10mM, CaCl$_2$ 1mM,
MnCl$_2$ 1mM) was added per 10^6 cells in the total volume of 1 ml of wash buffer and incubated for 10
min with rotation at 15–20 rpm. Antibodies against H3K27ac (Millipore, MABE647) were diluted 50
times, p65 (Cell Signaling, D14E12) diluted 100 times and IgG (Invitrogen, 31235) 500 times in the
buffer (wash buffer with 0.1% digitonin, 2 mM EDTA) and 50 µl of diluted antibody was added to the
cells fixed on beads and incubated for 1h. Afterward, the beads were washed twice with 250 µl of
digitonin buffer (wash buffer with 0.1% digitonin), resuspended in 52 µl digitonin buffer containing
35ng of pAG-MNase (produced at Institut Curie platform) , and incubated 10 min with agitation. Beads
were washed twice in 250 µl of ice-cold digitonin buffer, resuspended in 100 µl of ice-cold digitonin
buffer, kept on ice for 5 min before adding 2 µl of 100 mM CaCl$_2$ and incubating for 30 min on ice. The
reaction was stopped by addition of 100 µl of stop buffer (NaCl 340mM, EDTA 20mM, EGTA 4mM,
RNase A 50 µg/mL, glycogen 50 µg/mL and 0.1% digitonin) and incubated for 10 min at 37°C. Bead
suspension was centrifuged at 16k rcf at 4°C for 5 min and beads were recovered for DNA fragments
purification with NEB Monarch PCR & DNA purification kit, following the protocol enriching for short
DNA fragments. DNA was quantified by Qubit HS DNA kit and samples were sent for library
preparation and sequencing to Institut Curie's NGS platform.

CUT & RUN data analysis. Adaptors were trimmed with Trim Galore using default parameters
for paired-end data. Reads were aligned on human genome (hg38) using Bowtie2 (default parameters)
and only properly mapped reads with a mapping quality >=30 were kept. Peaks were detected using
macs2, with the option –keep-dup all.

RNA extraction and RT-qPCR assays. Total RNA was extracted from cells with the NucleoSpin
RNA II kit (Macherey-Nagel) according to the manufacturer's instructions. First-strand complementary
DNA (cDNA) synthesis was performed with the RevertAid H Minus M-MuLV Reverse Transcriptase

(Thermo Fisher Scientific) using random primers. Quantitative real-time PCR was performed on a real-time PCR system (QuantStudio 6 Flex, Applied Biosystems) with Power SYBR Green RNA-to-CT 1-Step Kit (Thermo Fisher Scientific). Data were analyzed using the 2-$\Delta\Delta$CT method, with all samples normalized to endogenous BPTF, whose gene expression was confirmed as homogenous across samples by RNA-seq. Genome equivalent concentrations were determined by extrapolation from a standard curve generated from serial dilutions of plasmid encoding a fragment of the RNA-dependent RNA polymerase (RdRp)-IP4 of SARS-CoV-2. Primers used for RT-qPCR analysis are given in table S6.

siRNA-mediated knockdown. A549-ACE2 cells were transfected using Lipofectamine RNAiMax (Life Technologies) with 10nM of control (#4390843, Ambion) or CXCL8 (L-004756-00, Dharmacon), NFKB1 (L-003520-00, Dharmacon), IL32 (L-015988-00, Dharmacon), ADIRF-AS1 (siTOOLs Biotech) siRNAs following the manufacturer's instructions. 48h after transfection, cells were infected with SARS-CoV-2 for 24 h.

Chemokine and Interferon expression and secretion. Cell lysates for intracellular chemokine quantification were obtained *via* repeated freeze-thaw cycles at -80°C of cells suspended in media containing protease inhibitor cocktail (Roche Applied Science) and final centrifugation at 8000g to pellet debris. IL6, CXCL1, CCL2, CXCL8 and CCL20 concentrations in supernatants of from control, infected or stimulated cells, were measured using a custom-designed LEGENDplex Human Panel. Data were acquired on an Attune NxT Flow Cytometer (Thermo Fisher) analyzed with LEGENDplex software (BioLegend). Similarly, IFN-β, IFN-λ1 and IFN-λ2/3 concentrations were measured in undiluted supernatants from control, infected or stimulated cells using a LEGENDplex Human Type 1/2/3 Interferon Panel assay (BioLegend) according to the manufacturer's protocol.

TCID50 mediated viral titration. A549-hACE2 cells were infected for 24 hours with MOI 1 of SARS-COV-2. Virus was removed at 3hpi and fresh medium containing 2.5% FBS was added for the remaining time. Supernatants were harvested the following day and stored at -80 °C until assay was performed. Briefly, supernatants were 10-fold serially diluted in DMEM supplemented with 2% FBS. Vero E6 cells and 50-µL potions of serially diluted virus suspensions were deposited in 96-well plate in 8 replicate wells. 5 days later, cells were rinsed, fixed and stained using Crystal Violet (0.2% Crystal Violet in 10% Ethanol and 10% Formaldehyde) at room temperature. CPEs were assessed by calculating the TCID50 values using the Spearman-Karber method [105].

Statistical analysis. Statistical parameters including the exact value of n, precision measures (as means ± SEM), statistical tests and statistical significance are reported in the figure legends. In figures, asterisks denote statistical significance: *$p < 0.05$, **$p < 0.01$, ***$p < 0.005$, ****$p < 0.0001$, and "ns" indicates not significant. Statistical analysis was performed in GraphPad Prism 9 (GraphPad Software Inc.).

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Figure legends

Figure 1. Differential transcriptomic analysis of SARS-CoV-2 infected and bystander lung cells. (**A**)
Scheme summarizing the experimental workflow. A549-ACE2 cells were infected with SARS-CoV-2
at a MOI of 1 for 24h, stained for viral S protein followed by flow cytometry sorting of productively
infected (S+) and bystander (S-) cells. Total RNA from mock, S- and S+ cells was depleted of ribosomal
and viral RNAs and sequenced. (**B**) Representative FACS plot of S protein staining used for sorting
productively infected cells. (**C**) Percentage of reads in libraries originating from human genome or
SARS-CoV-2 sequence, before and after depletion of viral reads. (**D**) PCA plot based on the top 500
most variable genes between mock, bystander (S-) and infected (S+) cells. (**E**) Volcano plots presenting
distri- bution of classes of transcripts (mRNA-blue, lncRNA-red, unannotated-green) based on their
log2 fold-change for 3 comparisons: infected cells vs mock, infected cells vs bystander and bystander
vs mock. (**F**) Heatmaps presenting z-score of log2 normalized counts for all differentially expressed
genes between mock, bystander and infected cells, separated for mRNAs, lncRNAs and unannotated
RNA.

Figure 2. Separating lung cells based on the expression of the viral S protein improved discovery of
DEGs. (**A**) Venn diagram repre- senting gene overlap between DE-seq from sorted vs mock samples
and mixed vs mock data re-analyzed from Blanco-Melo et al. 2020 (MOI of 0.2). The genes were
defined as upregulated if log2 fold change was equal or above 1 (right panel) and equal or below -1 for
downregulated genes (left panel). Genes were defined as expressed when they were represented by at
least 10 normalized reads in each replicate. The solid lines and central overlap show the genes that
appear in both datasets while dashed gray zones outline genes detected in only one of the two datasets.
(**B**) RT-qPCR quantification of viral genome copy number per μg of total RNA extrac- ted from A549-
ACE2 cells infected by SARS-CoV-2 at a MOI of 1, analyzed either in bulk (left side of graph, n=2
independent expe- riments, line at mean) or post-sorting based on Spike protein expression, allowing
distinction between productively infected and bystander subpopulations (right side of graph, n=3
experiments, line at mean). (**C-D**) RT-qPCR quantification of mRNA, lncRNA, and unannotated-RNA,
that were identified as upregulated (**C**) or downregulated (**D**) upon infection by SARS-CoV-2 in the
RNA-seq analysis, in total RNA extracted from A549-ACE2 cells infected with SARS-CoV-2 at a MOI
of 1, analyzed either in bulk (left side of graph) or post-sorting based on Spike protein expression (right
side of graph, normalized fold change over mock-infec- ted, n=3 independent experiments, ratio-paired
t test, line at mean ± SEM). (**E**) Top 10 enriched GO terms for Biological Process (BP) and KEGG
pathways from DAVID database ranked by the adjusted p-value (Benjamini), for upregulated mRNAs
identified in RNA-Seq comparison between infected vs mock cells.

Figure 3. Inflammatory cytokines, but not IFNs, are produced and secreted by infected cells. (**A**) Quantification of the indicated chemokines by cytometry bead array in A549-ACE2 cell lysates obtained 24 hours post mock-infection or infected with SARS-CoV-2 at a MOI of 1, or post-treatment with transfectant alone or in combination with 10 ng/μL of Poly(I:C) (n=3 independent experiments, paired One-Way ANOVA with Turkey's post-test, line at mean ± SEM). (**B**) Quantification of the indicated chemokines by cytometry bead array in supernatant (SN) of cells shown in (A) (n=3 independent experiments, paired One-Way ANOVA with Turkey's post-test, line at mean ± SEM). (**C**) Percentages of infected A549-ACE2 cells 24 hours post infection (MOI of 1) with SARS-CoV-2 or Measles virus expressing GFP (MeV), quantified by flow cytometry using Spike protein staining and GFP expression, respectively (n=3 independent experiments, line at mean ± SEM). (**D**) Quantification of secretion of IFNβ, IFNλ1 and IFNλ2/3 by cytometry bead arrays in supernatant of A549-ACE2 cells 24 hours post-infection with SARS-CoV-2 or MeV (MOI of 1), or post-treatment with transfectant alone or in combination with 10 ng/μL of Poly(I:C) (n=3 independent experiments, One-Way ANOVA with Šídák's post-test, line at mean ± SEM). ULOD: Upper Limit of Detection; LLOD: Lower Limit of Detection.

Figure 4. Upregulated NF-κB target genes contribute to an optimal SARS-CoV-2 replication. (**A**) Volcano plot presenting log2 fold change of RNA expression from RNA-seq analysis between S+ and mock cells and showing known NF-κB target mRNAs (labeled in blue), as well as NF-κB target lncRNAs (red) and unannotated RNAs (green) predicted from ChIP and motif analysis. (**B**) Volcano plot presenting log2 fold change of RNA expression from RNA-seq analysis between S+ and mock cells and showing DEGs with peaks of upstream p65 binding, observed via Cut&Run performed after 3 hours TNFα treatment. (**C**) RT-qPCR quantification of knock-down efficiency of indicated transcripts in A549-ACE2 cells, 48 hours post-transfection with a pool of siRNAs targeting indicated genes (normalized fold change over control siRNA, n=3 independent experiments, ratio-paired t test, line at mean ± SEM). (**D**) RT-qPCR quantification of viral genome copy number per μg of total RNA extracted from A549-ACE2 cells, with indicated genes knocked down, 24 hours after infection with SARS-CoV-2 (MOI of 1) (n=3 independent experiments, One-Way ANOVA with Dunnett's post-test, line at mean ± SEM). (**E**) Percentages of infected A549-ACE2 cells, with selected genes knocked-down, 24 hours post infection with SARS-CoV-2 (MOI of 1), quantified by flow cytometry using Spike protein staining (n=3 independent experiments, mixed model one-Way ANOVA with Dunnett's post-test, line at mean ± SEM). (**F**) Viral titers in cell supernatants of A549-ACE2 cells, with indicated genes knocked down, 24 hours after infection with SARS-CoV-2 (MOI of 1) (n=3 independent experiments, One-way ANOVA performed on Log-transformed data, with Dunnett's post-test, line at mean ± SEM). Titers were determined by calculation of TCID50 using the Spearman-Karber Method.

Figure 5. Identification of CYLD gene as a regulator of SARS-CoV-2 infection and inflammation (**A**) Visualization of read coverage (tag/nucleotide) from polyA+ RNA-seq (red, blue, grey), Cut&Run sequencing (green) and ChIP-seq (IP – Input, yellow) at CYLD-AS1 locus. RNA-seq, Cut&Run-seq and ChIP-seq data were normalized independently. (**B**) RT-qPCR quantification of knock-down efficiency of CYLD transcript in A549-ACE2 cells, 72 hours post-transfection with indicated siRNA pools and 24h post-infection with SARS-CoV-2 (MOI of 1) (normalized fold change over control siRNA, n=3 independent experiments, paired One-Way ANOVA with Sidak's post-test performed on non-normalized ΔCt values, line at mean ± SEM). (**C**) Western Blot showing efficient knockdown of CYLD protein, 48h post-transfection with Ctrl siRNA pool and siRNA pool targeting CYLD transcript. (**D**) Percentages of infected A549-ACE2 cells, with selected genes knocked-down, 24 hours post infection with SARS-CoV-2 (MOI of 1), quantified by flow cytometry using Spike protein staining (n=3 independent experiments, paired t-test, line at mean ± SEM). (**E**) RT-qPCR quantification of transcript induction of indicated genes in A549-ACE2 cells, 72 hours post-transfection with indicated siRNA pools and 24h post-infection with SARS-CoV-2 (MOI of 1) (normalized fold change over mock-infected, control siRNA, n=3 independent experiments, paired One-Way ANOVA with Sidak's post-test performed on non-normalized ΔCt values, line at mean ± SEM). (**F**) Quantification of secretion of IL-6, CCL-2 and IL-8 by cytometry bead arrays in supernatant of A549-ACE2 cells, 72 hours post-transfection with indicated siRNA pools and 24h post-infection with SARS-CoV-2 (MOI of 1) (n=3 independent experiments, ratio-paired t-test, line at mean ± SEM). (**G**) Working model: CYLD acts by dampening the release of inflammatory cytokines via negative regulation of the NF-κB pathway (left). Reduced expression levels of CYLD (right) lead to increased inflammation and enhanced SARS-CoV-2 infection (Created with BioRender.com).

Supplementary figure legends

Figure S1. (**A-B**) Heatmaps presenting z-score of log2 normalized counts for differentially expressed genes between (**A**) S+ vs S- cells or (**B**) S- vs mock-infected treated cells, separated for mRNAs, lncRNAs and unannotated RNAs. (**C**) Heatmap showing expression of IFN genes as normalized read counts (log2) of the IFN genes for all replicates in mock, bystander & infected cells. The "de.gene" color scale represents the differentially expressed genes between infected and mock conditions, with "no_exprs" value for genes that were not tested because gene expression was too weak. The "p65.in.prom" color scale indicates whether a gene has a Cut & Run peak (upon TNFα stimulation) in its promoter.

Figure S2. MA plot showing the response to infection of an artificially reconstructed mixed cell population (80% bystander, 20% infected, left) compared to cells sorted based on the expression of the viral protein Spike (infected, middle; bystander, right).

Figure S3. (**A**) Visualization of read coverage (tag/nucleotide) from polyA+ RNA-seq normalized on ERCC reads for IL32, WAKMAR2, FEN1 and AC016747.1. (**B-C**) RT-qPCR quantification of mRNAs and lncRNAs that are either upregulated (**B**) or downregulated (**C**) upon infection with SARS-CoV-2, in total RNA extracted from A549-ACE2 cells infected at an MOI of 1, analyzed either in bulk (left side of graph) or post sorting based on Spike protein (right side of graph, normalized fold change over mock-infected, n=3 independent experiments, ratio-paired t test, line at mean ± SEM).

Figure S4. (**A**) RT-qPCR quantification of transcript induction of indicated chemokines in A549-ACE2 cells, 24 hours post infection with SARS-CoV-2 (MOI of 1) or post-treatment with transfectant alone or in combination with 10 ng/µL of Poly(I:C) (normalized fold change over mock-infected, n=3 independent experiments, ratio-paired t test, line at mean ± SEM). (**B**) RT-qPCR quantification of IFNβ, IFNλ1 and IFNλ2/3 transcripts induction in A549-ACE2 cells, 24 hours post infection at an MOI of 1 with SARS-CoV-2 or Measles virus expressing GFP (MeV) or post treatment with transfectant alone or in combination with 10 ng/µL of Poly(I:C) (normalized fold change over mock-infected, n=3 independent experiments, line at mean ± SEM).

Figure S5. (**A**) Visualization of read coverage (tag/nucleotide) from polyA+ RNA-seq and ChIP-seq (IP – Input) at NFKB1, CXCL8, and IL32 loci. RNA-seq and ChIP-seq data were normalized independently, on ERCC reads for RNA-seq and on library size for ChIP-seq. (**B**) RT-qPCR quantification of NFKB1 and CXCL8 transcripts induction in A549-ACE2 cells, 24 hours post infection with SARS-CoV-2 (MOI of 1) (normalized fold change over mock-infected, n=3 independent experiments, ratio-paired t test, line at mean ± SEM).

Figure S6. RT-qPCR quantification of three coding transcripts (**A**) and three lncRNAs (**B**) in A549-ACE2 cells, 3 hours post treatment with 10 ng/mL of TNFα or 24 hours post-SARS-CoV-2 infection (MOI of 1) (normalized fold change over mock-infected, n=3 independent experiments, ratio-paired t test, line at mean ± SEM).

Supplementary tables

Table S1. Differential expression analysis of mRNAs (infected S$^+$ vs mock, infected S$^+$ vs bystander, and bystander vs mock).

Table S2. Differential expression analysis of lncRNAs (infected S$^+$ vs mock, infected S$^+$ vs bystander, and bystander vs mock).

1120   Table S3. Differential expression analysis of unannotated RNAs (infected S^+ vs mock, infected S^+ vs

1121   bystander, and bystander vs mock).

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1123   Table S4. Gene overlap between DE-seq from our 'sorted vs mock' samples and 'mixed vs mock'

1124   data re-analyzed from Blanco-Melo *et al.* 2020 (MOI of 0.2).

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1126   Table S5. This table shows known NF-κB target mRNAs, as well as predicted NF-κB target lncRNAs

1127   and unreferenced RNAs, among upregulated RNAs in S^+ vs mock cells.

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1129   Table S6. RT-qPCR primer sequences

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Figure 1.

Figure 2.

Figure 3.

Figure 4.

Figure 5.

Figure S1.

Figure S2.

Figure S3.

Figure S4.

A

B

Figure S5.

A

B

Figure S6.