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2 **Aberrant pace of cortical neuron development in brain organoids from patients with**
3 **22q11.2 deletion syndrome-associated schizophrenia**
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Adults and children afflicted with the 22q11.2 deletion syndrome (22q11.2DS) exhibit

cognitive, social, and emotional impairments, and are at significantly heightened risk for

schizophrenia (SCZ). The impact of this deletion on early human brain development,

however, has remained unclear. Here we harness organoid models of the developing

human cerebral cortex, cultivated from subjects with 22q11.2DS and SCZ, as well as

unaffected control samples, to identify cell-type-specific developmental abnormalities

arising from this genomic lesion. Leveraging single-cell RNA-sequencing in conjunction

with experimental validation, we find that the loss of genes within the 22q11.2 locus

leads to a delayed development of cortical neurons. This impaired development was

reflected in an increased proportion of actively proliferating neural progenitor cells and a

reduced fraction of more mature neurons. Furthermore, we identify perturbed molecular

imprints linked to neuronal maturation, observe the presence of sparser neurites, and

note a blunted amplitude in glutamate-induced Ca2+ transients. The aberrant

transcription program underlying impaired development contains molecular signatures

significantly enriched in neuropsychiatric genetic liability. MicroRNA profiling and target

gene investigation suggest that microRNA dysregulation due to *DGCR8* deficiency may

drive perturbations of genes governing the pace at which maturation unfolds. Using

protein-protein interaction network analysis we define complementary effects stemming

from other genes residing within the deleted locus. Our study uncovers reproducible

neurodevelopmental and molecular alterations resulting from 22q11.2 deletions, with

findings that could advance disease modeling and drive the development of therapeutic

interventions.

Deletions at the chromosome 22q11.2 locus are the most frequent deletion in humans

and present a variable clinical phenotype involving multiple systems[1-4]. Adults and children with

the 22q11.2 Deletion Syndrome (22q11.2DS) demonstrate cognitive, social and emotional

impairments[5,6]. 22q11.2 deletions are also one of the strongest genetic risk factors for

schizophrenia (SCZ)[7]. A number of behavioral and neuroanatomical abnormalities in children

with 22q11.2DS likely stem from altered early brain development[8-10]. Similarly, for a sizable

fraction of patients with SCZ, especially ones with large effect mutations, genetic liability leads

to pre-morbid dysfunction before clinical disease onset by disturbing early development[11-14].

Rare and highly penetrant risk mutations provide an opportunity to leverage

experimentally tractable model systems for identifying convergent neural substrates and

underlying molecular mechanisms that might serve as entry points to prevent or reverse disease

progression. While understanding the full chain of events leading from a risk mutation to the

emergence of clinical symptoms necessitates analysis of the intact brain in behaving animals,

for mutations associated with neurodevelopmental abnormalities there is a need for such

studies to be complemented by human experimental models that mirror prenatal states of the

human brain. Forebrain organoid models provide a critical platform to dissect and integrate

information, which would be hard to be accessed otherwise in the developing human brain[15-17].

To this end, here we analyze organoid models of the developing human cerebral cortex

derived from hiPSC lines from patients with 22q11.2DS and SCZ as well as unaffected controls

matched by sex and age. We emphasize analysis of EN lineage based on plethora of previous

studies in animal models indicating that deficits in synaptic functionality of ENs contribute to the

cognitive deficits associated with the 22q11.2DS[18-20]. We showed that loss of genes within the

22q11.2 locus leads to neurodevelopmental defects characterized by delayed neuronal

maturation trajectories and pervasive changes in gene expression. Transcriptional profiling

underscored specific biological pathways underlying the observed abnormal

neurodevelopmental trajectory, providing mechanistic insights into the molecular pathogenesis

of 22q11.2-associated clinical manifestations and into potential therapeutic interventions. The

aberrant transcription program underlying asynchronous development contains molecular

signatures significantly enriched in neuropsychiatric genetic liability suggesting that our findings

may be generalized to other genetic causes of SCZ, especially ones with large effect mutations.

The human forebrain organoid model presented here could serve as a human-specific

preclinical model and a resource for further studies of the molecular and cellular pathogenesis

of the 22q11.2DS.

Results

Forebrain organoids as models of the 22q11.2 deletion. To model and study the

consequences of the 22q11.2 deletion in the context of early human neurodevelopment, we

derived 3D dorsal forebrain patterned organoids from human induced pluripotent stem cell

(hiPSC) lines from patients with the canonical 3-Mb 22q11.2 deletion and SCZ using a well-

established protocol[21] with high reliability of differentiation. For the analysis shown here, we

employed iPSC lines from sibling pairs, as well as cases and matched unrelated control pairs

from the NIMH Repository and Genomic Resource. Generation of these lines has been

described previously[22] (see also **Methods**). The dorsal forebrain identity and cell type

composition of organoids at DIV70 were confirmed through immunostaining using the forebrain

marker FOXG1, dorsal forebrain markers PAX6 and TBR1, and layer-specific markers such as

PH3 (proliferating NPCs at the SVZ), CTIP2 (lower layers), and SATB2 (upper layers) (**Fig

S1a**). Additionally, cell-type-specific markers were used to identify radial glia (Nestin),

intermediate progenitor cells (TBR2) (**Fig S1b**), and neurons [somatodendritic marker MAP2

and immature neuron marker doublecortin (DCX)] (**Fig S1c**).

Quantification of the growth rate of patient and control organoids, between DIV14 (Week

2) and DIV140 (Week 10), did not reveal significant genotypic differences in their average area

or perimeter [Kolmogorov-Smirnov (KS) test, ns, n=72 control, 76 patient organoids, **Fig 1a**,**b**].

We also tested whether there are alterations in neuronal activity in patient compared to control

organoids using as a proxy system-wide glutamate-induced Ca^{2+} transients. Comparisons of

three pairs at DIV 259 identified a significant decrease in Ca^{2+} peak amplitude in case compared

to control cells ($P = 5.78 \times 10^{-12}$, average number of cells per organoid: n=89 patient, n=124

control, **Fig 1c,d,e**) consistent with previous findings in monolayer cultures of both mouse and

patient neurons[22,23,18]. Thus, despite the lack of overt effects in growth, patient organoids display

different functional properties, validating their usefulness as a preclinical model for studying the

disease mechanisms underlying 22q11.2 deletions.

To identify early neurodevelopmental disease pathways leading to disease phenotypes,

dissect in more detail the various cell population alterations and directly examine genotypic

differences in transcriptomic and regulatory profiles during neurogenesis and neuronal

differentiation, we used single cell RNA sequencing (scRNA-seq). We analyzed the cell type

composition and molecular signatures of patient and control forebrain organoids at two key

stages: DIV70, characterized by abundant progenitors and the onset of robust neurogenesis,

and DIV150, marked by the emergence of diverse cortical excitatory neuron (EN) subtypes,

interneurons, and astroglia. We generated a high viability (>90%) single cell suspension for

scRNA-seq from each of 3 pairs of DIV70 and DIV150 organoids, a total of 6 lines from 3

individual patients and 3 control with 3 organoids per line and developmental time points. To

ensure consistency, data from all samples and both time points were first aggregated using

CellRanger and processed through a uniform and harmonized analysis pipeline. Quality control

metrics were consistent across organoids from all iPSC lines at both time points, showing low

detection of mitochondrial and ribosomal genes, with comparable count metrics across all

samples (**Fig S2a**). We observed negligible differences in the expression of hypoxia and

apoptosis markers between patient and control organoids and between time points, indicating

healthy organoids across time points and genotypes (**Fig S2b, c**). Following quality control and

filtering, a total of 55,762 single cells were analyzed. We identified 8 distinct cell clusters using

the Leiden algorithm, with a uniform distribution across all samples, indicating consistent cell

composition among the samples[24,25] (**Fig S2d**). Assessment of 22q11.2 locus genes expressed

in forebrain organoids confirmed the expected ~50% reduction in all patients compared to

control organoids (**Fig S2e**), indicating high consistency of the transcriptomes (**Fig S2f**).

Altered cell type proportions in patient organoids. To more precisely annotate cell

types observed in the scRNA-seq datasets, we used as a reference a published dataset that

classifies the signature transcriptomic profiles of cell types in the developing human

telencephalon at various stages of development[26]. Cell type mapping was conducted using the

singleR tool[27]. By using a custom-built stratified subsampling approach (see Methods) we

confirmed that 98% of cell annotations passed the threshold with high confidence. We found

that the majority of cell types found in the developing human brain are represented in our DIV70

and DIV150 datasets (**Fig 2a, Fig S3a and b**). We further confirmed the specificity of cell type

annotation using conventional cell type specific markers (**Fig S3 c and d**). At DIV70 our

annotation strategy identified early radial glia (RG-early) and ENs as the predominant cell types.

Intermediate progenitors differentiating into newborn ENs (IPC-nEN) represent the next most

abundant group. By DIV150 organoids display a diversity of cell types including EN, late radial

glia (RG-late), cortical as well as striatal interneurons (IN) and astrocytes. Overall, as

development progresses, the fraction of EN lineage cells (defined by RG-early, RG-div, IPC-div,

IPC, nEN and EN) is altered (**Fig S3e**). Importantly, while the relative proportion of EN lineage

progenitors decreases from DIV70 to 150, the proportion of newborn and maturing EN remains

fairly constant. Conversely, there is an expansion of IN lineage as well as astrocytes at DIV150

(**Fig 2a, b**).

We used Milo[28], a scalable statistical framework for differential abundance testing, to

analyze cell type distributions in patient organoids. Quantification of various cell types revealed

a nominally significant higher abundance of cycling radial glial (RG-div) and cycling intermediate

progenitor cells (IPC-div) alongside a lower abundance of differentiated ENs in patient

organoids compared to control organoids (**Fig 2c, d, e**). To further validate changes in cycling

NPCs, we performed 3D immunostaining of DIV70 organoids. We used Ki67, a proliferation

marker, to label actively cycling cells, and SOX2, to identify NPCs (**Fig 2f**). Consistent with the

scRNA-seq results, our analysis revealed a significant increase in the proportion of Ki67-

positive/SOX2-positive cells (cycling NPCs) in patient organoids compared to controls (**Fig 2g,**

upper panel right). There was a consistency across each line of the control and patient

organoids, demonstrating reasonable reproducibility among organoids within each group (**Fig**

2g, lower panel). However, the total number of NPCs (SOX2-positive) remained unchanged

(**Fig 2g, upper panel left**).

To further investigate the proliferation and neurogenesis characteristics of cycling NPCs,

we performed two additional analyses. First, purified NPCs (SOX2+) were isolated from DIV20

organoids and cultured in 2D. These cells were transduced with the PIP-FUCCI biosensor (**Fig.**

2h, upper panel), and the proportion of cells in each cell cycle phase (G1, S, G2/M) was

quantified. The results showed a significantly higher percentage of cells (t-test $P = 0.037$, fold

change = 1.35) in the G1 phase and a significantly lower percentage (t-test $P = 0.045$, fold

change = 0.58) in the S phase in patient NPCs compared to controls (**Fig. 2h, lower panel**).

Second, we used fluorescence-activated cell sorting (FACS) to experimentally validate the

reduction in neuron numbers suggested by the scRNA-seq analysis. Purified NPCs (SOX2+)

were isolated from all DIV20 organoids to form 3D neurospheres, which were then cultured in

neuronal differentiation medium for 7 days before being dissociated into single cells. The cells

were fixed and immunostained with SOX2 and CTIP2, and the proportions of each cell type in

the neurospheres were analyzed using FACS. Initially, SOX2+ cells constituted the majority

(~90%) of the total population in neurospheres. After 7 days of differentiation, CTIP2+ neurons

increased to ~40% of the total population in control-derived neurospheres. However, patient-

derived neurospheres showed a marked reduction in CTIP2+ neurons (~20%) (**Fig. 2i**). These

differences were statistically significant (t-test $P < 0.01$) and consistent across patient-control

pairs (**Fig. 2i**). A parallel assay assessing layer thickness in DIV45 organoids, where rosette

structures are prominent, yielded consistent results. The PAX6-positive NPC layer was defined

as the subventricular zone (SVZ), while the CTIP2-positive neuron layer represented the cortical

plate (CP). Although no significant change was observed in the relative thickness of the SVZ,

consistent with a total NPC count in patient organoids comparable to controls, a significant

decrease in CP thickness was detected in patient organoids (**Fig. S4a-c).** Collectively, these

findings suggest that the 22q11.2 deletion delays NPC differentiation during early

neurodevelopment.

22q11.2 deletion leads to asynchronous developmental trajectories in forebrain

organoids. To determine whether differences in cell population frequencies arise from aberrant

developmental trajectories during early neuronal development, we used Monocle3[29] to examine

cell distribution across pseudotime in a cell type-specific manner (**Fig S5**). This analysis focused

on the developmental dynamics of the affected cell types within the EN lineage in our scRNA-

seq datasets (**Fig S5a,b**). Plotting the cell distribution of DIV70 EN lineage along the

pseudotime trajectory revealed an increased distribution of patient cells in the early phase of the

trajectory (progenitor states) and a decreased distribution of patient cells towards the terminal

phase of the trajectory (mature neuron states) (P = 1.347x10^{-11}, two-sided KS test; **Fig 3a, b**).

These findings indicate delayed differentiation of progenitors within the EN lineage in patient

organoids.

To validate this observation using a complementary approach, we applied RNA velocity

analysis with scVelo to infer directed developmental dynamics from our single-cell

transcriptomics dataset. RNA velocity analysis uses gene splicing dynamics to quantitatively

measure transcriptional dynamics of each gene. Gene velocity information was used by

CellRank[30] to define cell transition states and infer the differentiation trajectory and fate potential

of individual cells. We used the CellRank pipeline to order cells based on latent time as

determined by the transition of RNA velocity between cell states and computed cell-to-cell

transition probabilities using a Markov state model of RNA velocity and transcriptomic similarity.

We defined EN as the terminal state and computed absorption probability (a measure of the

probability of each cell reaching the endpoint of the lineage) and differentiation potential (a

measure of the entropy around the absorption probabilities for each cell and its potential to

differentiate towards the terminal state). UMAP plot of the velocity stream, generated by

combining the Cellrank probabilities and latent time from scVelo[31], revealed a difference in the

velocity, especially in the IPC-nEN cluster (**Fig 3c**). Computation of Differentiation Potential in

DIV70 batch-corrected datasets indicated that cells in the EN lineage tend to stay in the

progenitor status in patient compared to control organoids (**Fig 3d**). Taken together, these

results suggest that the probability of RG or IPC cells reaching the terminal EN state in patient

organoids is lower than in control.

A significant lag in the patient EN development with fewer patient neurons towards the

terminal portion of the pseudotime trajectory was still detectable at DIV150 ($P = 2.13 \times 10^{-4}$, two-

sided KS test) indicating that delayed maturation of EN persists at later developmental stages

(**Fig 3e,f**). Pseudotime analysis in the IN lineage at DIV 150 similarly showed a reduced

distribution of IN towards the endpoint of the developmental trajectory ($P = 0.013$, two-sided KS

test) indicating a significant delay in the differentiation of IN as well (**Fig 3g,h and Fig S5c**).

Convergent effects on two neuronal lineages suggest that the 22q11.2 deletion may affect

developmental timelines by acting at an earlier common progenitor stage. A delay in the

differentiation of the RG-early for example, could in effect delay EN specification, but also the

specification of RG-late and MGE progenitors. To test this hypothesis, we sub-grouped

progenitors and examined their distribution along pseudotime in the combined DIV70 and

DIV150 datasets. This analysis showed a significant shift in the distribution of cells towards

earlier progenitor states along a trajectory progressing from early (RG-early) and cycling RG

(RG-div) as well as dividing intermediate progenitor cells to late RG (RG-late), MGE-RG and

MGE-IPC in patient organoids ($P = 4.53 \times 10^{-6}$, two-sided KS test) (**Fig 3i,j**). Thus, a defect

traced back to early progenitors may impact the development trajectory of both EN and IN

lineage progenitors.

Patient EN display impaired maturation signatures. The finding that NPCs are more

likely to remain in a cycling state and fail to differentiate efficiently into neurons in patient

organoids prompted us to determine whether those patient neurons that do differentiate show

further impairments in their growth, by looking for impaired maturation signatures in

morphological assays as well as in bulk RNA-seq. We transduced patient and control organoids

with an AAV-hSYN1-eGFP virus at 50-55 days and 2 weeks later we imaged them as a whole

mount for differences in neurite outgrowth. This strategy facilitated imaging of a large area of the

organoid without sectioning, thus preserving 3D cell morphology (**Fig 4a**). Immunohistochemical

analysis on these neurons showed that they express the somatodendritic marker MAP2 and the

immature neuron marker DCX (**Fig S1c**). We quantified the number of branchpoints, number of

primary neurites and total neurite length for each traced cell. We analyzed a total of 8-11

organoids per line over 3-4 separate batches generated on different dates. A total of 66-166

cells per iPSC line were analyzed. We observed a marked reduction in the neurite complexity of

the patient organoid neurons compared to control, with a significant reduction in all neurite

complexity indices (**Fig 4b**). Importantly, these differences were reliably observed in each of the

individual patient/control pairs (all three pairs analyzed above and one additional case and

matched unrelated control pair, **Fig 4b bottom panel**). A combined analysis revealed that the

reduction in neurite complexity in patient organoids was highly significant with respect to

number of branchpoints (t-test, $P = 0.013$, **Fig 4b,** upper left), neurite length (t-test, $P = 0.0209$,

Fig 4b, upper middle) and number of primary neurites (t-test, $P = 0.0038$, **Fig 4b**, upper right).

In sum, patient neurons during early forebrain development present stunted neurite growth

indicative of delayed maturation.

In parallel assays, we used the same set of patient and control organoids (8-10

organoids per line, 4 patient and 4 control lines) transduced with the AAV-hSYN1-GFP virus to

isolate GFP-positive neurons using FACS and conduct bulk RNA sequencing on sorted neurons

for molecular signatures consistent with delayed maturation. Principal component analysis

(PCA) revealed that genetic ancestry (PC1, 35.7%) and genotype (PC2, 23.7%) were the

primary sources of transcriptional variance among cortical neurons (**Fig S6**). Differential

expression analysis identified 241 genes (143 downregulated and 98 genes upregulated) that

were differentially expressed between patient and control neurons ($Padj$ < 0.05, |log2(fold

change)| > 0.5, **Fig 4c**).

We proceeded to annotate the function of the differentially expressed genes (DEGs)

performing Gene Ontology (GO) enrichment analysis. Of the downregulated genes identified in

patient neurons, the GO terms were predominantly related to neuron projection development

and differentiation as well as to protein localization in dendrites, axons and synapses (**Fig 4d**)

(**Supplemental Table 1**). Among the upregulated genes identified in patient neurons, the GO

terms enriched were related to the secretory pathway, with protein localization in endoplasmic

reticulum and Golgi apparatus (**Fig 4e**) (**Supplemental Table 1**). We also employed synaptic

gene ontologies to search for signatures of impaired maturation of synaptic functional pathways

among DEGs using the SynGO tool[32]. We found significant enrichment of synaptic genes

among the downregulated genes [22 of the 143 transcripts with decreased abundance in patient

neurons possessed a synaptic process annotation in SynGO (P = $5x10^{-5}$), with a particular

enrichment   for   transcripts   with   presynaptic/synaptic   vesicle   functions

(GO:0045202/GO:0098793, P = 0.0331), but no significant enrichment of synaptic genes among

upregulated genes (**Fig 4f**). The downregulation of synaptic genes may indicate a delay in

synapse maturation in patient neurons. Although the challenge of identifying clear synaptic

structures in brain organoids limits our ability to directly observe and confirm these

abnormalities at the morphological level, the identified molecular signatures support our

observation of curtailed development in patient ENs and reinforce the notion that progenitors in

the developing patient forebrain fail to differentiate into neurons in a timely manner

Aberrant gene expression underlying altered EN developmental trajectories. We

used the MAST differential expression analysis[33] to identify DEGs across the EN lineage that

may contribute to the aberrant unfolding of neuronal development. Gene expression profiling

and functional enrichment analysis identified several genes and genetic pathways important for

brain development and function that are altered in patient compared to controls, across various

EN developmental stages, clearly indicating that the pace of early embryonic neuronal

development of patient organoids is not properly orchestrated at the gene expression level (**Fig**

5 and Supplemental Tables 2, 3). For example, genes upregulated in patient DIV70 RG-div

(such as *CCNF, KIF20A, KIFC1, TUBA1C, KIF18B, TOP2A, CKAP2, CDCA2, CCND2,*

CDC20), are primarily involved in the regulation of the cell cycle and promotion of cell division

whereas downregulated genes (such as *PTN, CDC42, STMN4, EFNB1, EMX2, VEGFA,*

MAP4, SOX6, POU3F2, PAK3) are involved in neurogenesis and neuronal differentiation,

underscoring how, already at early stages of development, 22q11.2 locus haploinsufficiency

alters the transcriptional regulation of progenitor proliferation and differentiation (**Fig 5a,b** and

Supplemental Tables 2, 3). By contrast, genes upregulated in patient DIV70 EN are

significantly enriched for functions related to negative regulation of neurogenesis and neuron

growth and guidance pathways (such as *EPHA4, MAP4K4, HES4, LHX2, NTRK3, SEMA6A*)

while downregulated genes are primarily involved in neuronal differentiation and maturation

pathways (such as *PAK3, RBFOX2, NRP2, FZD3, ANK3, CALR, RTN4*) (**Fig 5c,d** and

Supplemental Tables 2, 3). Furthermore, as differentiation unfolds in DIV150, patient EN

display consistent signatures of impaired maturation as reflected by a lower abundance of

transcripts related to neuron migration, maturation and synaptic function (such as *SEMA6A,*

DAB1, COUPTF-1, SYN10, SYNPR) and higher abundance of transcripts that are typically

produced during periods of active neuronal growth (such as *STMN2, CNTN1, MAPT*)

(**Supplemental Tables 4, 5**).

Similar results were obtained by analysis of transcriptional regulatory networks using the

pySCENIC pipeline[34]. Transcription factor (TF) regulons with lower activity in patient RG-div are

related to nervous system development and neurogenesis. In the EN cluster, TF regulons with

lower activity in patient organoids are related to more mature stages of neuron development,

neurite growth and synaptic function (such as *SNAP25, STMN2, NRXN1, MAP1B, ANK3,*

MAPT, CRMP1), while regulons with higher activity include TFs that are typically abundant and

active during early neuronal development stages (such as *LHX2, NEUROD2, SOX4, SOX11,*

TCF4, FOXG1, POU3F3) (**Supplemental Table 6**).

To obtain a more unbiased evaluation of the genetic ensembles underlying the observed

digression from proper developmental trajectories we performed co-expression analysis on EN

lineage cells from DIV70 control organoids using a scWGCNA pipeline[35]. We identified 10

distinct WGCNA modules. Based on the number of cells expressing the modules and module

size, we narrowed down our analyses to 4 modules (**Fig 5e, f**) (**Supplemental Table 7**,

modules 2, 3, 4 and 9). The largest modules (modules 2 and 9) contain multiple genes that are

highly expressed in NPCs and are associated with cell cycle regulation. Genes in modules 3

and 4 are highly expressed in differentiated EN and are related to neuron development, neurite

outgrowth and cytoskeleton dynamics   (**Fig 5f** and **Supplemental Table 7**). Comparative

scWGNCA showed that these modules are preserved in the patient EN lineage but may have

differences in expression, density and connectivity. We computed a module score for these

gene sets based on their expression level within the EN lineage cells in case and control to

indicate if the module is up or downregulated. We further fitted the scores to a linear model with

genotype as the predictor, each individual line and batch as the random variables. We found

that both progenitor modules (2 and 9) were significantly upregulated (P = 0.002 for module 2

and P = 0.03 for module 9) in patient compared to control organoids (**Fig 5g**), further supporting

our findings that progenitors in patient organoids are more likely to remain in a cycling state.

Consistent with pseudotime progression, neuronal modules 3 and 4 were downregulated in

patient organoids compared to control, although the difference in the module score was not

significant. Interestingly ~21% and 11% of genes in modules 3 and 4 respectively overlap with

the DEGs detected in EN. Similarly, ~22% and ~34% of genes in modules 2 and 9 overlap with

the DEGs detected in RG-div suggesting that a substantial portion of DEGs contribute to the key

co-expression modules in these cell types. In sum, a sizable portion of the genes in each of

these control WGCNA modules are dysregulated in patient organoids, indicating a marked

dysregulation in the expression of crucial gene expression networks involved in neuronal

maturation due to the 22q11.2 deletion. This data provides further evidence that ensembles of

genes important for neuron development are dysregulated in progenitor cells of patient

organoids, in a pattern consistent with our observation that 22q11.2 deletions impede the pace

of early embryonic neuronal development.

22q11.2-associated genes and genetic pathways underlying altered EN

development. We further evaluated the genes and genetic pathways within the 22q11.2 locus

that contribute to the altered early neurodevelopmental trajectories in patient organoids. We first

examined the dysregulation of microRNAs (miRNAs) as a potential mechanism for the

asynchronous expression of maturation-associated genes. 22q11.2 deletion results in brain-

enriched miRNA downregulation and an increase in target gene expression due to (i)

hemizygosity of *DGCR8*[36], a component of the "microprocessor" complex that is essential for

miRNA production and (ii) hemizygosity of miRNA genes residing within the deletion[22,20]. To

assess the contribution of miRNA dysregulation to our observed cellular and RNA-seq

phenotypes we performed bulk miRNA sequencing on a pool of 8-10 DIV70 organoids from 3

patients and 3 controls. We identified 19 miRNAs that were significantly differentially expressed

in patient vs control organoids (**Fig 6a**) (**Supplemental Table 8**). Of these, 15 miRNAs were

significantly downregulated in patients (*Padj* < 0.05) (**Fig 6a**) (**Supplemental Table 8**)**,** including

hsmir-185 that resides in the 22q11.2 locus. We used the mirNet 2.0 tool[37] to perform target

enrichment and network analysis for these downregulated miRNAs and found 10 miRNA target

clusters (**Fig 6b**). GO term enrichment analysis on this target interaction network identified

categories encompassing cell cycle-related functions (**Fig 6c**), suggesting a contribution of

altered miRNA signaling to the aberrant cell cycle programming in patients.

Reduction in miRNA expression levels is largely associated with up-regulation of target

genes. Consistently, in RG-div, the major cycling neural progenitor population in our dataset, we

found that predicted target genes of downregulated miRNAs have a significant overlap with the

cell cycle and proliferation genes that are upregulated in RG-div of patient organoids (24% of

upregulated genes are putative miRNA targets, **Supplemental Table 8**). No common

cellular/molecular processes are enriched among predicted miRNA target genes downregulated

in RG-div. Functional enrichment analysis of miRNA targets overlapping with upregulated

DEGs along the entire EN lineage trajectory identified additional GO terms in early RG (RG-

early) ("RNA metabolism" and "gene expression"), intermediate progenitors ("RNA metabolism"

and "neurogenesis") and EN ("RNA metabolism" "gene expression" and "neurogenesis).

Interestingly, many of the upregulated EN DEGs that are predicted targets of the affected

miRNAs are identified as negative regulators of neurogenesis or are associated with more

immature neurons (such as *EPHA4, KDM1A, KIF5B, MAP4K4, NTRK3, PAX6, SLITRK5,*

SOX11, SOX4, TCF4, VIM). No significant GO terms enrichment was observed among

downregulated DEGs that are predicted targets of affected miRNAs in all these cellular

populations (**Supplemental Table 8**).

We also tested the overlap between miRNA target genes and those in the DIV70 neural

progenitor WGNA modules upregulated in patient EN lineage (**Supplemental Table 8**). We

found that 20% of module 2 and 26.5% of module 9 genes are predicted targets of the

downregulated miRNAs. This overlap was significant for module 9, which is associated with

regulation of proliferation (P = 0.03, 1000 permutations). These results suggest that miRNA

dysregulation may disrupt genes that maintain progenitors in a cycling state and hinder their

differentiation.

We evaluated disparities in temporal trajectories of miRNA targets between patient and

control organoids. Trajectory differences due to compromised miRNA control can be generated

by genuine increase or failure to decrease transcript abundance. We looked at the expression

trajectories of DEGs in EN lineage cell types that were also identified as target genes of

downregulated miRNAs along the latent time. We identified 3 main patterns of trajectory

divergence between patients and controls **(Fig 6d**). First, genes that are upregulated in patient

progenitors and remain upregulated over time as exemplified by *EMC10* (a regulator of

membrane protein trafficking whose upregulation impedes the acquisition of full neuronal

functionality in patient neurons and animal models[22,38,39]) and *PEG3* (a cell cycle regulator that

is typically highly expressed in progenitor cells but not in differentiated neurons[40]). Second,

genes that show upregulation in progenitors but the changes dissipate over time as exemplified

by *TCF3* (a WNT signaling antagonist that increases NPC self-renewal and represses neuronal

differentiation[41,42]). Third, genes that show an upregulation at intermediate or late developmental

timepoints but not at early progenitors as exemplified by *MAP4K4, SOX11* and *TCF4* (genes

shown to inhibit neurite growth in differentiated neurons[43,44]).

Finally, we estimated in an unbiased fashion, the contribution of additional 22q11.2

genes to the signaling pathways and networks underlying the affected biological processes. We

first derived a Protein-Protein Interaction (PPI) network of all DEGs (see Methods) for each

affected cell type in the EN lineage using the STRING database[45]. We conducted a centrality

analysis of each PPI network to rank the relative importance of each node using centrality

scores (see Methods) and determined the 22q11.2 genes that are important for the network. For

the PPI network in RG-div, we found that RANBP1[46] and HIRA[47] had higher scores. For the PPI

network in EN, we found PI4KA [48]and HIRA as the highest-scoring genes (**Fig 6e**). Despite

limitations of this approach (i.e proteins such as DGCR8 that exert their effects via

transcriptional and translation regulation instead via interacting with other proteins may not be

weighted equally in the network), these results suggest that alterations in discrete sets of

22q11.2 genes are involved in deviations of protein interaction networks that contribute to

distinct cellular and temporal aspects of neurodevelopmental trajectories. Overall, our analysis

supports the notion that the high risk of atypical early neuronal maturation programs in patients

is the result of concerted (parallel and sequential) actions of multiple genes on focal

mechanisms instead of the effects of a single gene or pathway deficit.

Aberrant gene expression in other cell types: While ENs are often the primary focus

in studies of 22q11.2 deletion syndrome, there is growing recognition of the critical role of other

cell types in this pathology[49-52]. Notably, our analysis reveals abnormal developmental

trajectories and gene expression patterns in the IN lineage (**Supplemental Tables 4, 5**),

indicating complex neurodevelopmental disruptions. Specifically, genes dysregulated in patient

DIV150 INs are primarily involved in "neuron projection morphogenesis", "regulation of

transcription", "regulation of cell cycle" as well as "regulation of glycolytic processes" indicating

potential disruptions in neuronal development, cellular homeostasis, and metabolic pathways

critical for interneuron maturation and function. The presence of INs in dorsal brain organoids,

while previously described[49,51,52], raises questions about their origins[53]. Recent evidence

suggests an additional locus of interneuron generation in the human dorsal cortex[54], but the

majority of cortical interneurons are typically generated in ventral regions[55,56]. Our findings

indicate that 22q11.2 hemizygosity results in additional defects in cortical interneuron

development and potentially their function, underscoring the importance of ventral brain

organoid models to further investigate interneuron dysfunction in 22q11.2DS[57].

Additionally, we observed significant gene expression alterations, but no changes in cell

abundance, in non-neuronal cell types such as astrocytes and the choroid plexus

(**Supplemental Tables 2-5**), indicating that the 22q11.2 deletion affects developmental

processes beyond neuronal populations. In patient DIV150 astrocytes, for example,

dysregulated genes are primarily involved in 'neurogenesis' and 'mitochondrial ATP synthesis

coupled electron transport.' These findings suggest potential interactions between neurons, glial

cells, and cerebrospinal fluid (CSF), highlighting the need for further investigation into the

broader implications of these deletions on brain development and function.

Aberrant gene expression in EN lineage displays signatures of neuropsychiatric

genetic liability. The growing appreciation that childhood neurodevelopmental disorders and

the early developmental antecedents of SCZ may share genetic liability[58] prompted us to ask

whether the aberrant transcription program underlying impaired maturation contains relevant

genetic signatures. Specifically, we asked if the aberrant transcripts in the EN lineage of patient

organoids involve genes identified as harboring rare coding damaging variants in exome

sequencing analysis of patients with SCZ, autism spectrum disorders (ASD) and developmental

delay/intellectual dysfunction (DD-ID). To achieve adequate statistical power, we analyzed

DEGs in cell clusters with at least 100 DEGs at both DIV70 and 150 using the DNENRICH

pipeline and curated reference patient datasets (see Methods) for genes carrying rare LoF

variants, including genes very likely to be intolerant to LoF variations as measured by the

probability of LoF intolerance (pLI) score[59], which ranks genes from most mutation tolerant (pLI

= 0) to most intolerant (pLI = 1) and is widely used to prioritize candidate disease genes. Genes

carrying rare synonymous variants were used as a control.

Our rare-variant burden analyses revealed a significant overlap between the expression

changes in genes harboring LoF variants and a wide range of cell types in the EN lineage,

particularly at later developmental stages. (**Fig 7**). Notably, DEGs harboring LoF variants in SCZ

cases are most consistently enriched in EN (including genes such as *GRIA3, BOD1L1, EIF2S3,*

FABP7, POTEF, SLITRK5, ZMYM2, ANKRD12, KDM6B) whereas DEGs harboring LoF

mutations in ASD are most consistently enriched in neural progenitors (IPC-nEN) (**Fig 7a)**. For

all three disorders, the set of highly mutation intolerant (pLI≥0.9) DEGs harboring rare LoF

variants displays a wider cellular representation within the EN lineage. (**Fig 7b)**. As expected,

enrichment signals are absent for synonymous variants (**Fig 7c)**. Our findings suggest that

during early brain development transcripts dysregulated in differentiating neurons of 22q11.2

deletion carriers are enriched for products of genes that when mutated increase the risk for SCZ

and neurodevelopmental disorders.

DISCUSSION

In this study, we generated forebrain organoids from iPSCs derived from patients with

22q11.2DS and SCZ. To minimize variability due to the heterogeneity in disease penetrance

and clinical presentation, we selected iPSC lines from patients with the same 3Mb deletion and

similar clinical severity. Genetically related, age-matched sibling pairs were also included for

comparison. It has been shown that key variability in iPSC-based models arises from

differences across individuals[60-62]. To account for this, we prioritized the analysis of multiple

patient iPSC lines, thereby improving the generalizability of disease phenotypes while

controlling for genetic background variability. Our PCA analysis confirmed that genetic ancestry

and genotype are the primary contributors to transcriptional variance in cortical neurons,

validating that our experimental design effectively captures phenotype variability while

minimizing confounding from hiPSC line variability.

In the context of 22q11.2DS, previous studies have begun to address the

neurodevelopmental consequences of the 22q11.2 3Mb deletion in patient-derived neuronal

cultures[23,63-67]. However, our study is the first to detail the developmental trajectory of iPSC-

derived neurons from patients with the 22q11.2 3Mb deletion and SCZ under biologically

relevant conditions. By leveraging a forebrain organoid culture system that supports

spontaneous differentiation into diverse cell types, we provide a more representative model of

neurodevelopmental processes. The ability of patient and control organoids to faithfully

recapitulate the expected 22q11.2 gene expression profile, combined with consistent molecular

and cellular findings across organoid batches, rules out random developmental variability as the

source of the observed aberrations.

Single-cell RNA sequencing (scRNA-seq) and orthogonal experimental validation

revealed a delay in neuronal differentiation and maturation in patient organoids during periods of

active neurogenesis, DIV70 and DIV150 of organoid development, which strongly correspond to

the fetal human telencephalon between 7-37 weeks post-conception[53]. Specifically, scRNA-seq

quantification of EN lineage cells showed a nominally significantly reduced proportion of

differentiated neurons in patient-derived organoids compared to controls. Pseudotime trajectory

analysis of DIV70 and DIV150 EN lineage revealed a diminished representation of patient cells

in the terminal, mature neuron phase of the trajectory. In agreement with the scRNA-seq data,

we observed a marked reduction in the fraction of mature (CTIP2+) neurons in patient-derived

DIV20 neurospheres and a significant decrease in cortical plate (CP) thickness in patient DIV45

organoids compared to controls. Bulk RNA-seq on sorted neurons identified a significant

enrichment of downregulated synaptic genes, with no such enrichment among upregulated

genes, indicating a delay in synapse maturation. Consistent with this, gene expression profiling

by scRNA-seq revealed that genes downregulated in patient-derived DIV70 EN cells were

primarily involved in neuronal differentiation and maturation, while upregulated genes were

enriched for pathways related to the negative regulation of neurogenesis, neuron growth, and

axon guidance. These molecular disturbances were paralleled by morphological abnormalities,

such as sparser neurites and electrophysiological deficits, including reduced amplitude of

glutamate-induced calcium transients.

In line with the marked decrease in mature neuron production, our 3D immunostaining

analysis of DIV70 organoids revealed a significant increase in the proportion of actively

proliferating NPCs (Ki67-positive/SOX2-positive) in patient-derived organoids, consistently

observed across all control and patient pairs. However, the total number of NPCs (SOX2-

positive) remained unchanged. While scRNA-seq quantification of EN lineage cell types showed

a nominally significant higher number of dividing progenitors, pseudotime trajectory analysis as

well as calculation of velocity streams and differentiation potential in the DIV70 datasets

indicated that EN lineage cells in patient organoids tend to remain in progenitor states longer

compared to controls. Moreover, our neurosphere and PIP-FUCCI sensor assays confirmed that

patient NPCs exhibit a lower proliferation rate and slower differentiation into neurons compared

to controls, as evidenced by a lower proportion of cycling NPCs in the S phase, an accumulation

in the G1 phase, and a reduced number of neurons in patient samples. Proliferation deficits may

be masked by delayed cell cycle exit in patient NPCs at later developmental stages, when

neurogenesis becomes predominant, ultimately resulting in a total patient NPC count

comparable to controls. Further supporting our conclusion that patient NPCs exhibit altered cell

cycle dynamics, scRNA-seq-based gene expression profiling and WGCNA revealed that genes

upregulated in patient DIV70 RG-div, the primary dividing NPC population, were predominantly

involved in cell cycle regulation and the promotion of cell division. In contrast, downregulated

genes were associated with neurogenesis and neuronal differentiation. Together, these

orthogonal results suggest delayed differentiation of progenitors in patient organoids. The minor

discrepancies between immunostaining and scRNA-seq-derived findings may reflect broader

challenges in reconciling scRNA-seq-derived molecular signatures, which distinguish cell types

based on co-expression of rare or low-expression transcripts, with classical immunostaining,

which relies on more abundant, well-characterized protein markers. This distinction is

particularly important when examining dynamic transitions between cellular states

(neurogenesis) versus stable endpoint states (mature neurons).

Interestingly, analysis of cell distribution along the pseudotime trajectory also suggests

that the 22q11.2 deletion may delay acquisition of neuronal fate as early as the radial glial

stage, prior to the onset of neurogenesis. This interpretation aligns with recent findings that the

rate of neuronal maturation in humans is predetermined before neurogenesis, through the

establishment of a 'barrier' in progenitor cells formed by various chromatin regulators, which is

then propagated to newborn neurons[68]. However, additional disruptions caused by the 22q11.2

deletion along the temporal progression from neural precursors to post-mitotic neurons may

further impede the acquisition of full neuronal morphology and functionality[18].

The timing, magnitude, and spatial distribution of delayed neuronal maturation likely

leads to regional changes in brain structure, connectivity, and activity patterns early in brain

development. These changes may propagate to later prenatal and postnatal stages, contributing

to the behavioral and cognitive symptoms associated with 22q11.2 deletions. Brain imaging

studies in children with 22q11.2 deletions report region-specific alterations in cortical thickness

and surface area across several brain regions[69-73]. During brain development, cortical thickness

and surface area are affected by complex interactions among progenitor cell divisions, neuron

growth and neurite branching[74-78]. Therefore, it is plausible that the altered proliferation

dynamics and expansion of progenitor cells, coupled with impaired neuronal growth and

differentiation (as observed in patient organoids), could contribute to the reported imaging

findings. However, the precise mechanisms connecting these neurodevelopmental alterations

with the observed brain imaging differences remain to be clarified.

Transcriptomic analyses of key cell types highlight that 22q11.2 deletions lead to

pervasive and improperly orchestrated gene expression alterations in a wide range of cell types

and ensembles of genes across the entire EN lineage. This analysis underscored biological

pathways crucial for neuronal development and function that are affected by 22q11.2 deletions

during human early brain development. Previous studies using mouse models of the 22q11.2

deletion have established a clear link between altered miRNA biogenesis and the resulting

behavioral and circuit changes associated with this genomic alteration [20,36,38]. Specifically, Dgcr8

haploinsufficiency has been shown to significantly contribute to the transcriptional changes in

the adult brain of these mutant mice [20]. Furthermore, the 22q11.2 deletion leads to abnormal

miRNA processing in monolayer cultures of patient iPSC-derived neurons, with functional

consequences on their transcriptome as well as electrophysiological and synaptic

properties[23,63,79]. In alignment with these findings, our analysis of patient-derived organoids

revealed that miRNA dysregulation can affect gene expression in a cell-type specific manner,

altering both the levels and the temporal dynamics of genes critical for neuronal development

and maturation. These disruptions in gene expression patterns may hinder the initiation and

progression of maturation programs, echoing existing evidence that miRNAs play crucial roles in

regulating temporal transitions during development[80-82], including in human brain development[83].

This underscores the importance of understanding miRNA dynamics in the context of 22q11.2

deletions, as they may be pivotal in mediating the neurodevelopmental impacts of this genomic

lesion. Noteworthy targets of miRNA dysregulation include epigenetic regulators such as EZH2,

a key component of a recently identified epigenetic barrier to maturation, which is established

before the onset of neurogenesis[68]. EZH2 was upregulated in RG-early of DIV70 patient

organoids (*Padj* = 0.001, S**upplemental Table S2**). This raises the interesting possibility that

the effects of miRNA dysregulation at this early stage may be mediated, at least in part, via the

epigenetic machinery. Another noteworthy target is the EMC10 gene, which shows an altered

temporal expression trajectory across the entire EN lineage at DIV70, with significant

upregulation in patient RG ($P = 1.56 \times 10^{-6}$), IPC-nEN ($P = 5.3 \times 10^{-5}$) and EN ($P = 7.3 \times 10^{-6}$) but

not in astrocytes, choroid or interneuron lineage cells (**Supplemental Table 2**). Indeed, effective

knockdown of EMC10 to near wild-type levels in patient iPSC-derived neurons restores key

morphological and functional EN alterations caused by 22q11.2 deletions[22]. Furthermore,

normalization of Emc10 levels in either the developing or adult mouse brain rescues several

cognitive deficits associated with 22q11.2DS[22,31]. These findings establish a clear link between

miRNA regulatory mechanisms and aspects of the clinical manifestations observed in 22q11.2

deletion carriers and they highlight the potential of transcriptomic changes in patient organoids

to serve as a pool of therapeutic targets with translational value.

While altered miRNA biogenesis may affect the pace of neuronal development, it is likely

not the sole driving factor. Findings from both human genetic and animal model studies suggest

that the deficits observed in 22q11.2 deletion carriers result from the cumulative and concerted

actions of multiple genes within the deleted region, acting over developmental time and

space[8,84,85,86]. This is supported by our PPI (protein-protein interaction) centrality analysis, which

indicates that 22q11.2 genes, in addition to DGCR8, may make complementary contributions to

the altered signaling pathways in distinct cell types and developmental stages. We identified

RANBP1, HIRA and *CLTCL1* as key candidates underlying perturbations of protein networks at

the early radial glial stage. Similarly, HIRA and PI4KA were identified as key component of

regulatory protein networks affected in embryonic EN. These findings suggest that a multi-level

experimental approach is needed to understand the integrated contributions of the deleted

genes, which could guide therapeutic interventions.

Our results are in good concordance with prior studies of iPSC-derived neurons from

patients with the common 22q11.2 3Mb deletion, particularly with respect to disrupted EN

maturation[23,63-67]. However, some discrepancies were observed, likely reflecting variations in

experimental conditions, differentiation protocols, or patient-specific factors, which warrant

further investigation. Specifically, proliferation assays of iPSC-derived NPCs obtained from

controls and patients with 22q11.2 deletion syndrome diagnosed with a psychotic disorder

showed a trend toward decreased proliferation[64]. Additionally, previous analyses of

neurospheres derived from hiPSCs of two patients with the 22q11.2 deletion and SCZ also

provided evidence of impaired neurogenesis and neurite outgrowth[65]. While not explicitly

analyzing neurogenesis, Nehme et al.[67] performed RNA sequencing during three stages of EN

differentiation using iPSCs from 22q11.2 deletion carriers (many with SCZ) and controls,

employing an NGN2 overexpression protocol to induce neuronal differentiation. They identified

significant alterations in genes and pathways related to proliferation in NPCs as well as to

activity-dependent gene expression and synaptic biology (in mature neurons), consistent with

impaired synaptic maturation. Functional assays confirmed reduced synaptic functionality in

22q11.2 deletion neurons. In contrast, Li et al. [66]using a similar 2D neuronal differentiation

protocol, reported no synaptic deficits but instead highlighted mitochondrial impairments,

including reduced mitochondrial DNA-encoded proteins, ATP production, and complexes I and

IV activity. In our dataset, dysregulation of genes encoding mitochondrial membrane proteins

was primarily observed in progenitor neurons (nENs) (**Supplemental Table 3**).

A recent study[23] using scRNA-seq analysis of cortical spheroids derived from two

patients with the 22q11.2 deletion (SCZ diagnosis unknown) and two controls reported similar

cell diversity across groups, suggesting no major defects in corticogenesis. The reasons for the

discrepancy with our findings are unclear but likely multifactorial. Potential contributing factors

include differences in clinical phenotype severity, the small sample size, and suboptimal

matching of patient and control lines by age, sex, or genetic background, which may obscure

transient developmental alterations. Additionally, differences in experimental conditions and

developmental stages between the two studies may have influenced the results. Indeed, re-

analyzing the scRNA-seq data from Khan et al.[23] using our pipeline and, after standard QC, we

found very few radial glia-dividing (RG-div) cells—suggesting their cortical spheroids were at a

more mature stage, with diminished proliferative features. Comparing our bulk RNA-seq DEGs

with theirs revealed minimal overlap outside the deletion region (7 genes: *PALM, SLC39A12,*

LRWD1, ZNF502, MMP17, AC093866.1, AC020604.1), likely reflecting differences in cell

composition, as their data came from whole organoids and ours from purified cortical neurons.

Among shared DEGs, we identified *PALM*, involved in palmitoylation-dependent synapse

formation[87], which is particularly relevant given the deletion of *ZDHHC8*, a palmitoyl transferase,

in 22q11.2DS[19,88]. Comparing their top 50 excitatory neuron DEGs to our 442 revealed 8

overlapping genes (*CNTNAP2, NTS, GPM6A, GRIA2, SOX4, NSG1, NTM, LY6H*), many

involved in synapse and neuronal projection function. Notably, Khan et al.[23] also reported

blunted calcium signaling in patient-derived cortical neurons, consistent with our findings.

In the context of SCZ, the primary psychiatric manifestation associated with 22q11.2

deletions, our findings align with reports of aberrant NPC proliferation and impaired

differentiation observed in SCZ patient iPSC-derived neuronal and neural organoid models

(reviewed in ref[59]). However, it is important to note that many of these studies face challenges in

addressing confounding factors, such as genetic heterogeneity, and, in some cases, in clearly

identifying the precise identity and type of neurons being assessed. Existing findings suggest

that NPCs struggle to properly differentiate into mature neurons, indicating a mechanism where

either a smaller initial NPC pool or impaired differentiation contributes to reduced neural density

later in the disease, with the underlying molecular causes varying among patients due to the

genetic heterogeneity of the condition[89,90]. Additionally, differentiated glutamatergic ENs exhibit

defects in neurogenesis and morphological changes, such as impaired dendritic arborization,

which are further associated with functional impairments, as patient neuronal subtypes

frequently demonstrate reduced synaptic connectivity[91,92]. Interestingly, these results contrast

sharply with recent studies showing accelerated maturation of the same neuronal lineages in

brain organoid models carrying mutations in specific autism spectrum disorder (ASD) risk

genes[93]. This divergent pattern of maturation is in line with human genetic studies that have

repeatedly identified 22q11.2 deletions as top hits in studies of SCZ but not ASD genetic risk[94].

Importantly, previous studies have shown that SCZ risk genes targeted by rare *de*

novo mutations often exhibit highest expression during the prenatal period[95]. Many prenatally-

biased risk genes are highly expressed during the first and second trimester of pregnancy, a

period of active cortical neurogenesis and a vulnerable time for brain development due to highly

dynamic changes in gene expression, high level expression of genes intolerant to mutations and

increased susceptibility to environmental insults[83,96,97]. Consistently, we have shown that genes

carrying SCZ rare risk variants are enriched among DEGs in patient organoid neurons. This

supports the notion that, for a fraction of patients with SCZ, genetic liability may affect the pace

of early brain developmental trajectories similar to the ones described here. In that context, our

findings may be generalized to other genetic causes of SCZ, especially ones with large effect

mutations and have the potential to facilitate the pursuit of preventive and therapeutic

interventions.

METHODS

hiPSC generation and characterization: Q5, Q6, Q1, and Q2 iPSC lines were

generated as described previously[22,98] at the Columbia Stem Cell Core via non-integrating

Sendai virus-based reprogramming of monocytes from a donor with 22q11.2DS and SCZ and a

healthy sibling control. We confirmed that all iPSC lines maintain their stemness using RT-PCR

and immunostaining for stem cell markers (NANOG, OCT4/SOX4, SSEA-4 and TRA-1–60[22].

Given the importance of genetic testing of iPSC lines[99,100], we confirmed their genomic stability

through G-banding karyotype analysis and verified the genotypes and size of the 22q11.2

deletion using a multiplex ligation-dependent probe amplification (MLPA) assay[98]. Clinical

information on patients is provided in ref[101]. Q1/Q2 is pair of siblings; Q5/Q6 is pair of dizygotic

twins discordant for the 22q11.2DS and SCZ. The newly generated iPSC lines have been

deposited in the NIMH repository. QR19, QR23, QR20 and QR27 lines were obtained from the

NIMH Repository and Genomics Resource (http://www.nimhstemcells.org/)[64]. Usage of these

iPSC lines has been approved by the Columbia University Embryo and Embryonic Stem Cell

Research Committee (ESCRO). Sample usage in downstream analysis is summarized in

Supplemental Table 10.

Generation of dorsal forebrain cerebral organoids: We generated dorsal forebrain

patterned organoids using a protocol that was adapted from Kadoshima et al[21]. At DIV 40,

organoids were transferred to maintenance media containing 1% N2 and 2% FBS. After DIV 80,

they were maintained in media containing 1% N2, 2% FBS and 1% B27 supplement.

Bulk RNA-seq: We used a set of patient and control organoids at DIV70 (8-10

organoids per line, 4 case and 4 control lines). The organoids were transduced with the AAV-

hSYN-GFP virus two weeks before DIV70 (Addgene, 105539-AAV1). We dissociated the

transduced organoids using papain digestion (Worthington, LK003160) and sorted the GFP

positive neurons by FACS. Neurons were lysed in TRIzol reagent (Thermo Fisher Scientific,

15596026) and total RNA was extracted from the cells using Qiagen RNeasy Kit (Qiagen,

74104). Quality control checks using a Bioanalyzer (Agilent 2100 bioanalyzer) were performed

to ensure the RNA Integrity Number (RIN)>9.0 for all samples. Library preparation and RNA

sequencing were conducted to generate 20 million paired-end reads at the Columbia Genome

Center on Illumina Novaseq 6000 instrument using STRYPOLYA library prep kit. Raw reads

were processed and aligned to human genome (hg38) using the STAR alignment tool[102]and the

gene count matrix generated was analyzed using the DeSEQ2 pipeline to identify the DEGs[103].

The genes with LFC>0.2 and an adjusted P<0.05 were considered as DEGs in downstream

analysis. PCA analysis was conducted using iDEP[104]. GO term enrichment was performed using

the G:Profiler tool[105]. The PPI network was analyzed using string-db (https://string-db.org).

, **miRNA-seq**: Total RNA extraction with miRNA enrichment was performed using the Vana™

miRNA Isolation Kit (Thermo Fisher Scientific, AM1561). Total RNA quality and quantity was

assayed with Bioanalyzer 2100 (Agilent, CA, USA), with RIN number >7.0. Approximately 1 □g

of total RNA was used to prepare small RNA library according to the protocol of TruSeq Small

RNA Sample Prep Kits (Illumina, San Diego, CA, USA) and single-end sequencing 50bp on an

Illumina Hiseq 2500 (following the vendor's recommended protocol) was conducted as

described in ref[101]. For the GO-term enrichment analysis of the target genes of differentially

expressed miRNAs (153/133, DEmiRs), the webtool miRNet 2.0 (https://www.mirnet.ca/) with

standard settings (tissue: all, targets: genes [TargetScan]) was used[106]. Analysis of the overlap

of dysregulated genes and miRNA targets was performed by converting the gene lists to their

corresponding genomic coordinates. To assess the significance of the overlap between gene

sets, we extracted the genomic coordinates of all genes that were expressed in the organoids

(determined by their expression levels in scRNA-seq) as the search space and used the

randomization function in RegioneR to "resample" the regions that only contain the genes in the

search space[107]. One randomly "resampled" region set had the same size as the dysregulated

genes, while the other randomly "resampled" region set had the same size as miRNA targets.

The number of overlaps between these two region sets was determined by RegioneR and 1000

permutations were performed to generate a frequency distribution of random overlaps between

two region sets to determine the empirical p value of the actual overlaps.

scRNA-seq: We generated a high viability (>90%) single cell suspension from 3 pairs of

70-day and 150-day old organoids, a total of 6 distinct lines with 3 organoids per line at two time

points. The single cell suspension was sequenced on the 10x Genomics platform at the

Columbia Genome Center. Our analysis workflow included (i) aggregation of all data (12

datasets from 6 samples and two time points) with depth normalization[108] (ii) Quality Control

(Scanpy) [24,109] (iii) Normalization (Scran[110]), (iv) Integration (LIGER[111]), (v)Clustering (Leiden[25]),

(vi) Differential Gene Expression Analysis (vii) Visualization (UMAP[112]) (viii) Cell type annotation

(SingleR[27]). We used a recently published dataset that classified the signature transcriptomic

profiles of the cell types within the human fetal forebrain at various stages of development[26], as

a cell type signature reference to annotate the cells in our data. We used a custom-built

stratified subsampling approach to validate cell type annotations and calculated the percentage

of times a particular annotation is assigned to a cell over multiple random training permutations

on stratified subsamples (https://github.com/BinXBioLab/scRNAseq). Next, we defined high-

confidence annotations as those that had a higher percentage than random assignments and

ensured that 98% of our cell type annotations were high-confidence. The number of cells in

some neuronal subtypes is too small, limiting the scope for further analysis. To address this, we

grouped such subtypes into their major cell types to increase statistical power. Additionally, we

excluded cell types with a total cell count of fewer than 50 from further analysis. We compared

cell type abundance differences using Milo[28]. We conducted an analysis of DEGs in various cell

type populations using a significance testing under the Hurdle model implemented the MAST

pipeline[33] to calculate the p value and Coeff (log odds of expression) between genotypes..

For WGCNA analysis of control organoids at DIV70, we converted the scRNA-seq

dataset into Seurat format, subset cells in the EN lineage and used the scWGCNA pipeline with

default settings and using top 2000 variable genes for the analysis[35]. After the WGCNA modules

were identified, we scored the expression of module genes in both patient and control datasets

at DIV70 using the "scanpy.tl.score.genes" function and compared the expression scores of

these WGCNA modules using a linear model with each individual iPSC line as random variable

and genotype as a predictor as described previously[93].

To assess developmental trajectories, we employed two approaches. First, we used

Monocle3 [113] to assess pseudotime trajectories of different developmental lineages in our

scRNA-seq dataset. For each lineage and DIV, we plotted Ridgeline plots of cell distribution

along pseudotime and performed the KS test to assess if the distributions were significantly

different between patient and control organoids[93]. Second, we used the scVelo tool [31] to

analyze RNA velocity of individual cells in batch-corrected patient and control organoid datasets

as a whole, followed by an analysis of differentiation potential and absorption probability using

the CellRank tool[30]. Latent time represents an internal clock of each cell based on its

transcriptional dynamics and reveals the time a cell stays in the current status before it transits

to the next cell fate status.

For analysis of transcription factor regulatory networks, we used the pYSCENIC

pipeline[114]. First, we generated a representation of the DIV70 dataset in TF space and

confirmed that our cell representation is consistent with cell-type annotation within this space.

For example, we could detect enhanced activity of the neuronal transcription factors NEUROD1

in the neuronal clusters while the stem and progenitor cell marker SOX2 has a higher activity in

the radial glia and dividing progenitor clusters. After we identified differentially active TF

between patients and controls in various cell types, we compiled the top differentially active TF

and their downstream effector genes (regulons) and conducted GO term enrichment analysis on

the effector genes. GO term enrichment of DEGs obtained from the above analysis was

performed using G:Profiler[105]

Analysis of cell proliferation features: First, to assess the proportion of dividing cells,

organoids were fixed as described above. Organoids were subjected to 3D immunostaining

using a protocol modified from the iDISCO whole-mount staining protocol

(https://idisco.info/idisco-protocol/) that allowed 3D imaging of a large area and depth (200µm)

of the organoid. Samples were washed, permeabilized in 0.2% TritonX-100 for 24 hours at 37°C

and blocked in 10% Horse serum and 0.2% TritonX-100 for 24h at 37°C. Primary antibodies

were then added along with 10ug/ml Heparin, 3% Horse serum and 0.2% Tween-20 for 50

hours at 37°C. Primary antibodies used for cell cycle analyses were rabbit anti- Ki67 (Abcam,

ab15580, 1:200) and goat anti-SOX2 (R&D Systems, AF2018-SP, 1:200). Samples were then

washed and treated with secondary antibodies (donkey secondary antibodies Jackson

Immunoresearch) at 1:300 dilution for 36 hours. Samples were then incubated overnight with

DAPI, washed and then mounted in RapiClear medium (SunJin Labs, RC149002) in 18 well

chamber slides (Ibidi, 8187) overnight for clearing and imaging on W1-Yokogawa Spinning Disk

Confocal (Nikon Instruments, Tokyo, Japan) at 40x magnification. To analyze the images, the

DAPI channel was first segmented using ilastik[115] to provide a binary segmentation mask of the

nucleus foreground from the background. Binary erosion of the DAPI mask was performed on

Fiji[116] to remove noise points. The "distance transform watershed 3D" method from

MorphoLibJ[117] on Fiji was used to extract and distinguish individual DAPI nuclei and assign

them unique mask ID. Within the cell mask of each individual DAPI nucleus, the signal in other

channels (SOX2, Ki67) was measured using customized Python code and a cut-off threshold

was applied to determine cell identity. The thresholds were manually chosen based on each

image and were further proofread. Cell proportions were compared using the KS test, $p<0.05$

was the significance threshold. Second, to determine the proportion of cycling cells in each of

G1, S and G2/M phase, we employed a lentiviral PIP-FUCCI biosensor[118] from Addgene

(pLenti-PGK-Neo-PIP-FUCCI plasmid #118616). Concentrated viral supernatant was

transduced into 2D culture purified NPCs overnight. Fresh medium was then replaced and

NPCs were further cultured for 5 days before fixation with 4% PFA. Imaging was performed

using an Olympus iX81 inverted microscope using 10x objective lenses with DAPI, Venus and

mCherry channels. Cell segmentation and counting were performed using a modified protocol

with the TrackMate plugin in Fiji[119]. The difference between the percentage of patient and

control NPCs at each cycling phase was determined by a student t-test. All experiments were

repeated three times. Third, to determine the neurogenesis features of NPCs, a FACS-based

analysis was conducted. Specially, DIV 20 NPCs were cultured in the differential medium for 10

days and then first dissociated into single cell suspensions using papain digestion (Worthington

Biochemical), followed by fixation and permeabilization with eBioscience™ Foxp3/Transcription

Factor Staining Buffer Set (Thermofisher). Primary antibody (SOX2, CTIP2) incubation was

conducted at 4 °C overnight. Following a washing step with PBS, cells were incubated with

1:500 Alexa Fluor secondary antibodies (Thermofisher) for 1hr at room temperature. Analysis

was performed on a NovoCyte (Penteon) flow cytometer. 100-500K events were acquired for

each sample with fluorescence measured in logarithmic scale. Cells incubated only with

secondary antibodies served as background fluorescence, and were used to set the gating

parameters. After exclusion of cell aggregates and small debris by forward and side scatter

gating, data were analyzed using the NovoCyte software and plotted in a histogram format.

Fluorescence gates were set below 2% of blank histogram and events corresponding to a

fluorescence signal exceeding this percentage were considered as positive events. The

difference between percentages of patient and control NPCs at each cycling phase was

determined by a two-sided student t-test.

Analysis of neuronal morphology: We analyzed organoids at DIV70. At DIV55, we

infected organoids for 2 weeks with the AAV1-hSYN-eGFP virus (Addgene, 105539-AAV1),

which directs expression of eGFP under the neuron-specific synapsin promoter. At DIV67, we

placed the organoids onto a glass coverslip and immobilized them in a droplet of 50% Matrigel

in culture media (Corning, 354277). At DIV70, organoids were fixed in 4%PFA (Biotium, 22023)

for 3h at RT and then blocked for 1.5h at RT in 0.3% Triton-X and 10% horse serum

(catalog#H0146, Sigma-Aldrich, St. Louis, MO, USA) solution. After fixation, organoids were

stained with the primary got anti-GFP antibody (Rockland, 600-101-215, 1:500) to amplify the

fluorescence signal in a 0.1% Triton-X and 2% horse serum solution overnight at 4°C.

Coverslips were then washed 3x15 min with DPBS (catalog#D8537, Sigma-Aldrich, St. Louis,

MO, USA) and cells were incubated for 2h with the secondary antibody at room temperature

followed by 3x15 min DPBS washing. Organoids were imaged as a whole mount on W1-

Yokogawa Spinning Disk Confocal (Nikon Instruments, Tokyo, Japan) at 40x magnification to

facilitate imaging of a large area of the organoid without sectioning and thus preserving the cell

morphology. We generated 3D traces of individual neurons using Imaris (Bitplane). We

quantified the number of branchpoints, number of primary neurites and total neurite length for

each traced cell. We analyzed a total of 8-11 organoids per line over 3-4 separate batches

generated on different dates. A total of 66-166 cells per iPSC line were analyzed at DIV70. In

addition to immunostaining for GFP, in a subset of organoids, we performed immunostaining for

the somatodendritic marker MAP2 (chicken anti-MAP2, Abcam, ab5392, 1:500) and immature

neuron marker DCX (mouse anti-DCX, Santa Cruz Biotech sc-271390, 1:250) to assess cell

development and neurite specification.

Analysis of organoid growth: To analyze global organoid growth, organoids were

imaged weekly using a bright field microscope (4x objective, Zeiss Primovert inverted

microscope). Fiji[116] was used to trace the border of the organoids and define regions of interest

(ROIs). For each time point, 2 parameters were measured; the perimeter of the ROI and the

area enclosed by the ROI. These two measurements were used to track organoid size over

time.

Ca^{2+} imaging: We constructed a novel Lentivirus vector driving GCAMP6s expression

(Lenti-Ubi-mRuby2-GSG-p2A- GCAMP6s). Organoids were transduced with the Lentivirus

vector 14 days prior to recording. Ca^{2+} activity as indicated by GCAMP6s fluorescence intensity

was assessed visually prior to image acquisition. GCAMP6s signal was recorded for 25 min

using an Olympus IX81 epifluorescence microscope at 4x magnification, with a frame rate of 1

frame per second (fps) and recorded for 1500 frames. At the 500 second mark, a glutamate

solution was added to the culture medium at a final concentration of 100M. Ca^{2+} activity was

measured in a set of organoids that had been cultured for days 90, 168, 238 and 259 to

determine optimal timepoint for Ca^{2+} activities. Images were stabilized with a stabilizer plugin in

ImageJ. Denoising, segmentation and Ca^{2+} event detection were performed using a CalmAn-

based pipeline[120]. Ca^{2+} activities with DF/F local maxima value higher than five times the

standard deviation from baseline were classified as one firing event. For Ca^{2+} event peak

heights, only cells with temporally non-overlapping and distinguishable Ca^{2+} events were used,

and only the Ca^{2+} event in the middle in temporal order was used in cases when one cell has

multiple Ca^{2+} events.

Analysis of the overlap between genes harboring rare LoF risk variants and EN

lineage cell types: We used DNENRICH[121] for calculating the permutation-based significance

of gene set enrichment among genes hit by *de novo* mutations accounting for potential

confounding factors such as gene sizes and local trinucleotide contexts. DNENRICH analyses

were performed using 100,000 permutations. The following inputs were used for this analysis: 1)

gene name alias file: the default dataset included in the DNENRICH package, 2) gene size

matrix file: the default dataset included in the DNENRICH package (for RefSeq genes), 3) gene

set file: the set of DEGs identified by the MAST analysis of individual cell types; all genes were

equally weighted, 4) mutation list files: lists of genes (equally weighted) carrying LoF DNMs in

SCZ, ID/DD, NDD and ASD from denovo-db SSC and non-SSC. For SCZ we also added

significant and nominally significant DNMs from the SCHEMA dataset (p<0.05,

https://schema.broadinstitute.org/results) and 5) background gene file: the default gene list in

the gene size matrix. The numbers of LoF DNMs in SCZ, ID/DD, ASD were 1657, 1373, 997

and the respective numbers of synonymous mutations were 3610, 794, 1644. For analyses

restricting the input LoF DNMs to those in genes intolerant to LoF mutations, we used pLI

scores≥0.9[59].

Protein-protein interaction (PPI) network analysis: We used the search tool for

retrieval of interacting genes (STRING) (https://string-db.org) database, which integrates both

known and predicted PPIs, to seek potential interactions between DEGs and visualize functional

interactions of these proteins. Active interaction sources, including text mining, experiments,

databases, and co-expression as well as species limited to "Homo sapiens" and an interaction

score > 0.4 were applied to construct the PPI networks. A centrality analysis on each PPI

network was conducted to estimate how important a node or edge is for the connectivity or the

information flow of the network using CINNA (Central Informative Nodes in Network Analysis)[122]

R package.

Cross-studies Comparison analysis: The RNA-seq DEG lists were obtained from the

supplemental tables of the Khan et al[23]., study. DEGs were merged based on their gene

symbols. Overlapping genes were identified, and GO term enrichment analysis was performed

using ToppGene (https://toppgene.cchmc.org/enrichment.jsp) (**Supplemental Table 11**).

Author Contributions: B.X., J.A.G. and S.B.R. contributed to the conception and design of the

study; S.A.K, B.X. and J.A.G. supervised all the experiments; S.B.R., H.Z.,Y.S. and Z.S.

contributed to characterization and maintenance of human iPSC line as well as generation and

culture of organoids; R.J.S contributed to the collection and clinical diagnosis of patients; S.M.

contributed to the clinical characterization of patients and the generation of iPSC lines; S.B.R.,

F.B., R.R., B.X. contributed to scRNAseq data analysis; S.B.R, Z.S., Y.C., R.T, B.X., Y.S., H.Z.

contributed to calcium imaging, cell proliferation imaging analysis, PIP-FUCCI biosensor assays

and FACS-based neurogenesis analysis; S.B.R, Y.S. and H.Z. contributed to dendritic

morphology analysis; K.W.L. supervised the optimization of the organoid culture conditions;

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Data availability: The raw sequencing data described in this manuscript have been deposited

into the NIH Gene Expression Omnibus (GEO) database under accession number GSE244010.

The data supporting the findings of this study are available upon request from the corresponding

authors.

Figure Legends

Fig 1: Organoid growth and neuronal activity analysis. (a) Box plots depicting increase in

organoid surface area in patient and control organoids at different time points normalized to

week 1. **(b)** Box plots depicting increase in organoid perimeter in patient and control organoids

at different time points normalized to week 1. **(c)** Representative denoised and segmented

epifluorescence microscope images (4x) of Ca^{2+} unit signals detected in organoids *in situ* **(d)**

Average peak-aligned traces (DF/F vs time, zero corresponding to peak time) of Ca^{2+} transients

detected in different units (cells) in patient (red) and control (black) organoids. Three patient and

three control organoids from two independent batches analyzed at this timepoint (average

number of cells per organoid: n for patient = 89, n for control = 124). *Left:* Combined aligned

traces from batches 1 and 2, *Middle:* Batch 1, *Right:* Batch 2. **(e)** Quantification of Ca^{2+} peak

amplitude in patient (red) and control (black) organoids. Patient organoids show significantly

lower peak amplitude. *Left:* Combined batches 1 and 2 (KS test, $P = 5.78 \times 10^{-12}$), *middle:* Batch

1 (KS test, $P = 3.90 \times 10^{-3}$), *right:* Batch 2 (KS test, $P = 3.77 \times 10^{-10}$).

Fig 2: Cell type composition and proliferation analysis of organoids.

(a) Annotation of cell types in the dataset with reference to human fetal brain[26]. Most of cell

types in the developing human brain are successfully recapitulated. (b) UMAP color-coded to

highlight distribution of annotated cell types in DIV70 (blue) and DIV150 (orange). (c) Density

maps depicting the differential abundance (log fold changes) in all cell types between patient

and control organoids at DIV70. There is a higher cell density in progenitor regions (RG-div,

IPC-div, IPC-nEN) and lower cell density in differentiated neuron regions (EN) in patient

organoids compared to control. **(d)** Volcano plot illustrating differentially abundant

neighborhoods between patient and control groups using Milo. The y-axis represents –

$\log_{10}$(spatial FDR), and the x-axis shows the $\log_2$ fold change (patient/control). The horizontal

(e) Beeswarm plot visualizing the

distribution of log fold changes across neighborhood annotations for each cell type in DIV70

organoids between patient and control groups, analyzed using Milo software. The dashed line

represents no change. **(f)** Representative confocal microscope images (40x) of a single 2D Z-

stack of control (*top*) and patient (*bottom*) organoid whole-mount preparations stained for cell

cycle marker, Ki67 (white). Depicted are DIV70 organoids double labelled for NPC marker

SOX2 (red) and nuclear marker DAPI (blue) (*left*), NPC marker SOX2 and active cell cycle

marker Ki67 (*right*). Scale bar = 20μm. **(g)** Quantification of the fraction of cells labelled with the

aforementioned markers reveals that the fraction of active cycling progenitors is significantly

higher in patient organoids (n for patient = 17, n for control = 19, from 3 independent batches).

Total number of SOX2 positive NPCs as percentage of DAPI-labeled cells (upper left panel);

Fraction of active cycling (Ki67-positive) NPCs (SOX2-positive) (KS test, *P* = 0.04) (upper right

panel). Number of SOX2-positive NPCs represented as percentage of DAPI-labelled nuclei in

individual patient-control pairs (KS test, *P* = 0.01) (lower left panel); Fraction of active cycling

(Ki67-positive) NPCs (SOX2-positive) (KS test, *Ppair1* = 0.25, *Ppair2* = 0.01, *Ppair3* = 5.78x10^{-}

^{5}) (lower right panel). **(h)**. Representative images of PIP-FUCCI-labeled NPCs in controls and

patients (upper panel). Quantification of the fraction of NPCs in G1, S, and G2/M phases

reveals a significant accumulation of G1 phase NPCs in patient samples (two-sided t-test *P* =

0.045, fold change = 1.37) and lower number of NPCs in the S phase (two-sided t-test *P* =

0.035, fold change = 0.58) (lower panel). **(i)**. Quantification indicates a significantly lower

fraction of NPC-derived neurons in patients compared to controls (KS test, *P* = 0.01). The

fraction of neurons (CTIP2-positive) is shown as a percentage of DAPI-labeled cells (upper

panel). The number of CTIP2-positive neurons, expressed as a percentage of DAPI-labeled

nuclei for individual patient-control pairs, is presented (lower panel). Control samples include

Q2, Q5, QR19, and QR20; patient samples include Q1, Q6, QR23, and QR27.

Fig 3: Pseudotime analyses of the pace of neuronal development.

(a) Pseudotime trajectory of the EN lineage at DIV70 colored by pseudotime. **(b)** Ridge plot depicting distribution of cells in patient and control EN lineage at DIV70. Patient cell distribution is shifted towards early points of the trajectory represented by progenitors while control cell distribution is more dispersed. There is a significant difference between the two distributions (KS test, $P = 1.33\text{x}10^{-11}$). **(c)** RNA velocity embedding stream at DIV70 depicting the EN lineage trajectory in control (*left*) and patient (*right*) organoids. **(d)** UMAP plots colored by differentiation potential in control (*left*) and patient (*right*) DIV70 EN lineage. Progenitors in control organoids show high differentiation potential while progenitors in patient organoids show low differentiation potential. **(e)** Pseudotime trajectory at DIV150 colored by pseudotime. **(f)** Ridge plot showing distribution of cells in patient and control DIV150 EN lineage. Patient cell distribution is largely shifted to early points of the trajectory represented by more immature stages of the lineage while control cell distribution is shifted towards later points along the pseudotime. There is a significant difference between the two distribution (KS test, $P = 2.13\text{x}10^{-4}$). **(g)** Pseudotime trajectory of cells in patient and control IN lineage colored by pseudotime. **(h)** Ridge plot depicting distribution of cells in patient and control IN lineage along pseudotime. Patient cell distribution is shifted towards early points along pseudotime while control cell distribution is more dispersed. There is a significant difference between the two distributions (KS test, $P = 1.33\text{x}10^{-2}$). **(i)** Pseudotime trajectory of progenitor populations generated with Monocle3. Trajectory starts at RG-div and cyc-IPC and progresses to RG-early. Later pseudotimes are represented by RG-late and IN progenitors such as MGE-RG, MGE-IPC and MGE-RG-IPC-DIV. **(j)** Ridge plot depicting distribution of progenitors in patient and control lineage Patient cell distribution is shifted largely to early points of the trajectory represented by earlier progenitors while control cell distribution is shifted more towards later time points. There is a significant

difference between the two distribution (KS test, $P = 4.53 \times 10^{-6}$), indicating a developmental

delay at the level of the progenitors.

Fig 4: Morphological and transcriptional signatures of impaired EN maturation.

(a) Representative 3D traces of neurons generated from confocal images of DIV70 cultures of

control (*left*) and patient (*right*) organoids. **(b)** Quantification of combined patient and control

number of primary neurites per cell (*upper left*), total neurite length (*upper middle*) and number

of branchpoints per cell (*upper right*) across multiple experiments (unpaired two-sided t-test, $P <$

0.05). 8-11 organoids were analyzed per line over 3-4 batches for a total of 66-166 cells for

each line. Data are presented as mean ± SD, each point represents averaged data from a

unique line and batch. Quantification of number of primary neurites per cell (*bottom left*), total

neurite length (*bottom middle*) and number of branchpoints per cell (*bottom right*) for different

patient and control paired organoids. Data are presented as mean ± SD. Across all pairs,

patient neurons have a significantly simpler neurite architecture (two-sided Mann Whitney Test,

$P < 0.05$). Neurons analyzed with immunostaining were positive for MAP2 and immature neuron

marker DCX (see also **Fig S1b**, *bottom*). **(c)** Volcano plot showing differentially expressed

genes in sorted neurons from DIV70 patient organoids compared to control. **(d,e)** GO term

enrichment analysis of top downregulated **(d)** and upregulated **(g)** DEGs in patient neurons. **(f)**

SynGO gene enrichment analysis of genes downregulated (*left*) and upregulated (*right*) in

patient neurons. There is a significant enrichment of synaptic genes among the downregulated

genes ($P = 0.00005$), with a particular enrichment for transcripts with presynaptic/synaptic

vesicle functions (GO:0045202/GO:0098793, $P = 0.0331$), but no significant enrichment of

synaptic genes among upregulated genes.

1034

Fig 5: Gene modules and functions dysregulated in the EN lineage of patient organoids.

(a) A volcano plot displaying DEGs identified in patient-derived RG-div compared to control is

shown, with the x-axis representing the log odds of expression between genotypes (Coeff).

Dotted lines indicate the thresholds for Coeff > 0.02 or < -0.02. The gene symbols for the top 15

DEGs are labeled. **(b)** GO term enrichment analysis of DEGs in patient RG-div. Cell cycle and

proliferation genes are upregulated while neurogenic genes are downregulated. **(c)** A volcano

plot displaying DEGs identified in patient-derived ENs compared to control is shown, with the x-

axis representing the log odds of expression between genotypes (Coefficient, Coeff). Dotted

lines indicate the thresholds for Coeff > 0.02 or < -0.02. The gene symbols for the top 15 DEGs

are labeled. **(d)** GO term enrichment analysis of DEGs in patient ENs. Genes related to

negative regulation of neurogenesis are upregulated while genes related to promotion of

neurogenesis are downregulated. **(e)** UMAP of cell clusters in EN lineage cells in control

organoids. **(f)** Identification of clusters of co-expressed genes using scWGCNA in control EN

lineage cells. From *left* to *right*. Modules 2 and 9 are expressed in cycling progenitors and

progenitor cells respectively and modules 3 and 4 are expressed in EN clusters. **(g)** Scanpy

scoring of module genes identified in **(e)** and **(f)** in control and patient EN lineage cells.

Expression of modules 2 and 9 are significantly lower (module 2, $P = 0.002591$; module 9, $P =$

0.03008) in control compared to patient cells.

1053

Fig 6: 22q11.2-associated genes and genetic pathways underlying altered developmental

pace. (a) Volcano plot depicting differentially expressed miRNAs in whole patient organoids at

DIV70. **(b)** mirNet analysis of the network of downregulated miRNAs in patient organoids **(c)** GO

term enrichment of mirNet-T computed targets of downregulated miRNAs. Targets are enriched

for nuclear genes associated with cell cycle and cell division. **(d)** Latent time analysis of a

subset of putative target genes of downregulated miRNAs using scVelo and CellRank; y axis

denotes expression level; x axis denotes latent time. **(e)** PPI network analysis of dysregulated

genes in patient RG-div (*left*) and ENs (*right*) with scoring of the contributions of the 22q11.2

locus genes to the network.

1063

Fig 7: Overlap between genes harboring rare LoF risk variants and EN lineage cell types.

Results from permutation-based analysis of overlap between EN lineage cell types and DEGs

harboring rare coding damaging variants at DIV70 (*top*) and DIV150 (*bottom*) using the

DNENRICH pipeline and curated reference datasets. Overlap between cell types in the EN

lineage and dysregulated genes harboring LoF risk variants **(a)**, highly intolerant LoF variants

(pLI ≥ 0.9) **(b),** or synonymous variants **(c).**

1070

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1405   **SUPPLEMENTAL INFORMATION**

1406

Supplemental Figure Legends

Fig S1: Cell type composition of cultured organoids. Representative confocal images (40x)

of 30µm sections from DIV70 control organoids (Control-QR19) immunohistochemically labelled

for cell type specific and cell cycle markers: (**a**). Region specific markers (FOXG1, PAX6, TBR1)

and layer specific markers (PH3, CTIP2, and SATB2). Scale bar = 100µm.   (**b).** Cell-type

specific markers for radial glia (Nestin, *top*) and intermediate progenitor cells (TBR2, *middle*).

Scale bar = 50 µm **(c)** Immunofluorescence staining for somatodendritic marker MAP2 (left) and

immature neuron marker doublecortin (DCX) (*right*). Scale bar = 20µm. Neurons are labeled

with AAV1-hSYN1-GFP.

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Fig S2: Quality control and clustering metrics of scRNA-seq data. (a) Distribution of total

number of genes (*top*), mitochondrial transcripts (*middle*) and ribosomal transcripts (*bottom*) per

sample. Quality control metrics are uniform across organoids from all iPSC lines. **(b, c)**

Expression of genes related to hypoxia and apoptosis curated in the GSEA Hallmark mSigDB

database[123]. There is no difference in expression of apoptosis or hypoxia-related genes

between patient and control organoids as well as between DIV70 and DIV150 organoids. **(d)**

Spatial representation of 8 transcriptomically distinct clusters (*left*) and distribution of clusters in

individual samples (*right*). All samples show a similar distribution of clusters. **(e)** Dot-plot

depicting expression of 22q11.2 locus genes in scRNA-seq datasets from patient and control

organoid. **(f)** Expression of 22q11.2 locus genes across all samples. Analysis confirmed the

expected ~50% decrease in patient relative to control organoids and demonstrated that they

faithfully recapitulate the expected 22q11.2 locus gene expression profile with high organoid-to-

organoid reproducibility.

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Fig S3: Relative proportion of cell types in control organoids.

(a) Stacked bar plots depicting the relative proportion of cell types in organoids profiled at DIV70 and DIV150. Early radial glia (RG-early, 22%) and differentiated ENs (23%) are the predominant cell types. Intermediate progenitors differentiating into new born ENs represent the next largest group (IPC-nEN, 14%). 5%-10% of the cell population consists of other intermediate cell types, including dividing radial glia (RG-div), early new born neurons (nEN-early), late radial glia (RG-late), striatal interneurons (IN-STR) and choroid. A minority (≤5%) of cells are comprised of late newborn neurons (nEN-late), cortical interneurons (IN-CTX), dividing intermediate progenitors (IPC-div), MGE progenitors (MGE-RG, MGE-IPC, MGE-RG_IPC-div) and new born interneurons (nIN). Almost no astroglia is detected at DIV70. By DIV150 organoids display a more diverse distribution of cell types including EN (15.5%), RG-late (12%), cortical interneurons (IN-CTX, 19%), IN-STR (10.5%) as well as astrocytes (9.5%). Other cell types represent less than 5% each. The fraction of cells that are part of the EN lineage decreases from 73% at DIV70 to 33% at DIV150 although the proportion of newborn and maturing EN remains fairly constant (30% at DIV70 vs 23% at DIV150). There is an expansion of IN lineage (from 19% at DIV70 to 56% at DIV150), which includes increase in the proportion of IN progenitors (9% to 21%), as well as newborn and maturing IN (10% to 35%). The relative proportion of choroid cells decreases from 7.7% to 0.8% while the astrocyte proportion increases from 0.1% to 9.5%. **(b)** Stacked bar plots depicting the relative proportion of cell types in organoids profiled at DIV70 and DIV150 across all lines. **(c)** Comparison of the mean expression levels of known biomarkers of excitatory neurons (EN) and their expression in fraction of cells in patient and control groups. **(d)** UMAP distribution of various cell type specific markers in organoids. **(e)** Distribution of each cell type in the EN lineage along pseudotime at DIV70 (left panel) and DIV150 in control (right panel).

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Fig S4: Quantification of the thickness of neurogenic zones of organoids.

(a) Representative confocal image (40x) of a rosette structure in 30µm section of DIV45

organoids immunostained for PAX6 (red) and CTIP2 (green). Scale bar = 100µm. **(b)** Schematic

depicting the quantification of the layer thickness in the rosettes. PAX6 layer is defined as the

ventricular zone (VZ), CTIP2 layer is defined as the cortical plate (CP) and total neural tube

radius is defined as the distance from the center of the ventricle to the top of the CP layer.

Measurements of thickness for each layer were made along 3 lines per rosette that are at 45

degrees to each other and average values for relative thickness of each layer compared to the

radius of the rosette (neural tube radius) was calculated. **(c)** Quantification of layer thickness in

DIV45 organoids. CP layer thickness is significantly decreased in patient organoids (KS test, *P*

= 0.04; total structures analyzed: n ROIs for control = 16, n for patient = 12 from 3 control and 3

patient lines).

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Fig S5: Pseudotime analysis of the EN and IN lineages.

(a) Pseudotime trajectory of EN lineage calculated with Monocle3 with cell type annotations.

Trajectory starts at RG-div and progresses to RG-early, IPC-nEN, then branches into nEN-early

and nEN-late and finally to EN. **(b)** Pseudotime trajectory colored by DIV. At DIV70 there are

mainly progenitors and neurons in the nEN-early to EN branch. At DIV150 there are fewer early

progenitors and mainly neurons in the nEN-late to EN branch. **(c)** Pseudotime trajectory of IN

lineage calculated with Monocle3 with cell type annotations. Trajectory starts at RG-late and

progresses to MGE RG and MGE IPC, differentiates to nIN, then branches into IN-CTX and IN-

STR

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1482   **Fig S6: Principle component analysis of gene expression profile in the cortical neurons.**

1483   The first principal component (PC1) explains 35.7% of the variance that was related to genetic

1484   background**.** PC2 (23.7%) was related to differences between the 22q11DS and control groups.

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Supplemental Tables

Supplemental Table 1: Bulk RNAseq_DEGs in in sorted neurons from DIV70 patient organoids compared to control.

Supplemental Table 2: scRNAseq_DEGs in various cell types of DIV70 patient organoids compared to control.

Supplemental Table 3: scRNAseq_Functional enrichment of DEGs in various cell types of DIV70 patient organoids compared to control.

Supplemental Table 4: scRNAseq_DEGs in various cell types of DIV150 patient organoids compared to control.

Supplemental Table 5: scRNAseq_Functional enrichment of DEGs in various cell types of DIV150 patient organoids compared to control.

Supplemental Table 6: scRNAseq_Functional enrichment of transcription factor regulon targets dysregulated in ENs of DIV70 patient organoids.

Supplemental Table 7: WGCNA EN lineage module genes and GO terms.

Supplemental Table 8: miRNAseq_Differentially expressed miRNAs in whole patient organoids at DIV70 compared to control.

Supplemental Table 9: Clinical and demographic characteristics

Supplemental Table 10: Sample usage in experiments