A Genome-Wide Arrayed CRISPR Screen Reveals PLSCR1 as an Intrinsic Barrier to SARS-CoV-2 Entry

Authors

Jérémie Le Pen[1,*], Gabrielle Paniccia[1,*], Michael Bauer[1,#], H.-Heinrich Hoffmann[1,#], Volker Kinast[2,3,#], Marcela Moncada-Velez[4,#], Ana Pinharanda[5,#], Inna Ricardo-Lax[1,#], Ansgar F. Stenzel[1,6,#], Edwin A. Rosado-Olivieri[7,8,#], Alison W. Ashbrook[1], Kenneth H. Dinnon[1], William C. Doyle[1,9], Catherine A. Freije[1], Seon-Hui Hong[1], Danyel Lee[4,10,11], Tyler Lewy[1], Joseph M. Luna[1,12], Avery Peace[1], Carltin Schmidt[4,13], William M. Schneider[1], Roni Winkler[1], Chloe Larson[14], Timothy McGinn[14], Miriam-Rose Menezes[14], Lavoisier Ramos-Espiritu[14], Priyam Banerjee[15], John T. Poirier[16], Francisco J. Sànchez-Rivera[17,18], Qian Zhang[4], Jean-Laurent Casanova[4,10,11,19,20], Thomas S. Carroll[21], J. Fraser Glickman[14], Eleftherios Michailidis[1,22,§], Brandon Razooky[1,23,§], Margaret R. MacDonald[1,§], Charles M. Rice[1,§]

* Contributed equally to this work
# Contributed equally to this work
§ Contributed equally to this work

Correspondence: Jérémie Le Pen: jlepen@rockefeller.edu; Charles M. Rice: ricec@rockefeller.edu

Affiliations:

1. Laboratory of Virology and Infectious Disease, The Rockefeller University, New York, NY, USA.

2. Department of Medical Microbiology and Virology, Carl von Ossietzky University Oldenburg, Oldenburg, Germany.

3. Department for Molecular and Medical Virology, Faculty of Medicine, Ruhr University Bochum, Bochum, Germany.

4. St Giles Laboratory of Human Genetics of Infectious Diseases, Rockefeller Branch, The Rockefeller University, New York, NY, USA.

5. Department of Biological Sciences, Columbia University, New York, NY 10027, USA.

6. Present address: Department of Infectious Diseases, Molecular Virology, Heidelberg University, Heidelberg, Germany.

7. Laboratory of Synthetic Embryology, The Rockefeller University, New York, NY, USA.

8. Present address: Department of Molecular Pathobiology, New York University.

9. Present address: Laboratory of Host-Pathogen Biology, The Rockefeller University, New York, NY, USA.

10. Laboratory of Human Genetics of Infectious Diseases, Necker Branch, INSERM U1163, Paris, France, EU.

11. University of Paris, Imagine Institute, Paris, France, EU.

12. Present address: Department of Biochemistry and Center for RNA Science and Therapeutics, Case Western Reserve University, Cleveland, OH, USA.

13. Present address: Medical Faculty, Heinrich Heine University Dusseldorf, Germany.

14. Fisher Drug Discovery Resource Center, The Rockefeller University, New York, NY, USA.

15. Bio-Imaging Resource Center, The Rockefeller University, New York, NY, USA.

16. Laura and Isaac Perlmutter Cancer Center, New York University Grossman School of Medicine, NYU Langone Health, New York, NY.

17. Department of Biology, Massachusetts Institute of Technology, Cambridge, 02142, Massachusetts, USA.

18. David H. Koch Institute for Integrative Cancer Research, Massachusetts Institute of Technology, Cambridge, 02142, Massachusetts, USA.

19. Department of Pediatrics, Necker Hospital for Sick Children, Paris, France, EU.

20. Howard Hughes Medical Institute, New York, NY, USA.

21. Bioinformatics Resource Center, The Rockefeller University, New York, NY, USA.

22. Present address: Laboratory of Biochemical Pharmacology, Department of Pediatrics, Emory

University School of Medicine, Atlanta, GA, USA.

23. Present address: National Resilience, Inc., La Jolla, CA, USA.

Abstract

Interferons (IFNs) play a crucial role in the regulation and evolution of host-virus

interactions. Here, we conducted a genome-wide arrayed CRISPR knockout screen in the presence

and absence of IFN to identify human genes that influence SARS-CoV-2 infection. We then

performed an integrated analysis of genes interacting with SARS-CoV-2, drawing from a selection

of 67 large-scale studies, including our own. We identified 28 genes of high relevance in both

human genetic studies of COVID-19 patients and functional genetic screens in cell culture, with

many related to the IFN pathway. Among these was the IFN-stimulated gene *PLSCR1*. PLSCR1 did

not require IFN induction to restrict SARS-CoV-2 and did not contribute to IFN signaling. Instead,

PLSCR1 specifically restricted spike-mediated SARS-CoV-2 entry. The PLSCR1-mediated restriction

was alleviated by TMPRSS2 over-expression, suggesting that PLSCR1 primarily restricts the

endocytic entry route. In addition, recent SARS-CoV-2 variants have adapted to circumvent the

PLSCR1 barrier via currently undetermined mechanisms. Finally, we discuss the association

between PLSCR1 variants and severe COVID-19 cases reported in a recent GWAS.

Introduction

Viruses maintain a complex relationship with their host cells, co-opting host factors for

their replication while being targeted by cellular defense mechanisms. Such cellular defenses

include the interferon (IFN) pathway, where the infected cell senses foreign molecules and

secretes IFN to trigger an antiviral state in neighboring cells.

Approximately 1-5% of critical COVID-19 patients have mutations that compromise the

production of or response to type I IFNs, while an additional 15% possess autoantibodies that

neutralize type I IFNs [1-7]. This highlights the essential role of type I IFN in the defense against

the SARS-CoV-2 virus that caused the COVID-19 pandemic [8, 9]. Consequently, investigating IFN-

stimulated genes (ISGs) is crucial to our understanding of the remarkable antiviral systems that

evolved in nature. This knowledge could enhance our preparedness for future pandemics.

Several recent studies have identified ISGs restricting SARS-CoV-2. Most of these studies

involved gain-of-function genetic screens, over-expressing individual ISGs. The factors bone

marrow stromal cell antigen 2 (BST2), cholesterol 25-hydroxylase (CH25H), lymphocyte antigen 6

family member E (LY6E), 2'-5'-oligoadenylate synthetase 1 (OAS1), and receptor transporter

protein 4 (RTP4) were notably identified as SARS-CoV-2 antivirals in these studies [9-14]. One

advantage of the gain-of-function approach is that it circumvents potential genetic redundancies

between ISGs [15, 16]. However, this approach is biased towards ISGs that act autonomously

when over-expressed and does not mimic the cellular context of the IFN response, where

hundreds of genes and gene products are differentially regulated to establish an antiviral state.

To counter this limitation, two recent publications examined the effects of ISG loss of function in

IFN-treated cells. They conducted pooled CRISPR knockout (KO) screens in cells pre-treated with

IFN before SARS-CoV-2 infection [17, 18]. By sorting for cells with high SARS-CoV-2 viral load, they

identified SARS-CoV-2 restriction factors such as death domain associated protein (DAXX).

Here, we conducted a human whole-genome arrayed CRISPR KO screen to identify genes

that influence SARS-CoV-2 infection in cells with or without pretreatment with a low dose of IFN.

The arrayed approach, though logistically challenging, has advantages over the pooled format in

capturing both proviral and antiviral genes, genes affecting virus egress, and those coding for

secreted products that exert their impact on neighboring cells. It reliably captures genotype-

phenotype correlations while also unveiling the effects of single gene perturbation on cell growth

and death [19]. We then compiled a comprehensive list of genes interacting with SARS-CoV-2,

incorporating findings from our own screen as well as existing literature. This meta-analysis

revealed several host genes of interest, both previously described and novel. Notably, the ISG

product phospholipid scramblase 1 (PLSCR1) emerged as a prominent antiviral factor. PLSCR1 is

involved in several biological processes [20], including regulating the movement of phospholipids

between the two leaflets of a cell membrane (lipid scrambling) [21] and IFN signaling in the

context of virus infection [22]. Follow-up experiments revealed that PLSCR1 is a cell intrinsic factor

that restricts spike-mediated SARS-CoV-2 entry, independently of the IFN pathway, via currently

undetermined mechanisms. Our genetic screen data and meta-analysis provide a valuable

resource to broaden our understanding of coronavirus infection and innate immunity.

Furthermore, we extend the recent characterization of PLSCR1 as an antiviral against SARS-CoV-

2 impacting COVID-19 outcomes (**Fig. 1**)[18, 23, 24].

Results

A genome-wide arrayed CRISPR KO screen identifies known and novel factors influencing SARS-CoV-2 infection.

While the liver is not the primary target organ of SARS-CoV-2 infection, human

hepatocellular carcinoma Huh-7.5 cells naturally express SARS-CoV-2 dependency factors,

including the receptor angiotensin converting enzyme 2 (ACE2), and proved unexpectedly useful

in SARS-CoV-2 research [18, 25-32]. Huh-7.5 cells do not produce IFN during SARS-CoV-2 infection,

but they do induce an antiviral state in response to IFN pretreatment (**Fig 2A-2C, Supp Tables 1-**

4), making them a convenient model to control the exposure of the cells to IFN.

Using these cells, we conducted a whole-genome arrayed CRISPR KO screen designed to

identify both SARS-CoV-2 proviral and antiviral genes, whose KO reduces or enhances SARS-CoV-

2 infection, respectively. In particular, we aimed to identify factors involved in the IFN response,

from IFN sensing to ISG induction, including effector ISGs that directly influence the virus life

cycle. With this arrayed approach performed in 384-well plates, the cells in each well received a

pool of four gRNAs targeting a single host gene. Each well was then either treated with 1 pM IFN-

α2a or left untreated before being infected with SARS-CoV-2, followed by SARS-CoV-2

nucleoprotein (N) immunofluorescence staining and high content microscopy (**Fig 2D**). This low

dose of IFN was chosen to mimic a cellular environment where IFN triggers an antiviral state

before infection. We anticipated that a saturating amount of IFN would lead to high ISG

transcription and functional redundancy between effectors, biasing hits towards factors in IFN

signaling. In contrast, a low dose of IFN, around the IC50, might enable identification of the

specific roles of individual effector ISGs.

Of the 16,790 screened genes, we selected 16,178 genes where KO did not lead to changes

in cellular fitness assessed by nuclei count (-2 ≤ z-score ≤ 2)(**Supp Fig 1A**). Of these, we selected

12,119 genes expressed in three cell lines relevant for SARS-CoV-2 research (A549, Calu-3, Huh-7.5 cells) and human lung cells, the primary target cell type *in vivo*, for downstream analysis [33-35]. We then binned the genes into two groups for data visualization, depending on whether they were induced by IFN-α2a treatment in Huh-7.5 cells as determined by mRNA-seq (log 2 FC ≥ 2 and padj ≤ 0.05) (**Supp Fig 1B, Supp Tables 5-7**).

Our screen found known and previously unidentified host factors influencing SARS-CoV-2 infection (**Fig 2E**). As expected, positive regulators of IFN signaling, such as interferon-alpha/beta receptor alpha chain 1 and 2 (IFNAR1,2) [36-38], interferon regulatory factor 9 (IRF9) [39, 40], Janus kinase 1 (JAK1) [41], and signal transducer and activator of transcription 2 (STAT2) [42, 43] were antiviral only in IFN pretreated cells. Known negative regulators of IFN signaling, such as ISG15 ubiquitin-like modifier (ISG15) [44-46], suppressor of cytokine signaling 1 (SOCS1) [47], and ubiquitin specific peptidase 18 (USP18) [48, 49] were proviral only in IFN pretreated cells.

The SARS-CoV-2 receptor ACE2 was confirmed as proviral with or without IFN pretreatment. In our mRNA-seq analysis, IFN treatment was found to significantly upregulate ACE2 mRNA levels (**Supp Fig. 1B**). Prior studies indicate that IFN induces transcription of a truncated ACE2 isoform, rather than the full-length receptor for SARS-CoV-2 [50, 51].

The lysosomal cysteine protease cathepsin L (CTSL), required for SARS-CoV-2 spike protein activation [52-54], was a proviral hit in our screens. In contrast, KO of the cell-surface transmembrane serine protease 2 (TMPRSS2) did not influence infection, suggesting that SARS-CoV-2 particles primarily enter Huh-7.5 cells through the endocytic pathway that does not depend on TMPRSS2 (**Fig 1**) [55, 56].

The screen data likely contains false negatives. For example, STAT1 and tyrosine kinase 2 (TYK2) [57, 58] did not influence infection alongside other positive regulators of IFN signaling, which we attribute to the fact that some gRNAs in the library may have not efficiently directed Cas9 to cut at their respective target gene loci.

Collectively, the identification of known proviral and antiviral factors confirms the validity of our screening method.

We performed a Gene Set Enrichment Analysis (GSEA) to identify cellular pathways exhibiting proviral or antiviral properties in our screen. The full GSEA results, including the genes

driving each pathway enrichment (so-called *leading edge*), can be found in **Supp Table 8**. Some top pathways ranked by adjusted p-value are summarized in **Fig 2F**. Notably pathways associated with RNA pol II transcription and mRNA maturation, as well as pathways related to cellular respiration, exhibited antiviral activity independent of IFN. Surprisingly, pathways associated with RNA pol III transcription, in part driven by the genes RNA polymerase III subunit A (*POLR3A*) and RNA polymerase III subunit B (*POLR3B*), were critical to the antiviral response mediated by IFN. Conversely, factors involved in translation, such as eukaryotic translation initiation factor 3 subunits F and G (EIF3G and EIF3F), likely co-opted for producing viral proteins, were identified as proviral. Similarly, factors regulating cholesterol homeostasis, likely crucial for SARS-CoV-2 entry [13, 59], were also identified as proviral. For instance, the gene sterol regulatory element binding transcription factor 2 (*SREBF2*) was one of the top proviral genes (**Fig 2E**).

Our arrayed CRISPR KO screen results thus constitute a valuable resource for research on coronavirus infection and innate immunity. These can be used to help characterize human genes influencing SARS-CoV-2 infection and the IFN response.

The ISG PLSCR1 is associated with COVID-19 outcomes and exhibits antiviral effects in functional SARS-CoV-2 genetic screens

To provide a thorough perspective on human genes that impact SARS-CoV-2 infection and to place our arrayed CRISPR KO screen results within the context of existing research, we have compiled a table that includes findings from a selection of 67 large-scale 'omic' studies related to SARS-CoV-2. This compilation encompasses this study and 25 other functional genetic screens for genes that influence SARS-CoV-2 infection [10-12, 14, 17, 18, 26, 29, 60-76], 24 human genetic studies that correlate certain alleles with severe COVID-19 outcomes [4, 5, 7, 23, 24, 77-95], ten publications detailing SARS-CoV-2 protein interactomes [96-105], six focusing on SARS-CoV-2 RNA interactomes [106-111], and one that examines proteins with altered phosphorylation states in SARS-CoV-2-infected cells [112] **(Supp Tables 9-10 for the full, and summary tables, respectively)**. This table highlights the depth of research in publications addressing SARS-CoV-2 infection: genes reported in several independent large-scale studies are more credible candidates

193   for biological relevance (**Supp Fig 2**). As expected, genes associated with the IFN pathway, such

194   as *IFNAR2*, *OAS1*, and *ZC3HAV1/ZAP*, frequently emerged as significant in SARS-CoV-2 studies.

195   We focused on 28 genes identified in both human genetic studies of COVID-19 patients

and in functional genetic screens in cell culture, including our own (**Fig 3**). These genes are likely

to have significant physiological relevance and to be well-suited for mechanistic studies in cell

culture. Among these, the ISG *PLSCR1* stood out, being identified as one of the most potent

antiviral genes in our screen (**Fig 2E**). *PLSCR1* variants have been linked to severe COVID-19 in a

recent GWAS (listed in **Table 1**)[23, 24]. This was attributed to a role of PLSCR1 in regulating the

IFN response in COVID-19 patients [24]. Indeed, a pioneering study showed that PLSCR1

potentiates the transcriptional response to IFN-β treatment in human ovarian carcinoma Hey1B

cells [22]. However, PLSCR1 surprisingly appeared as a potent SARS-CoV-2 antiviral even in the

absence of IFN in our screens, suggesting a cell intrinsic, IFN-independent function. In other

words, baseline levels of PLSCR1 may be sufficient to restrict SARS-CoV-2, and IFN pretreatment

could simply enhance this effect by elevating cellular PLSCR1 levels.

Intrinsic PLSCR1 restricts SARS-CoV-2 independently of the IFN pathway.

209   To better characterize the function of PLSCR1 during SARS-CoV-2 infection, we generated

and validated by western blot (WB) PLSCR1 KO bulk Huh-7.5 and A549-ACE2 lines (**Supp Fig 3A**).

As observed in the arrayed screen (**Supp Fig 1A**), PLSCR1 KO cells were viable (**Supp Fig 3B**).

PLSCR1 depletion increased susceptibility to SARS-CoV-2 independently of IFN pretreatment (**Fig**

4A). Cell treatment with a JAK-STAT inhibitor, which effectively abrogated IFN signaling, confirmed

that intrinsic PLSCR1 limits SARS-CoV-2 infection independently of the IFN signaling pathway (**Fig**

4A). SARS-CoV-2 susceptibility of PLSCR1 KO cells was reversed by the ectopic expression of

PLSCR1 (**Fig 4B, Supp Fig 3C**). Interestingly, while PLSCR1 tagged with an N-terminal FLAG tag

could rescue, PLSCR1 tagged with a C-terminal FLAG tag could not. The C-terminus of the protein

is extracellular, and previous research suggests that this region is important for the protein's

scramblase activity and Ca^{2+} binding [113]. It is possible that the addition of this FLAG-tag

impaired Ca^{2+} binding, affected PLSCR1's localization at the plasma membrane, or otherwise

disrupted the structure of this region, thereby abolishing PLSCR1's antiviral ability. We co-cultured

PLSCR1 reconstituted cells and PLSCR1 KO cells in the same well and infected them with SARS-
CoV-2. A higher proportion of PLSCR1 KO than PLSCR1 reconstituted cells were positive for SARS-
CoV-2 indicating that PLSCR1 acts in a cell autonomous manner (**Fig 4C**). Altogether, these data
suggest that intrinsic PLSCR1 contributes to the restriction of SARS-CoV-2, even without IFN.

IFN signaling is unaffected by the loss of PLSCR1 in A549-ACE2 and Huh-7.5 cells.

PLSCR1 has been shown to potentiate ISG transcription in IFN-treated Hey1B cells [22].
We thus hypothesized PLSCR1 might enhance the type I IFN response in A549-ACE2 and Huh-7.5
cells. We investigated PLSCR1's role in the IFN response by infecting Huh-7.5 cells with
chikungunya virus (CHIKV), which is unaffected by PLSCR1 KO without IFN (**Fig 5A**). PLSCR1
depletion did not functionally affect the antiviral effects of IFN treatment (**Fig 5B**). Furthermore,
IFN treatment induced *OAS1* and *IFI6*, two ISGs known to restrict SARS-CoV-2 [10, 12, 17, 91, 92,
94, 95], to a similar extent in both WT and PLSCR1 KO cells, indicating that the IFN signaling
pathway was unaffected by PLSCR1 depletion (**Fig 5C-J**). Finally, PLSCR1 depletion did not alter
basal ISG transcription in the absence of IFN (**Supp Fig 4**).

These findings indicate that PLSCR1 limits SARS-CoV-2 infection independently of the IFN
signaling pathway in A549-ACE2 and Huh-7.5 cells.

PLSCR1 restricts SARS-CoV-2 entry.

We hypothesized that PLSCR1 directly targets and inhibits a specific step of the SARS-CoV-
2 life cycle. PLSCR1 primarily localized at the plasma membrane in Huh-7.5 cells (**Fig 6A**).
Furthermore, PLSCR1 depletion led to increased SARS-CoV-2 foci formation (**Fig 6B,C**), and PLSCR1
KO cells did not show increased susceptibility to a SARS-CoV-2 replicon system that bypasses entry
(**Fig 6D**) [114]. In contrast, a single-cycle, replication-defective human immunodeficiency virus
type-1 (HIV-1) particles pseudo-typed with SARS-CoV-2 spike showed enhanced entry in PLSCR1
depleted cells (**Fig 6E, F**) [115]. This data indicates that PLSCR1 restricts SARS-CoV-2 spike-
mediated virion entry. Over-expression of TMPRSS2 lifted the PLSCR1-mediated restriction of
authentic SARS-CoV-2 (**Fig 6G-I**) and of SARS-CoV-2 spike pseudo-typed particles (**Fig 6J-M**),
indicating that PLSCR1 primarily restricts the endosomal entry route. It is possible that the

TMPRSS2-dependent entry near the cell surface provides SARS-CoV-2 with some level of evasion
from PLSCR1 restriction, as recently described for the ISG NCOA7 [116].

In addition to SARS-CoV-2, we also evaluated the antiviral activity of PLSCR1 against ten
viruses that utilize endosomal entry: CHIKV, human parainfluenza virus (hPIV), herpes simplex
virus 1 (HSV-1), influenza A virus (IAV), human coronavirus OC43 (hCoV-OC43), human
coronavirus NL63 (hCoV-NL63), human coronavirus 229E (hCoV-229E), Sindbis virus (SINV),
Venezuelan equine encephalitis virus (VEEV), and vesicular stomatitis virus (VSV). Only SARS-CoV-
2 showed a notable susceptibility to PLSCR1's inhibitory effects (**Supp Fig 5**).

Recent variants of SARS-CoV-2 are less restricted by PLSCR1

During the COVID-19 pandemic, SARS-CoV-2 variants evolved from the initial strain,
showing increased immune evasion and transmissibility [117-119]. To examine if these variants
could circumvent the antiviral action of PLSCR1, we infected WT and PLSCR1 KO Huh-7.5 cells with
an early strain isolated in July 2020 (NY-RU-NY1) and the Beta (B.1.352), Delta (B.1.617.2),
Omicron (BA.5), and Kraken (XBB.1.5) variants **(Fig 7A-E)**. Although PLSCR1 continued to restrict
these later variants, the discrepancy in infection rates between WT and PLSCR1 KO cells
diminished compared to the original strain, notably with the Omicron and its descendant, Kraken
(Fig 7F). We then infected WT and PLSCR1 KO Huh-7.5 cells with the same focus-forming units
(FFU) of each virus, as determined in PLSCR1 KO cells, and conducted a focus forming assay. The
ratio of foci in WT cells relative to KO cells increased for later variants, especially for the Omicron
subvariant Kraken (XBB.1.5) **(Fig 7G)**. Our data suggests a diminished efficacy of PLSCR1 in
restricting the newer SARS-CoV-2 variants.

Association between PLSCR1 variants and severe COVID-19

PLSCR1 encodes a 318 amino acid protein containing a palmitoylation motif and a
transmembrane domain which regulate its plasma membrane localization, and a nuclear
localization signal (NLS) and transcriptional activation domain thought to be important for its
nuclear functions (**Fig 8A**)[20, 120-125].

A recent GWAS has identified an association between PLSCR1 variants and severe COVID-

19 outcomes, reporting an odds ratio of approximately 1.2 and a p-value of approximately 10^{-8}

(**Table 1**)[23, 24]. In other words, the GWAS suggests that PLSCR1 has a small, but significant effect

on severe COVID-19 risks.

GWAS typically identify variants associated with increased odds of a disease, but these

variants are not necessarily causative. Among the PLSCR1 variants identified in the COVID-19

GWAS cited above, only rs343320 results in a protein-coding change, specifically His262Tyr,

located in the NLS (**Fig 8A**, **Table 1**). Although we cannot dismiss the possibility that (i) some non-

coding variants identified in the GWAS could influence the regulation of *PLSCR1* mRNA,

potentially leading to functional outcomes, and (ii) the GWAS might have missed nonsynonymous

variants impacting PLSCR1 function, we thought to investigate the functional effects of the

His262Tyr variant in cell culture. We ectopically expressed PLSCR1 His262Tyr or PLSCR1 WT in

A549-ACE2 cells from a lentiviral vector [126]. PLSCR1 His262Tyr and PLSCR1 WT were expressed

at similar levels in this system (**Supp Fig 6**). PLSCR1 His262Tyr did not fully rescue the PLSCR1 KO

(**Fig 8B**), indicating that the His262Tyr variant is hypomorphic. Additionally, introducing PLSCR1

His262Tyr into cells already expressing PLSCR1 WT increased their susceptibility to SARS-CoV-2

infection (**Fig 8B**), suggesting a dominant effect. However, this effect might be attributed to the

overexpression of PLSCR1 His262Tyr from the transgene, compared to the natural expression

levels of PLSCR1 WT from the endogenous locus. To counter this, we examined patient-derived

SV40-immortalized fibroblasts expressing ACE2 that were heterozygous for His262Tyr. These cells

were hyper-susceptible to SARS-CoV-2 infection compared to PLSCR1 WT control SV40-fibroblasts

(**Fig 8C**), further suggesting that His262Tyr is dominant. We cannot formally rule out that the

examined SV40-fibroblasts may carry other mutations influencing SARS-CoV-2 infection.

Our data collectively highlight PLSCR1's function in restricting SARS-CoV-2 entry in cell

culture, thereby clarifying the association between PLSCR1 variants and severe COVID-19

outcomes [23, 24]. Future human genetic studies are crucial for determining if certain PLSCR1

variants in the population cause increased risks of severe COVID-19. Our results highlight the

variant rs343320 (His262Tyr) as a potential causative candidate, as it caused increased SARS-CoV-

2 infection in cell culture.

Discussion

Here, we conducted an unbiased arrayed CRISPR KO screen on Huh-7.5 cells infected with

SARS-CoV-2. The screen revealed novel aspects of SARS-CoV-2 and IFN biology while also

confirming previously known facets. Pathways related to mRNA transcription and maturation

were identified as antiviral. This observation may stem from the conflict between the host cell

and SARS-CoV-2, where the host attempts to export mRNAs from the nucleus to facilitate antiviral

responses while the virus replicates in the cytoplasm, impeding nuclear export [127-130]. RNA

Pol III transcription was specifically essential for the IFN-mediated antiviral response, through

mechanisms that are yet to be determined. Interestingly, inborn errors in POLR3A and POLR3C

have been previously described in patients with severe varicella zoster virus infections [131].

Cellular respiration was identified as a key IFN-independent antiviral pathway. Furthermore,

mitophagy was identified as proviral. This may indicate the infected cell's increased demand for

energy and ATP to combat the virus. Alternatively, cellular respiration may have other, yet-to-be-

identified, IFN-independent antiviral roles. Conversely, translation and cholesterol homeostasis

emerged as the foremost proviral pathways. These findings underscore the complex, dualistic

nature of the interactions between SARS-CoV-2 and host cells.

Our screen notably identified the ISG zinc-finger antiviral protein (*ZC3HAV1/ZAP*) as a

proviral factor in IFN-treated cells. Initially, ZC3HAV1/ZAP gained attention as an antiviral factor

that targets the SARS-CoV-2 RNA genome [111] and prevents programmed ribosomal

frameshifting [132]. Yet, a recent study demonstrated that ZC3HAV1/ZAP also promotes the

formation of SARS-CoV-2 non-structural proteins 3 and 4-induced double-membrane vesicles,

essential for virus replication [68]. SARS-CoV-2 may have adapted to exploit certain ISG products,

such as ZC3HAV1/ZAP, within the cellular environment it encounters. It is still unclear if the

seemingly contradictory roles of ZC3HAV1/ZAP – both proviral and antiviral – are caused by

distinct isoforms.

Many other ISG products influenced SARS-CoV-2 infection, PLSCR1 being the most potent

restriction factor. PLSCR1 did not influence ISG induction as previously reported [22], but rather

inhibited spike-mediated SARS-CoV-2 entry through the endocytic route. Our results corroborate

a recent study from Xu et al [18] and provide an explanation for the enrichment for PLSCR1 SNPs observed in a GWAS on severe COVID-19 [23, 24].

The molecular mechanisms of PLSCR1-mediated restriction of SARS-CoV-2 entry remain to be elucidated. PLSCR1 could be altering the lipid composition at the contact site between the virus and endosomal membranes, akin to the ISG IFITM3 for influenza A virus [133-136]. PLSCR1 was first identified as a Ca^{2+}-dependent phospholipid scramblase [21], but it is unclear whether PLSCR1 depletion affects the bidirectional movement of phospholipids *in vivo* [137-139]. A C-terminal FLAG-tag abolished the antiviral ability of reconstituted PLSCR1, possibly by interfering with the function of the Ca^{2+} binding domain. In contrast, inhibiting PLSCR1's phospholipid scramblase activity did not alleviate SARS-CoV-2 restriction [18].

Intriguingly, PLSCR1 specifically restricted SARS-CoV-2 in Huh-7.5 and A549-ACE2 cells but it did not show similar inhibitory effects on other viruses that enter cells via endocytosis. Future studies will investigate the mechanisms behind this specificity. PLSCR1 has been described to inhibit a range of viruses in various cell lines, such as encephalomyocarditis virus, vesicular stomatitis virus, Epstein-Barr virus, hepatitis B virus, hepatitis C virus, human cytomegalovirus, human immunodeficiency virus 1, human T-cell lymphotropic virus type 1, and influenza A virus [22, 140-146]. It has been proposed that PLSCR1 directly binds viral proteins and impairs their functions to restrict the non-coronaviruses cited above, reviewed in [147]. However, it seems unlikely that PLSCR1 has evolved to interact directly with such a diverse set of viral proteins. An alternative explanation is that diverse viral proteins convergently evolved to bind PLSCR1 as a mechanism of immune evasion. Meanwhile, overexpressing PLSCR1 in cell culture could act *like a sponge*, absorbing these viral proteins and thereby hindering viral function. We searched for PLSCR1 interactions in ten SARS-CoV-2 proteins interactome studies, relying on ectopic expression of individual viral proteins [96-98, 100-105, 148], and no interaction was reported in two or more independent studies. Two interactions were reported in a single study: (i) PLSCR1-ORF7b [98], and (ii) PLSCR1-ORF8 [101], both by proximity biotinylation, which was less stringent compared to affinity purification-mass spectrometry (AP-MS) and yeast two-hybrid (Y2H) techniques (**Supp Fig 7**). To date, there is no strong evidence of a direct interaction between a SARS-CoV-2 protein

and PLSCR1, although we cannot rule out that such interactions may occur or even appear in the

future as SARS-CoV-2 evolves.

Recent SARS-CoV-2 variants, including Omicron (BA.5) and Kraken (XBB.1.5), showed

reduced sensitivity to PLSCR1-mediated restriction compared to the New York 2020 strain which

served as a reference in our study. Previous research suggests that Omicron, in particular, has

developed increased resistance to IFN [149, 150], a trait associated with its highly-mutated spike

protein [151]. Omicron's relative resistance to IFN may be due to alternative entry routes that

alleviate the restrictions from antiviral ISGs targeting endocytosis, such as PLSCR1 (**Fig 1**). While

Omicron favors endocytic entry over TMPRSS-2-dependent entry near the cell-surface [152, 153],

recent findings suggest that Omicron can also utilize cellular metalloproteinases for near cell-

surface entry, enhancing its infectivity in nasal epithelia [151]. Future research should investigate

how SARS-CoV-2 variants evade PLSCR1 and whether this evasion is primarily due to mutations in

the spike protein facilitating alternative entry mechanisms or to other factors.

Several PLSCR1 variants were enriched in a GWAS on severe COVID-19, with a relatively

low odds ratio of approximately 1.2 [23, 24]. Considering the complex redundancies within

antiviral defenses, from innate immunity featuring multiple effector ISGs that restrict SARS-CoV-

2 [9-14, 17, 18], to adaptive immunity [154], the modest odds ratio associated with a single

effector ISG not involved in IFN signaling may not be unexpected. However, for these very reasons,

the identification of PLSCR1 in the GWAS remains noteworthy. Of these enriched PLSCR1 variants,

only rs343320 resulted in a protein-coding change, His262Tyr. Our findings indicate that His262Tyr

exhibits a hypomorphic and dominant effect in cell culture, leading to increased SARS-CoV-2

infection. Future research should aim to ascertain whether rs343320, or potentially other PLSCR1

variants, are directly responsible for elevated risks of severe COVID-19 in patients. It is also

noteworthy to mention the presence of a loss-of-expression/loss-of-function variant in PLSCR1,

specifically p.Ile110AsnfsTer6 (rs749938276). This variant exhibits a minor allele frequency (MAF)

of 0.0003 in the general population, yet it is notably more prevalent among the Ashkenazi Jewish

population, with a maximum MAF (MAFmax) of 0.01. The identification of at least one

homozygous individual in the gnomAD database underscores the viability of individuals deficient

in PLSCR1 [155]. This suggests a potential enrichment of this variant within specific populations,

an aspect that merits further epidemiological and functional exploration to understand its impact

on susceptibility to SARS-CoV-2.

Our findings show that baseline levels of PLSCR1 are effective in limiting SARS-CoV-2

infection. This is in line with other studies where ISGs like *DAXX* and *LY6E* were shown to inhibit

SARS-CoV-2 independently of IFN [17, 156, 157]. mRNA-seq analyses of Huh-7.5 cells and primary

human hepatocytes, as well as data from the GTEx consortium on various human tissues [35,

158], revealed that many ISGs are constitutively expressed, even without IFN stimulation (**Supp**

Fig 8). This supports the idea that the IFN-induced antiviral state results more from enhanced

expression of antiviral genes rather than a binary ON/OFF switch. In future studies, it will be

interesting to explore whether intrinsically expressed ISGs also carry out cellular functions beyond

pathogen defense.

Materials and Methods

Plasmids, oligos, and primers

406 The plasmids, gene fragments, and primers used in this study are listed in **Supp Tables**

407 **11, 12, and 13**, respectively.

Cell Lines

Huh-7.5 (human hepatocellular carcinoma) [159], A549-ACE2 (human lung carcinoma,

generously provided by the laboratory of Brad R. Rosenberg), Lenti-X 293T (Takara, cat. #632180),

Caco2, Vero E6 (*Chlorocebus sabaeus* kidney epithelial cells, ATCC cat. #CRL-1586), BHK-21

(hamster kidney) cells, and SV40-Fribroblasts were cultured in Dulbecco's Modified Eagle Medium

(DMEM, Fisher Scientific, cat. #11995065) supplemented with 0.1 mM nonessential amino acids

(NEAA, Fisher Scientific, cat. #11140076) and 10% fetal bovine serum (FBS, HyClone Laboratories,

Lot. #KTH31760) at 37°C and 5% CO2. All cell lines tested negative for mycoplasma.

Virus stocks

419 **CHIKV-181/25-mKate2:** the infectious clone was a kind gift from Mark Heise (University

420 of North Carolina, USA) [not published yet]. 20 μg of infectious clone DNA was linearized with

NotI-HF at 37°C overnight. Complete digestion was confirmed by running a sample of the digested DNA on a 1% agarose gel. After confirmation, linearized DNA was cleaned via phenol-chloroform extraction, and then ethanol precipitated. The precipitated DNA was resuspended in 20 μL of RNase-free H_2O and in vitro transcribed with an SP6 mMessage mMachine In Vitro Transcription Kit (ThermoFisher, cat. AM1340). The generated RNA was electroporated into 1.2×10^7 BHK-21 cells, and the produced virus was harvested once approximately 80% of the electroporated cells lifted or showed signs of cytopathic effects and 100% of the cells were positive for mKate2 signal. The titer of the virus was 8.5×10^6 focus-forming units (FFU) on Huh-7.5 cells.

hCoV-NL63: was generously provided by Volker Thiel (University of Bern) and amplified at 33°C in Huh-7.5 cells as in [29].

hCoV-OC43: was obtained from ZeptoMetrix (cat. #0810024CF) and amplified at 33°C in Huh-7.5 cells as in [29].

hPIV3-GFP [160]: stock (based on strain JS) grown in VeroE6 cells as in [161].

HSV-1-GFP: stock made by passage on VeroE6 cells. 2×10^7 cells seeded in a T175 flask were infected at an MOI of 0.01 PFU/ml of HSV-1-GFP virus engineered and provided by Ian Mohr [162]. After a one-hour incubation at 37°C, the inoculum was removed, and 20 ml of DMEM supplemented to contain 10% FBS and NEAA was added. Cells were incubated at 37°C for 24 h or until CPE was evident. Cell supernatant containing progeny virus was harvested and titrated on Vero E6 cells (2.4% avicel, fix 2 dpi) at 2.4×10^8 PFU/ml.

IAV WSN (H1N1): was generated in MDCK cells. Cells were inoculated at MOI 0.01 in DMEM supplemented with NEAA, 0.2% BSA, 0.1% FCS, 50 mM Hepes, and 1 μg/ml TPCK-trypsin. Virus-containing culture supernatant was harvested at 52 h post-infection and cleared by centrifugation.

SARS-CoV-2: unless otherwise stated, the isolate SARS-CoV-2/human/USA/NY-RU-NY1/2020 was used in this study [163]. The virus was sourced from the saliva of a deidentified patient in New York City, collected on July 28, 2020. Its sequence is publicly accessible (GenBank OM345241). The virus isolate was amplified in Caco-2 cells. The passage 3 stock employed had a titer of 3.4×10^6 PFU/ml, as measured on Vero E6 cells using a 1% methylcellulose overlay, according to previously described methods [164]. The Beta (B.1.351), Delta (B.1.617.2), Omicron

(BA.5), and Kraken (XBB.1.5) variants were obtained from BEI resources (cat. # NR-54008, NR-

55611, NR-58616, and NR-59104, respectively), amplified in Vero E6 cells engineered to stably

express TMPRSS2, and titer was determined as described above.

SINV Toto1101 [165]: expressing an nsP3-mScarletI fusion reporter was generated by

cloning the sequence encoding mScarletI in frame into a unique SpeI restriction site in the

pToto1101 infectious clone plasmid as previously described [166]. *In vitro* transcribed, capped

RNA was generated from the pToto1101-nsP3-mScarletI plasmid (Invitrogen mMessage

mMachine SP6 kit, AM1340) and electroporated into BHK-J cells, a derivative of BHK-21 cells

(ATCC, CCL-10) as previously described [166]. 24 hours post electroporation, centrifuge clarified

supernatants were aliquoted and stored at -80C. BHK-J cells were cultured and virus stocks

generated in MEM supplemented with 7.5% FBS.

VEEV-dsEGFP [15, 167]: the infectious clone plasmid was linearized (MluI) and transcribed

in vitro using an mMessage mMachine SP6 transcription kit (Ambion). BHK-21 cells were

electroporated with viral RNA, and supernatant containing progeny virus was harvested after

incubation at 37°C for 30 h or until CPE was evident. Virus was titrated by plaque assay on BHK-

21 cells (2.4% avicel, fix 2 dpi). BHK-21: 1.45 x 10^9 FPU/ml.

VSV-GFP [168]: grown in BHK-21 cells as in [161].

YFV 17D: was generated via transfection of Huh-7.5 with in vitro transcribed RNA from

pACNR-FLYF-17D plasmid as described in [161].

mRNA-seq

mRNA-seq on SARS-CoV-2-infected cells

Cell culture and infection: 75,500 Huh-7.5 cells or 150,000 Calu-3 cells were seeded in

each well of a 12-well plate with 1 mL media. Media: DMEM with 5% FBS and 1% NEAA for Huh-

7.5 cells or EMEM (ATCC, 30-2003) with 10% FBS for Calu-3 cells. The next day, cells were infected

by removing 500 μL of media and adding 500 μL of media with SARS-CoV-2 strain USA-WA1/2020

(BEI Resources, NR-52281) at 5,000 PFU/well (virus titer determined in Huh-7.5 cells). After one

day, the wells were washed with PBS and cells were harvested in 1 mL TRIzol (Invitrogen, cat.

15596-018). N = 3 replicates (separate wells) per sample.

RNA extraction: 2 ml MaXtract High Density tubes (Qiagen, 129056) were centrifugated
at 12,000–16,000 x g for 20-30 second centrifugation. A volume of 750 µL TRIzol-prepared sample
was combined with 150 µL chloroform in these tubes and hand-shaken vigorously. Phase
separation was accomplished by centrifugation at 1500 x g for 5 min at 4°C. The aqueous phase
was then mixed with 400 µL ethanol 95-100% in a separate tube. These preparations were then
transferred to Zymo Research RNA clean and concentrator-25 kit columns (Zymo Research, cat.
R1018) and subjected to multiple wash and centrifugation steps as recommended by the
manufacturer. An in-column DNase I treatment was performed using Qiagen DNase (Qiagen,
79254). Finally, RNA was eluted with 50 µL DNase/RNase-Free water and stored at -80°C.

Sequencing: Poly-A enriched libraries were made using the TruSeq stranded mRNA LT kit
(Illumina, Cat# 20020594) and sequenced on a NovaSeq SP with PE150 read length.

mRNA-seq on IFN-treated cells

Cell culture and treatment: 75,500 Huh-7.5 or 200,000 Calu-3 cells were seeded in each
well of a 12-well plate with 1 mL media. Two days later, the media was replaced with 1 mL of
DMEM with 5%FBS, 1% NEAA in Huh-7.5 or EMEM (ATCC, cat. 30-2003) with 10% FBS for Calu-3
cells with IFN-α2a (PBL, cat. 11101-2) and incubated at 37°C. 24 h later, cells were harvested in
500 µL TRIzol. N = 3 replicates (separate wells) per sample.

RNA extraction as described above.

Sequencing: Poly A-enriched libraries were made using the NEBNext Ultra II RNA Library
Prep Kit for Illumina (NEB, cat. E7770) and sequenced on a NovaSeq SP with PE150 read length.

mRNA-seq on PLSCR1 KO cells

Cell culture and CRISPR KO: 30,000 Huh-7.5 cells were seeded in five wells of a 24-well
plate with 480 uL media. The cells were reverse transfected with 120 uL of a transfection mixture
composed of 250 nM of pooled anti-PLSCR1 or non-targeting Edit-R crRNAs from Horizon
Discovery (cat. CM-003729-01-0002, CM-003729-02-0002, CM-003729-03-0002, and CM-
003729-04-0002 or U-007501-01-05, U-007502-01-05, U-007503-01-05, and U-007504-01-05,
respectively) which had been resuspended with an equimolar amount of Edit-R tracrRNA

(Horizon, cat. U-002005-20) and a 1:200 dilution of Dharmafect 4 (Horizon, cat. T-2004-01). The

following day, the media was changed, and the cells were progressively scaled up to a 6-well plate

over the next 4 days. When the cells were confluent in the 6-well plate, the media was removed

from four of the wells. They were then washed with 1x PBS (cat. 14190-144) and lysed with 1 mL

TRIzol (Life Technologies, cat. 15596-018) for 5 minutes at room temperature before transferring

to an Eppendorf tube and freezing at -80°C to await RNA extraction. The remaining well was lysed

with 300 µL of RIPA buffer (Thermo cat. 89900) supplemented with 1x protease inhibitor (Thermo

cat. 87786) and 1x EDTA and prepared for western blot as described below, in the "Western Blots"

section.

517   **RNA extraction** as described above.

518   **Sequencing:** Poly A-enriched libraries were made using the NEBNext Ultra II RNA Library

519   Prep Kit for Illumina (NEB, cat. E7770) and sequenced on a NovaSeq SP with PE150 read length.

521   mRNA-seq analysis

522   mRNA-seq reads were first quality-filtered and adapter-trimmed using Trim Galore with

parameters -q 20 -e 0.1 --length 20 --paired and Cutadapt. Reads were then mapped to the human

genome GRCh38 or to a combined SARS-CoV-2 MN985325.1/human genome GRCh38 using STAR

[169] with settings including --runThreadN 8 --outFilterMultimapNmax 1 --twopassMode Basic.

Feature counting was performed using the featureCounts function from the Rsubread package

[170], with strandness specified depending on the sequencing and other parameters as default.

The resulting counts were imported into a DESeqDataSet object using the DESeq2 package [171]

with a design formula of ~Group. Size factors were estimated and normalized counts were

extracted and saved. Differential expression analysis was performed using DESeq with the created

DESeqDataSet object, contrasted by sample groups, cooksCutoff and independentFiltering

disabled, and otherwise default parameters.

Unbiased arrayed CRISPR KO screening

Screen overview

The content of each gRNA 384-well plate constituting the whole-genome library (61 library plates total) was transfected to 16 assay 384-well plates (976 assay plates total). Positive and negative control gene gRNAs were incorporated into vacant wells of each assay plate as described below. Huh-7.5 cells were subsequently seeded into these assay plates. The 16 assay plates served as replicates for three distinct experimental conditions: 4 replicates for mock treatment followed by mock infection, 5 replicates for IFN-α2a treatment followed by SARS-CoV-2 infection, and 7 replicates for mock treatment followed by SARS-CoV-2 infection. Each day, three library 384-well plates were processed, along with their corresponding 48 assay plates. The full gRNA library, distributed across 61 384-well plates, was completed over a span of 21 days. For each set of plates, cell seeding was conducted on day 0, IFN-α2a treatment on day 4, SARS-CoV-2 infection on day 5, and cell fixation on day 6.

gRNA library preparation

A 0.1 nmol Edit-R Human Whole Genome crRNA Library (Horizon, cat. GP-005005-01) containing four crRNAs per gene and one gene per well (total 0.1 nmol crRNA/well) was resuspended in 80 μL of a 1.25 μM tracrRNA (Horizon, cat. U-002005-1000) 10 mM Tris-HCL pH 7.4 solution to create a 1.25 μM gRNA solution. The library was then aliquoted in 10 mM Tris-HCL pH 7.4 in several 96-well plate and 384-well plate copies using a Tecan Freedom EVO liquid handler. A single-use library copy containing a 40 μL/well of a 312.5 nM gRNA solution in the 384-well plate format was used in this study.

gRNA reverse transfection (day 0)

In each well of the 384-well assay plates, 40 μL of a transfection solution was prepared by combining 2% DharmaFect-4 transfection reagent (Horizon, cat. GP-T-2004-07A) in Opti-MEM (Gibco, cat. 31985070). This was added to 40 μL of a 312.5 nM gRNA library using a Thermofisher Multidrop Reagent Dispenser, yielding an 80 μL/well transfection mixture. The mixture was left to incubate at room temperature for 20 minutes. Simultaneously, assay plates were preloaded with 11 μL/well of serum-free media, which was formulated from DMEM, 1X Antibiotic-Antimycotic solution (Gibco, cat. 15240-062), and 1X NEAA, dispensed via a Thermofisher

Multidrop Reagent Dispenser. Subsequently, 4 µL/well of the transfection mixture was dispensed

into each of the assay plates (16 assay plates per library plate) using a Tecan Freedom EVO liquid

handler. During this time, Huh-7.5 cells were prepared in media containing 25% FBS, 1X Antibiotic-

Antimycotic solution, and 1X NEAA. A volume of 10 µL cells/well was added to the assay plates,

again using a Thermofisher Multidrop Reagent Dispenser. Ultimately, each well contained 1,250

cells in a 25 µL final volume, with a composition of 25 nM gRNA, 10% FBS, 0.8X Antibiotic-

Antimycotic, and 0.8X NEAA. Plates were then span at 200 g for 5 minutes. To minimize

evaporation, plates were sealed with Breathe-Easy sealing membranes (Sigma-Aldrich, cat.

Z380059) and placed in humid chambers constructed from a 245 mm x 245 mm dish containing

a paper towel moistened with 15 mL of 1X Antibiotic-Antimycotic solution. Four assay plates were

placed in each humid chamber and incubated at 37°C.

IFN-α2a treatment (day 1)

Each well received 5 µL of IFN-α2a (PBL, cat. 11101-2) in media (DMEM, 20% FBS, 1X

Antibiotic-Antimycotic solution, 1X NEAA), using a Thermofisher Multidrop Reagent Dispenser,

for a final concentration of 1 pM IFN-α2a in a final volume of 30 µL. Plates were then span at 200

g for 5 minutes and incubated at 37°C.

SARS-CoV-2 infection (day 5)

Each well received 212.5 PFU SARS-CoV-2 virus (titer determined on Vero E6 cells, see

Virus Stocks section above) diluted in 5 µL of media (DMEM, 20% FBS, 1X Antibiotic-Antimycotic

solution, 1X NEAA) for a final volume of 35 µL in the BSL3. Plates were then span at 200 g for 5

minutes and incubated at 37°C.

Fixing (day 6)

Each well received 50 µL of 20% neutral buffered formalin (Azer Scientific, cat. 20NBF-4-

G) and plates were incubated overnight. The formalin mixture was then removed and each well

received 50 µL of PBS.

IF staining

For IF staining of SARS-CoV-2 infected cells in the arrayed CRISPR KO screen (**Fig 1E)**, as

well as some focused experiments (**Fig 3B**, **Fig 3C**, **Fig 4B,C**, **Fig 8C)**: the following solutions were

prepared for both 96-well plate (96-wp) and 384-well plate (384-wp): PBS (Phosphate Buffered

Saline), Perm Solution: Comprised of PBS with an added concentration of 0.1% Triton X100,

Blocking Solution: PBS was mixed with 1% BSA. This solution was prepared a day in advance and

filtered before use, PBST: PBS with 0.1% of Tween 20, Primary Antibody Solution: Genetex anti

SARS-CoV-2 N poly rabbit antibody (GTX135357) at a dilution of 1:3000, Secondary Antibody

Solution: AF647 anti-rabbit antibodies at a dilution of 1:3000 and Hoechst 33342 (10 mg/ml) at

1:10,000. Plates were stained on a Biotek EL406 Microplate Washer Dispenser using the following

steps: 1. Priming: The washer was primed with 200 ml of each buffer: PBS, Perm Solution, Blocking

Solution, and PBST. 2. First Washing Phase: Contents of the plates were aspirated. Plates were

then washed with 50 μL/well (384-wp) or 200 μL/well (96-wp) of Perm Solution, followed by a

slow shake for 3 seconds. 3. Permeabilization: A delay of approximately 1 minute was

implemented for permeabilization, in addition to the time required to process all the plates

(around 1 minute per plate). 4. Second Washing Phase: Plates were washed with 50 μL/well (384-

wp) or 200 μL/well (96-wp) of PBS. Subsequently, 50 μL/well (384-wp) or 200 μL/well (96-wp) of

Blocking Solution was added to the plates, followed by a slow shake for 3 seconds. 5. Blocking,

autoclean, and Primary Antibody Priming: The washer was set to undergo an autoclean cycle with

PBS for 30 minutes. Simultaneously, the syringe containing the Primary Antibody Solution was

primed with 16 ml. 6. Third Washing Phase and First Antibody Dispensing: After aspirating the

contents of the plates, 15 μL/well (384-wp) or 60 μL/well (96-wp) from the Primary Antibody

Solution was added, followed by a slow shake for 3 seconds. 7. Primary Antibody Incubation,

autoclean, and Secondary Antibody Priming: The washer was subjected to another autoclean

cycle using PBS for 2 hours and 5 minutes. The syringe containing the Secondary Antibody

Solution was primed with 16 ml during this period. 8. Fourth Washing Phase and Second Antibody

Dispensing: Plates were washed with 50 μL/well (384-wp) or 200 μL/well (96-wp) of PBST,

followed by a 2-second slow shake and aspiration. Then, 15 μL/well (384-wp) or 60 μL/well (96-

wp) from the Secondary Antibody Solution was added, accompanied by a 3-second slow shake.

9. Secondary Antibody Incubation and autoclean: An autoclean cycle with PBS was initiated and

lasted for 1 hour. 10. Final Washing Phase: Plates were washed with 50 μL/well (384-wp) or 200

μL/well (96-wp) of PBST. This was followed by two consecutive washes with 50 μL/well (384-wp)

or 200 µL/well (96-wp) of PBS, incorporating a 2-second slow shake in each cycle. Finally, plates

were left with 50 µL/well (384-wp) or 200 µL/well (96-wp) of PBS.

Imaging

Plates were imaged with a ImageXpress micro-XL and analyzed with MetaXpress

(Molecular Devices).

Analysis

Analysis was conducted in R.

Data Omission: We excluded five library plates, constituting 8% of the total library, due to

insufficient infection levels for accurate quantification.

Normalization: Two variables were subject to normalization—percentage of SARS-CoV-2

positive cells and the count of nuclei. The normalization steps were applied separately for the

three screening conditions: mock treatment followed by mock infection, IFN-α2a treatment

followed by SARS-CoV-2 infection, and mock treatment followed by SARS-CoV-2 infection. Data

was first Z-scale normalized within assay plates:

$$Scale(x) = \frac{x - mean(x)}{sd(x)}$$

And then Z-scale normalized per row and per column to remove any spatial effects.

Statistics: a robust statistic accounting for technical and biological variability was applied

using the below formula within the replicates of each gene**:**

$$Stat\ score(x) = \frac{mean(x)}{sd(x)}$$

This statistic was further standardized by Z-scaling across all genes to produce our final z-

score.

Exclusion of genes influencing cell proliferation: 224 genes with nuclei count z-score ≥ 2

and 388 genes with nuclei count z-score ≤ 2 in the mock treatment followed by mock

infection condition were deemed to influence cell proliferation and excluded from

subsequent analyses.

Exclusion of genes not expressed in cell lines of interest (A549, Calu-3, Huh-7.5 cells) and

in human lung cells. Expression data from cell lines from [33, 34]. Expression data from tissues

from [35]. Genes were considered expressed if they had at least one read count within exons.

Gene set enrichment analysis

For the pathway analysis, we leveraged the FGSEA package [172] to perform Gene Set
Enrichment Analysis (GSEA) using gene sets found in the Molecular Signatures Database (MSigDB)
[173]: Reactome [174], KEGG [175], Wikipathways [176], Pathway Interaction Database [177], and
Biocarta [178]. The analysis was conducted separately for two conditions: IFN-α pretreated SARS-
CoV-2 infection and non-pretreated SARS-CoV-2 infection. We attributed a score to each pathway
for both conditions:

656
$$Score = -log10(padj) \times sign(Normalized\ Enrichment\ Score)$$

657   Each pathway was then attributed to one of nine quadrants (as in **Fig 2F**) based on its
658 score in the IFN-α pretreated condition (axis x) versus non-pretreated condition (axis y), using
659 padj ≤ 0.05 as a cutoff.

Compilation of published large-scale omic studies on SARS-CoV-2

662   As a rule, we listed the genes classified as 'hits' by the authors of the respective studies.
663 Below are some exceptions or clarifications:

Functional genetic screens

Baggen, et al. [76]: we used the "low stringency adjusted" analysis in Suppl Table 11.
Proviral: p_value_neg ≤ 0.05 and log2 FC ≥ 1. Antiviral: p_value_pos ≤ 0.05 and log2 FC ≤ -1. We
also used "High stringency" analysis in Suppl Table 7. Proviral: Gene is TMEM106B (log2 FC = 3.8
and p_value_neg = 0.08) or p_value_neg ≤ 0.05 and log2 FC ≥ 1 (no gene matched this criteria).
Antiviral: p_value_pos ≤ 0.05 and log2 FC ≤ -1 (no gene matched this criteria). **Biering, et al. [75]:**
in Supplementary Table 1, in Tab 1: LOF-enriched screen analysis, for proviral genes, we used FDR
≤ 0.05. In Tab 2: GOF-depleted screen analysis, proviral: FDR ≤ 0.05. In Tab 3: GOF-enriched screen
analysis, for antiviral genes, we used FDR ≤ 0.05. **Chan, et al. [74]:** in Multimedia component 6,
for Vero E6 (T16); UM-UC-4 (T23); HEK293+A+T (T12); HuH-7 (T15) and Calu-3 (T43), we
considered gene as hits at FDR < 0.1 (as in Figure 4A). We listed the genes as proviral if differential
≥ 0 or antiviral if differential ≤ 0. **Daniloski, et al. [73]:** we used Table S1. FDR MOI1 ≤ 0.05 or FDR
MOI3 ≤ 0.05. **Danziger, et al. [10]:** in S1 Table, we used the genes annotated as proviral or antiviral

by the authors. **Gordon, et al. [72]:** for A549 +ACE2 in Table S6 or Caco2 in Table S7, for proviral genes, we used Averaged z-scores ≤ 2 and for antiviral genes, we used Averaged z-scores ≥ 2. **Grodzki, et al. [71]:** for VeroE6 in additional file 4, tab 4, we used FDR <0.25. For HEK293T +Cas9 Study 1 in additional file 6, tab17, we used FDR <0.25. For HEK293T +Cas9 Study 1 in additional file 7, tab7, we used FDR <0.25. **Hoffmann, et al. [26]:** for 37°C (Table S1E) and for 33°C (Table S1C), we selected proviral genes if FDR ≤ 0.05 and z-score ≥ 0 and antiviral genes if FDR ≤ 0.05 and z-score ≤ 0. **Hossain, et al. [65]:** in Figure 3E, we selected the top 15 genes in the spike-mNG axis by negative log robust rank aggregation. **Israeli, et al. [70]:** we used Supplementary Data 1. **Kaur, et al. [14]:** we used the genes labelled in Figure 1. **Le Pen et al. (this study):** we used z-score ≥ 2 for antiviral genes and ≤ 2 for proviral genes, see Unbiased arrayed CRISPR KO Screen analysis section above for more details. **Loo, et al. [69]:** we used the genes labelled in Figure 2. **Mac Kain, et al. [17]:** in Electronic Supplementary Material 5, for antiviral genes, we used the filter: pos|rank ≤13, for proviral genes, we used neg|rank ≤13. **Martin-Sancho, et al. [11]:** we used Table S3, "Lentivirus validated hits". **Pahmeier, et al. [68]:** we used the genes labelled in Figure 6. **Rebendenne, et al. [67]:** for Calu3_Gattinara, we used for proviral genes: residual_z-score_avg ≥ 2.5 and for antiviral genes: residual_z-score_avg ≤ 2.5 (no gene). For VeroE6, proviral: residual_z-score_avg ≥ 2.5, and antiviral: residual_z-score_avg ≤ 2.5. For Caco2, proviral: residual_z-score_avg ≥ 2.5 and antiviral: residual_z-score_avg ≤ 2.5. For Calu3_Calabrese, proviral: residual_z-score_avg ≤ 2 and antiviral: residual_z-score_avg ≥ 2. **Rehfeld, et al. [66]:** In Table S1, we considered genes as hits for PRF-1 top eGFP-mCh or PRF-1 bottom eGFP-mCh if FDR ≤ 0.05. **Schneider, et al. [29]:** for both 37°C (Table_S1A) and 33°C (Table_S1B), we listed the gene as proviral if FDR ≤ 0.05 and z-score ≥ 0 and antiviral if FDR ≤ 0.05 and z-score ≤ 0. **Wang, et al. [63]:** we used Table S1. Proviral: Enrichment score ≤ 10^(-4). **Wei, et al. 2021 [62]:** we used Table S1. For proviral genes, we used Cas9-v1 Avg. ≥ 2.5 & Cas9-v2 Avg. ≥ 2.5. Average between Cas9-v1 Avg. and Cas9-v2 Avg. is given in the table. For antiviral genes, we used Cas9-v1 Avg. ≤ -2.5 & Cas9-v2 Avg. ≤ -2.5. Average between Cas9-v1 Avg. and Cas9-v2 Avg. is given in the table. **Wei, et al. 2023 [61]:** in Table S1, for Day 7 or Day 14, we used fdr ≤ 0.05 for positive regulators of ribosomal frameshifting or negative regulators of ribosomal frameshifting. **Wickenhagen, et al. [12]:** we used the genes labelled in Figure 1B. **Xu, et al. [18]:** in Huh-7.5 or A549-ACE2 cells, in

untreated or in IFN-gamma treatment, we used Log10 p-value (mNG-High vs. mNG-Low
Enrichment) ≥ 3. **Zhu et al. [60]:** In Supplementary Data 1 , SARS-CoV-2 WT and 2 VOCs tested,
for proviral genes, we used pos.score_wt ≤ 0.0005 or pos.score_alpha ≤ 0.0005 or pos.score_beta
≤ 0.0005.

Human genetic studies

Degenhardt, et al. [86]: we used Table 2 and added KANSL1 and TAC4, based on new
analysis by Pairo-Castineira et al. 2023 [23]. **Kousathanas, et al. [24]:** we used Table 1 from Pairo-
Castineira, et al. 2023 [23]. **Pairo-Castineira, et al. 2021 [94]**: we used Table 1 from Pairo-
Castineira, et al. 2023 [23]. **Pairo-Castineira, et al. 2023 [23]**: we only considered variants near
annotated genes (i.e., we excluded rs1073165). **Roberts, et al. [79]:** we used Supplementary Table
4. **Zhou, et al. [91]:** we used Table 1 and the p-values from COVID-19 hospitalization (European
ancestry only).

SARS-CoV-2 protein interactomes

Davies, et al. [105], Laurent, et al. [98], Li, et al. [104], Samavarch-Tehrani, et al. [96], St-
Germain, et al. [99], Stukalov, et al. [103]: we used the Supplementay Table 3 from [25]. **Gordon,**
et al. [97]: we used the genes listed in Table S2. **Liu, et al. [100] and May, et al. [101]:** we used
the genes listed in May, et al. [101] Table S5-new. **Zhou, et al. [102]:** we used the genes listed in
Table S1. "SARS-CoV-2-human protein-protein interactions identified in this study."

SARS-CoV-2 RNA interactomes

Flynn, et al. [110], Kamel, et al. [109], Labeau, et al. [108], Lee, et al. [111], Schmidt, et
al. 2021 [107]: we used the Supplementay Table 3 from [25]. **Schmidt, et al. 2023 [106]:** we used
Table S2, "Huh-7 interactome comparison tab", genes listed in the following categories: "Huh-7
gRNA FDR5 HS" and "Huh-7 sgmRNA FDR5 HS".

Altered phosphorylation states in SARS-CoV-2-infected cells.

Bouhaddou, et al. [112]: for Vero E6 cells, we used Table S1, tab 1 "PhosphoDataFull" and
filtered for adj.pvalue ≤ 0.05 & log2FC ≥ 1 or adj.pvalue ≤ 0.05 & log2FC ≤ -1 in at least three
different time points.

Generation of PLSCR1 KO cells

CRISPR KO

KO Huh-7.5 and A549-ACE2 cells were generated using two anti-PLSCR1 Edit-R crRNAs from Horizon Discovery (cat. CM-003729-02-0002 and CM-003729-04-0002) or non-targeting controls (cat. U-007501-01-05 and U-007502-01-05) resuspended with an equimolar amount of Edit-R tracrRNA (Horizon, cat. U-002005-20) to form sgRNAs. The sgRNAs were then co-transfected with Cas9-mKate2 mRNA (Horizon, cat. CAS12218) according to the manufacturer's protocol. 24 to 48 hours after transfection, cells were examined for mKate2 signal and FACS sorted into bulk and single cell populations, gating on mKate2 signal. Bulk and single cell populations were then assessed for PLSCR1 expression by western blot to confirm KO.

Amplicon sequencing

Genomic DNA was isolated from a frozen cell pellet using the Qiagen DNeasy kit (Qiagen, cat. 69504) and treated with RNAse A in the optional RNA digestion step. The region of interest was then amplified using Q5 2x mastermix (New England Biolabs, cat. M0492S), 500 ng of template DNA, 0.5 µM of forward and reverse primers, and the following PCR conditions: 98°C for 30 seconds, followed by 98°C for 5 seconds, 64°C for 15 seconds, and 72°C for 20 seconds, repeating those steps 30 times before holding at 72°C for 2 minutes. The primers used when amplifying PLSCR1 genomic DNA from WT and KO Huh-7.5 and A549+ACE2 cells were RU-O-32687 (5' AACATAGAGGTGATTATGATTTCGTCT) and RU-O-32526 (5' GGAGGAGCTTGGATTTCTATCTAC). PCR reactions were run on a 1% agarose gel to confirm amplification. Amplicons were purified with a Zymo DNA clean and concentrator kit (Zymo, cat. D4013) before sending to Genewiz for amplicon sequencing.

Western Blots

Cell pellets were collected and lysed in RIPA buffer (Thermo, catalog number 89900) with 1x Halt protease inhibitor cocktail and 1x EDTA (Thermo, catalog number 87786). Cell lysates were spun down in a refrigerated centrifuge at 15,000 g at 4°C for 15 minutes to pellet any cell debris, and the supernatant was collected and transferred to another tube. The collected samples were quantified by BCA assay (Thermo Scientific, cat. #23225). Before loading into the gel, we added sample buffer (Thermo, catalog number NP0007) with β-mercaptoethanol and heated the sample

at 95°C for 10 minutes. Samples were allowed to cool back to room temperature before loading

into 12% Bis-Tris 1.0 mm gels (Invitrogen, cat. #NP0321BOX). Proteins were electrophoretically

transferred onto nitrocellulose membranes. Membranes were blocked with 5% fat-free milk in 1X

TBS (Thermo, catalog number NP00061) and then incubated with primary antibody at 4°C

overnight in 5% fat-free milk in 1x TBS with 0.5% Tween-20 (TBST). Primary antibody: rabbit anti-

PLSCR1 polyclonal antibody (Proteintech, cat. #11582-1-AP) and mouse anti-β-actin antibody

(Millipore Sigma, cat. A5316-100UL) as a loading control. After incubation, membranes were

washed three times with 1x TBST and then incubated with fluorescently conjugated secondary

antibodies for 2 hours at room temperature. Secondary antibodies: LI-COR IRDye goat anti-rabbit

800 and goat anti-mouse 680 (LI-COR cat. 926-32211 and 926-68070, respectively). Membranes

were washed three times with 1X TBST, once with 1X TBS, then imaged on an Azure 600. For the

western blot in Supplementary Figure 4, this protocol was modified slightly: proteins were

electrophoretically transferred onto 0.22 µm polyvinylidene difluoride (PVDF) membranes,

incubated with a primary antibody solution of rabbit anti-PLSCR1 polyclonal antibody

(Proteintech, cat. #11582-1-AP) and polyclonal rabbit anti-RPS11 antibody (Abcam, cat.

ab157101), a secondary antibody solution of goat anti-rabbit HRP (Invitrogen, cat. 31462) and

visualized using a SuperSignal West Femto Maximum Sensitivity Substate kit (Thermo, cat.

#34096).

Cell viability assay

4,000 A549-ACE2 cells/well or 8,000 Huh-7.5 cells/well were seeded on day 0 in 100 µL

media (DMEM, 10% FBS, 1X NEAA, 1X Penicillin-Streptomycin) in a 96-well plate. The next day,

blasticidin selection was added as indicated in the figure to serve as a control for reduced cell

viability. On day 4, cell viability was assessed by resazurin assay (Abcam, cat. ab129732) according

to the manufacturer's protocol.

JAK-STAT inhibitor treatment

InSolution (Millipore, cat. 420097-500UG) was used according to the manufacturer's

instructions.

Titration of IFN-a2a in CHIKV-infected cells

6,000 Huh-7.5 cells/well were seeded in 100 μL media (DMEM, 10% FBS, 1X NEAA). The following day, we treated cells with one of twelve concentrations of IFN-a2a (PBL, cat. 11101-2): 64 pM, 32 pM, 16 pM, 8 pM, 4 pM, 2 pM, 1 pM, 0.5 pM, 0.25 pM, 0.125 pM, 0.0625 pM, and 0 pM. The following day, the cells were infected with 2 μL of CHIKV-181/25-mKate2 (approximately 17,000 FFU per well, titer determined on Huh-7.5 cells) and fixed after 12 hours. Plates were stained with a 1:1000 dilution of Hoechst for at least 10 minutes before washing with PBS and imaging for mKate2 signal.

RT-qPCRs on ISGs

Huh-7.5 and A549-ACE2 cells were seeded at densities of 36,000 or 18,000 cells/well, respectively, in 500 μL of media (DMEM, 10% FBS, 1X NEAA) in 24-well plates. The following day, a dilution series of IFN-α2a (PBL, cat. 11101-2) or IFN-β (PBL, cat. #11415) was prepared (64 pM, 32 pM, 16 pM, 8 pM, 4 pM, 2 pM, 1 pM, 0.5 pM, 0.25 pM, 0.125 pM, 0.0625 pM, and 0 pM) and 50 μL of each dilution added to the cells in duplicate. After 24 hours, the media was removed and the cells were washed with 1 mL of ice-cold PBS. 200 μL of RNA Lysis Buffer (Zymo Research, cat. #R1060-1-100) was added to the cells, and the plates were frozen at -20°C before RNA isolation.

RNA was extracted using the Zymo Quick RNA 96-kit (Zymo Research, cat. R1052) including DNaseI treatment, followed by cDNA synthesis using the SuperScript™ IV VILO™ Master Mix (Invitrogen, cat. 11756050) according to manufacturers' instructions. qPCRs were conducted on a QuantStudio 3 cycler using the Taqman Fast Advance master mix (Life Technologies Corporation, cat. 4444965) and the following assays: *RPS11* (ThermoFisher 4331182; Hs01574200_gH), *IFI6* (ThermoFisher 4331182; Hs00242571_m1), *OAS1* (ThermoFisher 4331182; Hs00973635_m1). *IFI6* and *OAS1* were normalized to *RPS11* mRNA levels using the deltaCt method [179].

PLSCR1 subcellular localization

IF staining

A549-ACE2 cells were plated onto #1.5, 12mm glass coverslips (Fisher Scientific, cat.

#1254581) placed at the bottom of the wells of a 24-well plate. When confluent, the cells were

fixed, permeabilized with 1% Triton X-100 for 5 minutes and blocked for 1 hour at room

temperature with 1 mL of PBS-BGT (1x PBS with 0.5% bovine serum albumin, 0.1% glycine, 0.05%

Tween 20). Afterward, the cells were incubated in a 1:500 dilution of 4D2 mouse anti-PLSCR1

antibody (Millipore Sigma, cat. #MABS483) in PBS-BG (1x PBS with 0.5% bovine serum albumin

and 0.1% glycine) overnight at 4C with rocking. The cells were then washed twice with PBS-BGT

before incubation with a secondary antibody solution of 1:1000 anti-mouse 588 (ThermoFisher,

cat. #A-11001) and 1:1000 Hoechst dye (ThermoFisher, cat. #62249) in PBS-BG for two hours at

room temperature, followed by three washes with PBS-BGT.

Imaging

The coverslips were mounted onto slides (Fisher Scientific, cat. #1255015) with Invitrogen

ProLong Gold Antifade Mountant (Fisher Scientific, cat. # P36930). The slides were allowed to

cure for 24 hours before the edges of the coverslips were sealed, and the cells were imaged by

confocal microscopy. Confocal images were acquired using Zeiss Zen Blue (v3.5) software on a

LSM 980 point scanning confocal microscope (Zeiss) hooked to a Axio Observer.Z1 / 7 stand

equipped with C Plan-Apochromat 63X/1.40 oil (RI:1.518 at 23°C) objective lens (Zeiss). CW

excitation laser lines 405 nm and 488 nm were used to excite the fluorescence of DAPI and AF488

labeled samples. Emitted fluorescence were spectrally grated (410-483 nm for DAPI, 499-552 nm

for AF488) to avoid fluorescence bleed through and were detected in MA-PMT (DAPI), and GaAsP-

PMT (AF488). The confocal pinhole was set to 1AU for AF488, and the detector master gains were

set within the linear range of detection (550-750V). Scanned images were saved as .czi files.

Focus-forming assay on SARS-CoV-2-infected cells

In **Fig 6B**, Huh-7.5 and A549-ACE2 cells were cultured in media (DMEM with 5% FBS) and

seeded at densities of 2×10^5 and 1×10^5 cells per well, respectively, in collagen-coated 12-well

plates to reach 80-90% confluency by the day of infection. A 1:10 serial dilution of virus stock was

made in Opti-MEM in five separate tubes. Media was aspirated from the cells, and the wells were
washed with 1 ml of PBS before adding 200 µL of each virus dilution to the cells in triplicate. Plates
were incubated at 37°C with 5% CO2 for 1 hour, rocking every 15 minutes for even virus
distribution. A 1% methylcellulose overlay medium was prepared and mixed with complete
growth media at 37°C; 2 ml of this overlay was added to each well after removing the virus
inoculum. Plates were then incubated at 37°C with 5% CO2 for 48 for Huh-7.5 cells or 72 hours
for A549-ACE2 cells. Cells were then fixed in final 10% neutral buffered formalin and IF stained as
described in the Unbiased Arrayed CRISPR screen section. PLSCR1 KO and WT cells were
compared at similar virus dilutions.

In **Fig 7G**, the above protocol was followed to titer SARS-CoV-2 strains on Huh-7.5 PLSCR1
KO cells. Then, Huh-7.5 WT and KO cells were seeded at 2×10^5 cells per well in 1 mL of media
(DMEM, 10% FBS, 1X NEAA) in 12-well plates to reach 80-90% confluency the next day. Media
was aspirated from the cells, the wells were washed with 1mL of PBS, and then the cells were
infected with 50 FFU of SARS-CoV-2 (for each strain) diluted in 200 µL of Opti-MEM. Plates were
then incubated, overlayed with methylcellulose, fixed, and stained as described above.

Transfection with SARS-CoV-2 replicon system

The SARS-CoV-2 replicon and the method for electroporation has been described
previously [114]. Briefly, 6×10^6 Huh-7.5 WT and PLSCR1 KO cells were electroporated at 710 V
with 2 µg of SARS-CoV-2 N mRNA and 5 µg of replicon RNA. The cells rested for 10 minutes at
room temperature before resuspending to a concentration of 300,000 cells/mL and plating 100
µL of cells into each well of a 96-well plate. After 24 hours, supernatant was collected from the
replicon-transfected cells and assayed for *Renilla* luciferase activity according to kit instructions
(Promega, cat. E2810).

Infection with SARS-CoV-2 spike/VSV-G-pseudotyped, single-cycle, replication-defective HIV-1 viruses.

Virus preparation

SARS-CoV-2 spike/VSV-G-pseudotyped, single-cycle, replication-defective HIV-1 viruses (pCCNanoLuc/GFP) were prepared as in [115]. Plasmids were a kind gift of Theodora Hatziioannou and Paul D. Bieniasz (The Rockefeller University, NY, USA) [115]. One day before the transfection, 4×10^6 293T cells were seeded in a 10 cm dish. One hour prior to transfection, the growth media in the dish was replaced with 9 mL of fresh media containing 2% serum. A 1,000 µL transfection mixture was prepared, comprising the diluent (a 150 mM NaCl solution prepared with sterile cell culture water), 5 µg of HIV GP plasmid, 5 µg of pCLG plasmid, and either 2.5 µg of SARS-CoV-2 spike Δ19 or 1 µg of pHCMV.G plasmid, ensuring the total plasmid content did not exceed 12.5 µg. After brief vortexing, 50 µL of PEI (1 mg/mL, Polysciences cat. 23966) was added to achieve a 1:4 DNA/PEI ratio. The mixture was vortexed for 5 seconds and then allowed to sit for 20 minutes in a hooded environment. Following gentle mixing by pipetting, 1 mL of the transfection mixture was added to the 10 cm dish. Media was changed 12 hours post-transfection, and the supernatant was harvested and filtered through a 0.2-micron filter 48 hours post-transfection, then stored at -80°C.

Infection of PLSCR1 KO or WT cells

Seeded in 96-well plates, 6,000 A549+ACE2 cells per well were cultured in 100 µL of media. After two days, either 10 µL of SARS-CoV-2 spike pseudotyped virus or 0.01 µL of VSV-G pseudotyped virus were diluted in a final volume of 100 µL of media and added to the wells to yield comparable NanoLuc signals. Plates were then spun at 200 g for 5 minutes and incubated at 37°C. Two days post-infection, the media was aspirated and replaced with 50 µL of NanoGlo solution, sourced from the Promega Nano-Glo Luciferase Assay kit (Promega, N1110), with a substrate to buffer ratio of 1:100. NanoLuc signal was subsequently quantified using a Fluostar Omega plate reader.

Infection of siRNA-treated cells

Seeded in 96-well plates, 1,600 HEK293T, HEK293T-ACE2, or HEK293T-ACE2-TMPRSS2 cells were cultured in 80 µL of media. The next day, a 20 µL transfection mixture made of Opti-MEM,

1% DharmaFECT1 (Horizon, T-2001-03), and 250 nM siRNA, PLSCR1 ON-TARGETplus SMARTpool
siRNA (Horizon, cat. L-003729-00-0005) or non-targeting control (Horizon, cat. D-001810-10-05)
was added to the cells. The final concentration of siRNAs was 25 nM. After two days, either 2 µL
of SARS-CoV-2 spike pseudotyped virus or 0.2 µL of VSV-G pseudotyped virus were diluted in a
final volume of 100 µL of media and added to the wells to yield comparable NanoLuc signals.
Plates were then span at 200 g for 5 minutes and incubated at 37°C. Two days after infection,
NanoLuc signal was quantified as described in the "Infection of PLSCR1 KO or WT cells" section.
908

Infection of siRNA-treated cells with SARS-CoV-2

Seeded in 96-well plates, 1,000 A549, A549-ACE2, or A549-ACE2-TMPRSS2 cells were
cultured in 80 µL of media. On the same day, a 20 µL transfection mixture made of Opti-MEM, 1%
DharmaFECT1 (Horizon, T-2001-03), and 250 nM siRNA, PLSCR1 ON-TARGETplus SMARTpool
siRNA (Horizon, cat. L-003729-00-0005) or non-targeting control (Horizon, cat. D-001810-10-05)
was added to the cells. The final concentration of siRNAs was 25 nM. Three days after
transfection, the cells were infected by adding 34,000 PFU of SARS-CoV-2 (titer determined on
Vero E6 cells) diluted in 10 µL media to each well. Plates were then spun at 200 g for 5 minutes
and incubated at 37°C. Staining and readout as described above in the "Unbiased arrayed CRISPR
KO screening" section.
919

Pan-virus infection of PLSCR1 KO cells

A549-ACE2 cells were seeded at a density of 6,000 cells/well in 96-well plates in 90 µL
media. The following day, 10 µL diluted virus was added to each well. Virus concentrations as
follow: CHIKV-mKate, 0.05 µL virus stock per well (titer 8.5 x 10^6 PFU/mL determined in Huh-7.5
cells); hCoV-NL63, 10 µL virus stock per well (titer 1.4 x 10^5 PFU/mL); hCoV-OC43, 10 µL virus stock
per well (titer 1.06 x 10^7 PFU/mL); hPIV-GFP, 0.05 µL virus stock per well; HSV1-GFP, 0.5 µL virus
stock per well (titer 2.4 x 10^8 PFU/mL determined on Vero E6 cells); IAV WSN, 0.5 µL virus stock
per well; SARS-CoV-2, 0.5 µL virus stock per well (titer 3.4 x 10^6 PFU/mL determined on Vero E6
cells); SINV-Toto1101-mScarletI, 10 µL virus stock per well; VEEV-EGFP, 0.005 µL virus stock per
well (titer 1.45 x 10^9 PFU/mL determined on BHK-21); VSV-GFP, 0.05 µL virus stock per well;

YFV_17D, 5 μL virus stock per well. The cells were fixed, stained and imaged as described in the *Unbiased arrayed CRISPR KO screen* section. Fluorescent viruses were not stained: the fluorescent signal was used as a reporter. We used the following primary antibodies when applicable: anti-dsRNA (J2) mouse (Nordic MUbio, cat. 10010200) diluted 1:500 was used for hCoV-NL63 and hCoV-OC43, anti-IAV mouse (Millipore, cat. MAB8257) diluted 1:3000, anti-YFV mouse (Santa Cruz Biotechnology, cat# sc-58083) diluted 1:500, anti-SARS2-S rabbit (Genetex, cat. GTX135357) diluted 1:3000.

Huh-7.5 cells were transfected with a 1:200 dilution of Dharmafect 4 (Horizon, cat. T-2004-01) and 25 nM ON-TARGETplus SMARTpool siRNAs (Horizon Discovery) in 96-well plates. The cells were infected three days after siRNA transfection with hCoV-NL63 or hCoV-OC43 or four days after siRNA transfection with SARS-CoV-2 or hCoV-229E. IF and imaging as described above.

Reconstitution of WT and mutant PLSCR1

Plasmid cloning

N-terminal 3x FLAG-tagged PLSCR1, C-terminal 3x FLAG-tagged PLSCR1, and PLSCR1 H262Y were generated by designing and ordering large dsDNA gene blocks of PLSCR1 that contained the desired mutations from IDT. These gene blocks were cloned into the PLSCR1-SCRPSY vector [180] and confirmed by sequencing (see Supplementary Table 12 for sequences).

Lentivirus production

Lentivirus were generated in Lenti-X 293T cells by transfecting 200 ng VSV-G plasmid, 700 ng Gag-Pol plasmid, and 1100 ng plasmid of interest with lipofectamine 2000 in DMEM supplemented with 5% FBS. Media was changed 4-6 hours later, and lentivirus harvested at 24 and 48 hours. Lentivirus from both timepoints was pooled, then filtered through a 0.45 μM filter before aliquoting into 2 mL tubes and freezing at -80°C until use.

Cell transduction

0.3 million cells were transduced in suspension in a 12-well plate. Cells received 8 μg/mL polybrene and 80 mM Hepes in addition to the lentivirus. Cells were then spinoculated at 37°C for 1 hour at 1000 x g. The following day, cells were split into two, 6-well plates, then 24 hours later one of the duplicates was treated with 2 μg/mL puromycin (when using SCRPSY-based

959   lentiviruses) to select for transduced cells. Further experiments were carried out using the cells

960   that had approximately 30% transduction before selection.

961   SARS-CoV-2 infection

962   In **Fig 8B**, Huh-7.5 and A549+ACE2 cells were plated at 6,000 cells/well and 3,000

cells/well, respectively, in 100 µL of media (DMEM, 10% FBS, 1X NEAA) in 96-well plates. The

following day, cells were treated with IFN (10pM for Huh-7.5 cells and 20pM for A549+ACE2 cells).

On the third day, the Huh-7.5 cells were infected with 0.1 µL of virus per well and the A549+ACE2

cells with 1 µL of virus per well, then spun at 200 g for 5 minutes and incubated at 37°C. Plates

were harvested the next day by fixing and staining as described above. For Figure 7A-E, Huh-7.5

cells were plated at 7,500 cells/well in 100µL of media (DMEM, 10% FBS, 1X NEAA) in 96-well

plates. The next day, cells were infected with quantities of virus that yielded comparable percent

infections in the WT cells, then spun at 200 g for 5 minutes and incubated at 33°C. The quantities

of virus used were as follows: 0.1 µL/well for parental, 0.05 µL/well for beta, 1 µL/well for delta,

0.5 µL/well for omicron, and 0.05 µL/well for kraken. The infected cells were fixed after 24 hours

and stained as described previously.

974   IF staining and imaging

975   In **Fig 8B**, cells were stained for IF as described in the *Unbiased arrayed CRISPR KO*

screening section, with different primary and secondary antibody solutions. The primary antibody

solution was a 1:3000 dilution of rabbit anti-SARS-CoV-2 nucleocapsid polyclonal antibody

(Genetex, cat. #GTX135357) in PBS-BGT, and the secondary antibody solution was 1:1000 goat

anti-rabbit 594 (ThermoFisher, cat. #A-11012) or 1:1000 goat anti-rabbit 647 (ThermoFisher, cat.

#A-21245), and 1:1000 Hoechst dye (ThermoFisher, cat. #62249) in PBS-BGT.

SARS-CoV-2 infection of human SV40-fibroblasts-ACE2

983   Generation of human SV40-fibroblasts ACE2 stable cell lines

984   *ACE2* cDNA was inserted with In-Fusion cloning kit (Takara Bio) and using the XhoI and

BamHI restriction sites into linearized pTRIP-SFFV-CD271-P2A in accordance with the

manufacturers' instructions. We checked the entire sequence of the *ACE2* cDNA in the plasmid

by Sanger sequencing. Then, HEK293T cells were dispensed into a six-well plate at a density of

8×10^5 cells per well. On the next day, cells were transfected with pCMV-VSV-G (0.2 μg), pHXB2-

env (0.2 μg; NIH-AIDS Reagent Program; 1069), psPAX2 (1 μg; Addgene plasmid no. 12260) and

pTRIP-SFFV-CD271-P2A-ACE2 (1.6 μg) in Opti-MEM (Gibco; 300 μL) containing X-tremeGene-9

(Sigma Aldrich; 10 μL) according to the manufacturers' protocol. After transfection for 6 h, the

medium was replaced with 3 mL fresh culture medium, and the cells were incubated for a further

24 h for the production of lentiviral particles. The viral supernatant was collected and passed

through a syringe filter with 0.2 μm pores (Pall) to remove debris. Protamine sulfate (Sigma;

10 μg/mL) was added to the supernatant, which was then used immediately or stored at −80 °C

until use.

For the transduction of SV40-fibroblasts with ACE2, 5×10^5 cells per well were seeded in

six-well plates. Viral supernatant was added (500 μL per well). The cells were then further

incubated for 48 h at 37 °C. Cells were keep in culture and after 8 days, transduction efficiency

was evaluated by CD271 surface staining with CD271 AlexaFluor 647, 1:200 dilution (BD

Pharmigen 560326). MACS-sorting was performed with CD271 positive selection beads (Miltenyi

Biotec) if the proportion of CD271-positive cells was below 80% [7, 163].

Infection

5,000 cells per well were seeded in a 96-well plate and infected the next day with SARS-

CoV-2 at MOI = 0.05, using a titer determined on Vero E6 cells. Cells were fixed at 2 dpi, stained

and imaged as described in the *Unbiased arrayed CRISPR KO screen* section.

1007

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Data and code availability

To be determined.

1039

1040 ## Tables

1041 Table 1. PLSCR1 variants associated with severe COVID-19 in a GWAS [23, 24]

1042

GWAS p-value	rsID	Genomic Coordinate (GRCh38)	Nucleotide Change	Gene	Functional Consequence
7.52E-07	rs116553931	chr3:146430956	C:T	PLSCR2	intron variant
1.08E-07	rs454645	chr3:146514682	C:T	PLSCR1	Downstream transcript variant
5.43E-08	rs343320	chr3:146517122	G:A	PLSCR1	His262Tyr
8.21E-08	rs343318	chr3:146518204	T:C	PLSCR1	intron variant
1.52E-07	rs343317	chr3:146518374	A:G	PLSCR1	intron variant
1.00E-07	rs186910	chr3:146520241	A:G	PLSCR1	intron variant
1.13E-07	rs173150	chr3:146520256	A:T	PLSCR1	intron variant
1.35E-07	rs71302408	chr3:146520389	T:C	PLSCR1	intron variant
7.06E-08	rs343316	chr3:146521151	A:G	PLSCR1	intron variant
4.64E-08	rs343314	chr3:146522652	C:T	PLSCR1	intron variant
7.46E-08	rs343312	chr3:146522970	G:A	PLSCR1	intron variant

1043

Figure Legends

Figure 1. Known ISGs restricting SARS-CoV-2 entry.

A schematic of SARS-CoV-2 entry and the sites where known ISG entry restriction factors function is shown. CD74 suppresses endolysosomal cathepsins, enzymes that process certain viral glycoproteins to make them fusion-competent [181, 182]. CH25H facilitates the sequestration of accessible cholesterol, which results in decreased virus-cell membrane fusion and viral entry [13, 59]. NCOA7 accelerates the acidification of the lysosome, leading to the degradation of viral antigens [116, 183]. LY6E and PLSCR1 restrict virus-cell membrane fusion at the endosome through unknown mechanisms, see [18, 157] and this study.

Figure 2. Unbiased arrayed CRISPR KO screens reveal IFN-dependent and independent genes influencing SARS-CoV-2 infection.

A. mRNA-seq comparison between Huh-7.5 and Calu-3 cells, focusing on a subset of 224 ISGs, in response to 24 h SARS-CoV-2 infection MOI 0.03. Red diamond, PLSCR1 RNA level. Viral RNA levels were comparable in both cell lines (not shown). ****, p<0.0001; two-tailed t-test.

B. Cells were treated with 0.5 nM IFN-α2a for 24 h. mRNA-seq analysis as in **(A)**.

C. Huh-7.5-Cas9 cells were pretreated with different amounts of IFN-α2a, then infected with SARS-CoV-2 for 24 h followed by IF staining for SARS-CoV-2 N protein; n = 6; error bars represent SEM. ****, p<0.0001; two-tailed t-test.

D. Diagram of the arrayed CRISPR KO screen method.

E. The virus level (percentage infected cells was determined by IF staining, then normalized and z-score was calculated) is plotted for 24 h 0 pM (y axis) or 1 pM (x axis) IFN-α2a pretreatment followed by 24 h infection (n ≥ 5). The genes were categorized as ISG or other based on mRNA-seq of IFN-α2a-treated cells as in **(B)**. ISGs were defined by a fold change ≥ 2 and padj ≤ 0.05 in the IFN-treatment versus untreated pairwise comparison.

F. Gene set enrichment analysis conducted on the arrayed CRISPR KO screens data represented in **(E)**. Description of the top pathways ranked by p-value for each quadrant. Databases: [1]Reactome; [2]WikiPathways; [3]Pathway Interaction Database; [4]KEGG; [5]Biocarta.

Figure 3. Human genes significant in human genetics studies on COVID-19 patients and in functional genetic screens in cell culture

Figure 4. PLSCR1 is a highly effective anti-SARS-CoV-2 effector ISG contributing to intrinsic immunity in the absence of IFN.

A. Cells were pretreated with a JAK-STAT inhibitor (InSolution 1 μM) for 2 h, followed by IFN-α2a (10 pM Huh-7.5 or 20 μM A549-ACE2) for 24 h and were infected with SARS-CoV-2 for 24 h followed by IF staining for viral N protein. Huh-7.5 infection using an MOI of 0.5 (titer

determined by focus forming assay on Huh-7.5 WT cells). A549-ACE2 infection using an

MOI of 0.01 (titer determined by focus forming assay on A549-ACE2 WT cells). The

percentage of SARS-CoV-2 positive cells is plotted.

B.   Cells were reconstituted with the indicated proteins by stable transduction with

lentiviruses, then infected as in **(A)**.

C.   Cells were co-cultured as indicated (50:50 mix), then infected as in **(A)** and the % infection

of each cell type was determined. n = 6; error bars represent sd. ****, p<0.0001; two-

tailed t-test.

1090

Figure 5. PLSCR1 is not important for IFN signaling.

A.   Huh-7.5 WT and PLSCR1 KO cells were infected with 17,000 FFU of CHIKV 181/25 mKate2

for 12 or 24 hours, then fixed, IF stained for nuclei, and the percentage of positive cells

determined by imaging for mKate2 reporter signal. n = 12 independent infections

(separate wells). Error bars represent sd. ns, non-significant; two-way ANOVA.

B.   Huh-7.5 cells, PLSCR1 KO as indicated, were pretreated with different amounts of IFN-

α2a, then infected with 17,000 FFU of CHIKV-mKate for 12 h; n = 7; error bars represent

sd.

C-J. Cells were treated for 24 h by IFN, as indicated, followed by RT-qPCRs on ISGs.

1100

Figure 6. PLSCR1 restricts spike-mediated SARS-CoV-2 entry.

A.   A549-ACE2 cells were IF stained using an anti-PLSCR1 antibody (white) and Hoechst

33342 nuclear staining (blue) and imaged at 63X magnification on a confocal microscope.

B.   Focus forming assays: SARS-CoV-2 N IF (red) and Hoechst 33342 nuclear staining (blue)

on similarly infected WT or PLSCR1 KO Huh-7.5 and A549-ACE2 cells after 2 and 3 d,

respectively.

C.   Quantification of **(B)**.

D.   Huh-7.5 WT and PLSCR1 KO cells electroporated with SARS-CoV-2 replicon which

produces a secreted luciferase. Luciferase activity assayed 24 hours after electroporation.

n = 36 (separate wells from single electroporation). Error bars represent sd. Ns = non-
significant; two-tailed t-test.

E-F. Transduction of A549-ACE2 cells with an HIV-based replicon expressing the
nanoluciferase pseudotyped with VSV-G or SARS-CoV-2 spike, respectively. n = 5
independent infection (separate wells). Nanoluciferase signal measured 2 dpi. Error bars
represent sd. ns, non-significant, **, p<0.01; two-tailed t-test.

G-I. A549 cells WT, expressing ACE2, or expressing ACE2-TMPRSS2 as indicated were
transfected with PLSCR1 or non-template control (NTC) siRNAs as indicated for 3 d and
infected with SARS-CoV-2 for 1 d. SARS-CoV-2 N was stained by IF and the percentage of
positive cells was determined by imaging. n = 6 independent infection (separate wells).
Error bars represent sd. ns, non-significant, **, p<0.01, ***, p<0.001; two-tailed t-test.

J-M. HEK293T cells expressing ACE2 or ACE2-TMPRSS2, as indicated, were transfected with
siRNA knockdown of PLSCR1 or non-template control (NTC), as indicated, for 3 d and
transduced with an HIV-based replicon expressing the nanoluciferase pseudotyped with
VSV-G or SARS-CoV-2 spike, as indicated for 2 d. n = 3 independent infection (separate
wells). Error bars represent sd. ns, non-significant, **, p<0.01; two-tailed t-test.

1126

Figure 7. Newer variants of SARS-CoV-2 are less restricted by PLSCR1

A-E. Infection of Huh-7.5 cells with SARS-CoV-2 (parental) or its descendant variants, Beta,
Delta, Omicron, and Kraken for 24 hours. SARS-CoV-2 N was stained by IF and the
percentage of positive cells determined by imaging. n = 10 independent infection
(separate wells). Error bars represent sd. ****, p < 0.0001; two-tailed t-test.

F.   Ratio of WT/KO percent infection from A-E. Error bars represent sd. ns, non-significant.
***, p<0.001, ****, p<0.0001; one-way ANOVA.

G.   Huh-7.5 WT and PLSCR1 KO cells were infected with 50 FFU of virus as titered on PLSCR1
KO cells in a focus-forming assay. Plaques were counted, and then a ratio of WT-to-KO
plotted for each SARS-CoV-2 variant. n = 6 independent infection (separate wells). Error
bars represent sd. **, p<0.01; one-way ANOVA.

1138

Figure 8. PLSCR1 His262Tyr, which associates with severe COVID-19, leads to higher SARS-
CoV-2 infection in cell culture.

A. Protein diagram of PLSCR1. Domain coordinates from UniProt.

B. Huh-7.5 cells, WT and PLSCR1 KO, stably expressing N-terminal FLAG-tagged Firefly
Luciferase (Fluc), N-terminal FLAG-tagged PLSCR1, or N-terminal FLAG-tagged PLSCR1
H262Y mutant and infected with SARS-CoV-2 for 24 hours. SARS-CoV-2 N was stained by
IF and the percentage of positive cells determined by imaging. n = 15 independent
infection (separate wells). Error bars represent sd. ****, $p<0.0001$; two-tailed t-test.

C. SV40-Fibroblast-ACE2 cells, genotype as indicated, infected for two days with SARS-CoV-
2. N = eight independent infection in separate wells. ns, non-significant, **, $p<0.01$, ***,
$p<0.001$; two-tailed t-test.

Supplementary Figure Legends

1150

Supplementary Figure 1.

1151

1152   A. Nuclei count (z-score) in arrayed genetic screen. Examples of VCP (essential gene) and
1153   PLSCR1 (SARS-CoV-2 antiviral hit) are plotted.

1154   B. Volcano plot of Huh-7.5 cells mRNA-seq treated with 0.5 nM IFN-α2a for 24 h as in **Fig 2B**.

1155

Supplementary Figure 2

1156

1157   A. Occurrence of human genes interacting with SARS-CoV-2 drawn from a selection of 67
1158   large-scale studies. The occurrence reflects the number of independent studies finding
1159   each gene as significant.

1160   B. Upset plot on data as in **(A)**, showing the overlap in significant genes in large-scale SARS-
1161   CoV-2 studies by category.

1162

Supplementary Figure 3.

1163

A. Western blot on PLSCR1 KO cells against PLSCR1 (green) and ß-actin (red).

B. Cells as indicated were seeded at similar density, treated or not with Blasticidin (used here

as a control to decrease cell viability), and cultured for 4 days before resazurin cell viability

assay. n = 4 independent wells.

C. Western blot on PLSCR1 WT and KO A549-ACE2 cells against PLSCR1 (green) and ß-actin

(red).

1170

Supplementary Figure 4.

A. Western blot against PLSCR1 and RPS11. Cas-9-expressing Huh-7.5 cells were transfected

with 4-gRNA pools targeting PLSCR1 or non-template control (as indicated) and cells were

in culture for 7 d.

B. Quantification of bands intensity in **(A)**.

C. mRNA-seq on cells as in **(B)**.

1177

Supplementary Figure 5.

A-I. Infection of A549-ACE2 cells with viruses as indicated. IF staining was used for IAV WSN,

hCoV-OC43 and SARS-CoV-2, otherwise a fluorescent reporter was used. Percentage of

virus positive cells was determined by imaging. N = six replicates (independent

infections in separate wells), error bars represent SD.

J-M. Infection of Huh-7.5 cells with viruses as indicated. siRNA knockdown of PLSCR1 vs non-

template control (NTC). ****, $p < 0.0001$; ns, non-significant; two-tailed t-test.

1185

1186 **Supplementary Figure 6.**

1187 Western Blot against PLSCR1 and β-actin (loading control). Huh-7.5 PLSCR1 KO cells were stably

1188 transduced with FLAG-tagged Fluc, FLAG-tagged PLSCR1, or FLAG-tagged PLSCR1 H262Y.

1189

1190 **Supplementary Figure 7.**

1191 Comparison between selected SARS-CoV-2 protein interactome studies [96-98, 100-105, 148].

1192

Supplementary Figure 8.

Comparison between the relative mRNA levels of 97 hallmark IFN-α-stimulated genes and the

remaining transcriptome in cell lines as indicated. Red diamond, *PLSCR1* RNA level. For Huh-7.5

cells mRNA-seq, cells treated with 0.5 nM IFN-α2a for 24 h as in **Fig 2B**. For primary human

hepatocytes, cells were treated with 0.1 nM IFN-α2a for 24 h (full data and methods to be

released elsewhere). For the human tissues, data from [35].

1199

Supplementary Material

1201 Supplementary Table 1.

1202 mRNA-seq on SARS-CoV-2 infected cells, Normalized reads, related to **Fig 2A**.

1203

1204 Supplementary Table 2.

1205 mRNA-seq on SARS-CoV-2 infected cells, Differential Gene Expression.

1206

1207 Supplementary Table 3.

1208 mRNA-seq on IFN treated cells, Normalized reads, related to **Fig 2B**, and **Supp Fig 8.**

1209

1210 Supplementary Table 4.

1211 mRNA-seq on IFN treated cells, Differential Gene Expression, related to **Fig 2E** and **Supp Fig 1B**.

1212

1213 Supplementary Table 5.

1214 Arrayed CRISPR KO screen, raw data.

1215

1216 Supplementary Table 6.

1217 Arrayed CRISPR KO screen, analyzed data. Related to **Fig. 2E** and **Supp Fig 1A**.

1218

1219   Supplementary Table 7.

1220   Arrayed CRISPR KO screen, summary table.

1221

1222   Supplementary Table 8.

1223   GSEA on arrayed CRISPR KO screen. Related to **Fig. 2F**.

1224

1225   Supplementary Table 9.

1226   Consolidated list of human genes classified as hits in selected SARS-CoV-2 studies, full table.

1227   Related to **Fig 3** and **Supp Fig 2.**

1228

1229   Supplementary Table 10.

1230   Consolidated list of human genes classified as hits in selected SARS-CoV-2 studies, summary table.

1231   Related to **Fig 3** and **Supp Fig 2.**

1232

1233   Supplementary Table 11.

1234   Plasmids used in this study.

1235

1236   Supplementary Table 12.

1237   Gene fragments used in this study.

1238

1239   Supplementary Table 13.

1240   Primers used in this study.

1241

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1935

Figure 1

Figure 2

Figure 3

SARS-CoV-2 functional genetic screens (26 publications)

2,603 genes

COVID-19 human genetics studies (24 publications)

113 genes

28 genes

PROVIRAL

Virus entry
ACE2* TMPRSS2

Cell adhesion and immune signaling
ICAM3 PCDH7

Intracellular trafficking and signaling
RAB2A

Guanyl-nucleotide exchange
ARHGEF38

IFN signaling
IRF1

Ion channels and membrane potential
KCNC3

Transcriptional regulation
FOXP4 ZBTB32

Cell metabolism and redox homeostasis
CAT* FDX2*

ANTIVIRAL

Protective mucous barrier
MUC1*

Cell adhesion and immune signaling
ICAM1*

TLR7 signaling
TLR7
MYD88 UNC93B1

IFN signaling
IFNAR1* IFNAR2*
JAK1*
STAT2*

IFN-stimulated genes
OAS1 OAS2 OAS3 PLSCR1*

Transcriptional regulation
KAT7* ZBTB11*

RNA splicing
CLK2

* Hit in arrayed CRISPR KO screen.

Figure 4

Figure 5

Figure 6

Figure 7

Figure 8

A

100 aa

CCCPCC

GKISKH*WTGI

■ SH3-binding Domain	■ PPXY Motif ┊ PO$_4$ site ● Transcriptional Activation Domain	*H262Y variant
■ Palmitoylation Motif	■ NLS ● Transmembrane Domain ● Extracellular Domain

B

A549-ACE2

● WT
● KO

SARS-CoV-2 positive cells [%]

60
40
20
0

FLAG-Fluc
FLAG-PLSCR1
FLAG-PLSCR1 H262Y
FLAG-Fluc
FLAG-PLSCR1
FLAG-PLSCR1 H262Y

****   ****

C

SARS-CoV-2 positive cells [%]

ns
****
*
***

PLSCR1 WT (Patient C24)
PLSCR1 WT (Patient C286)
PLSCR1 H262Y/WT (Patient JL0192)
PLSCR1 H262Y/WT (Patient JL0480)
IFNAR1 KO (Patient SV-19)

Supplementary figure 1

Supplementary figure 2

Supplementary figure 3

A

	A549-ACE2	Huh-7.5
	WT KO	WT KO

β-actin
PLSCR1

B

Blasticidin
● 0 µg/mL ● 1 µg/mL ● 10 µg/mL

Cell viability [%]

A549-ACE2   Huh-7.5

PLSCR1: WT   KO   WT   KO

C

WT + GFP
WT + Fluc
WT + FLAG-Fluc
WT + PLSCR1
WT + FLAG-PLSCR1
WT + PLSCR1-FLAG
KO + GFP
KO + Fluc
KO + FLAG-Fluc
KO + PLSCR1
KO + FLAG-PLSCR1
KO + PLSCR1-FLAG

β-actin
PLSCR1

Supplementary figure 4

Supplementary figure 5

Supplementary figure 6

Actin

PLSCR1

WT background   KO background

Supplementary figure 7

A

B

Supplementary figure 8