Double-stranded RNA responses, neoantigen presentation and suppression of
hepatocellular carcinoma through NMD inhibition via endonuclease SMG6

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SUMMARY

Nonsense-mediated mRNA decay (NMD) eliminates transcripts with premature termination

codons, often resulting from mutations or RNA processing errors. While both pro- and anti-

tumor NMD activities have been proposed, mechanistic and therapeutic insights into NMD

inhibition in cancer have been hindered by the lack of a suitable *in vivo* model. We address

this by combining a liver-specific, conditional *Smg6* mutation – disabling the endonuclease

that cleaves NMD-regulated transcripts – with a genetic hepatocellular carcinoma (HCC)

model. SMG6 inhibition elevates NMD-sensitive mRNA abundance and translation, promotes

MHC presentation of unique immunopeptides, and enhances T-cell infiltration. Additionally,

mutant SMG6 specifically activates type-I interferon signaling via double-stranded RNA

(dsRNA) accumulation and dsRNA-sensor MDA5, boosting innate immune responses. These

pathways converge to halt HCC at an inflammatory stage. Our findings establish SMG6 as a

key regulator of dsRNA homeostasis and immune activation, offering therapeutic potential and

advancing our understanding of NMD in immune regulation.

INTRODUCTION

Eukaryotic gene expression is tightly regulated at the RNA level, with nonsense-mediated mRNA decay (NMD) serving as a critical surveillance pathway. NMD targets and degrades mRNAs harboring premature termination codons (PTCs) [1,2], which can arise from mutations, transcriptional errors or splicing defects [1,2]. If translated, these aberrant mRNAs produce truncated, potentially dysfunctional and harmful proteins. Thus, the traditional view of NMD has been that of an mRNA quality control mechanism that prevents the accumulation of toxic proteins. As such, defining the "rules of NMD" to predict which PTCs elicit or evade degradation has been a major focus of past research [3]. However, NMD extends beyond mere surveillance. It also functions as a broader gene regulatory mechanism, modulating the stability and abundance of a range of physiological transcripts [4]. In both roles, NMD operates in concert with translation termination via a multiprotein machinery centered on the helicase UPF1, eliciting mRNA cleavage through the endonuclease SMG6 further downstream in the pathway, with complete transcript degradation following swiftly through cellular exonucleases.

Cancer cells, with their high mutational burden, frequently display abnormal transcriptomes. For instance, insertions and deletions in protein coding sequences (CDS) often produce frameshifted polypeptides with novel amino acid sequences that have the potential to form neoantigens, i.e., peptides capable of stimulating adaptive immune responses. However, PTCs introduced by these mutations may be targeted by NMD, silencing neoantigen expression and thereby preventing immune responses in cancer. Inhibiting NMD, therefore, represents a potential strategy to restore neoantigen presentation and enhance the efficacy of immunotherapies [3,5-7]. Indeed, experimental models have shown that downregulating NMD components can inhibit tumor proliferation in mice [8-12]. However, these studies – mostly based on inoculation or xenograft models using already fully transformed tumor cells – fail to capture the early stages of oncogenesis and the associated immune dynamics. Moreover, previous approaches that were based on full NMD factor knockouts/depletions could not resolve whether the observed phenotypic outcomes were attributable to the loss of NMD or possibly to confounding effects; notably, UPF and SMG proteins have been associated with NMD-independent functions related to genome stability and telomere maintenance [13]. Taken together, critical questions thus remain unanswered: How does NMD inhibition affect both early and late cancer development in a more physiologically relevant setting? Are neoantigens presented on NMD-deficient cells *in vivo*, even in the absence of cancer? And, importantly, does NMD loss affect other immune pathways, and if so, do they function in a pro- or anti-cancer manner?

Here, we address these questions by employing an NMD loss-of-function mouse model,
specifically targeting the endonuclease activity of SMG6 and avoiding full knockout, that we
combine with a fully immunocompetent genetic model for hepatocellular carcinoma (HCC) that
recapitulates cancer development from oncogenic initiation through tumor progression. Our
findings reveal how NMD inhibition triggers dual and specific immune responses from both the
adaptive and innate systems via distinct molecular mechanisms, effectively blocking HCC
development.

RESULTS

Liver immune cell infiltration in hepatocyte *Smg6^mut* animals
We recently developed a conditional NMD loss-of-function mouse model, specifically targeting
SMG6 endonucleolytic activity through Cre/loxP-mediated conversion of a wild-type protein-
expressing *Smg6^flox* allele to *Smg6^mut*, where catalytic residues of the PIN (PilT N-terminus)
nuclease domain are point-mutated (**Figure 1A**) [14]. This approach overcomes the challenges
of full NMD factor knockouts, which typically compromise general cellular fitness, including
through mechanisms that rely on functions of these proteins distinct from NMD [13,15]. Liver-
specific *Smg6^mut* mice (i.e., *Smg6^flox/flox*; *Alb^CreERT2* animals, treated with tamoxifen for Cre
activation in hepatocytes) show overall mild phenotypes [14], highlighting the model's suitability
for therapeutic exploration. Further analyses of our previous liver transcriptomics datasets [14]
revealed elevated expression of several leukocyte marker genes in *Smg6^mut* tissue,
suggesting immune cell infiltration when SMG6 endonucleolytic activity was disabled in
hepatocytes (**Figure S1A**). To validate this hypothesis, we carried out flow cytometric analysis
to count immune cells from livers collected at an early timepoint (3 weeks) after tamoxifen
treatment (**Figure 1B**). Indeed, total leukocyte counts were increased in *Smg6^mut* vs. matched
control *Smg6^wt* livers (**Figures 1C**, **S1B,** and **S1C**), with key adaptive and innate immune cell
types – such as activated T-cells, dendritic cells and monocytes (**Figure 1D**) – contributing to
the overall effect. Together with indications that several liver damage markers in serum were
above wild-type levels (**Figure S2A**) and that markers of inflammation (**Figure S2B**) and
apoptosis (**Figures S2C** and **S2D**) were significantly increased as well, we concluded that the
Smg6 mutation had the ability to induce an immune-altered liver and led to increased
hepatocyte turnover.

Noncanonical immunopeptide expression from NMD substrates
Key adaptive immune cell types, such as activated T-cells (**Figure 1D**), contributed to the
immune-altered state, possibly induced by neoantigens. Employing a multi-omics approach
that combined transcriptomics (RNA-seq), ribosome profiling (Ribo-seq), and
immunopeptidomics (**Fig. 1E**), we explored whether novel major histocompability complex

class-I (MHC-I) polypeptides could be specifically detected in *Smg6^mut* livers and if these peptides originated from the translation of transcripts regulated by NMD. Immunopeptidomics analyses revealed over 2,000 MHC-I binders (**Figure 1F**; **Table S1**), with most peptides shared between *Smg6^mut* and *Smg6^wt* livers (**Figure 1F**). As expected, these primarily mapped to canonical coding sequences (**Figure 1G**, left panel). In contrast, 18 peptides were identified exclusively in *Smg6^mut* samples (present in all replicates) and were absent in *Smg6^wt*, compared to only 4 peptides with the reverse pattern (**Figure 1F**) – a highly significant enrichment of novel peptides associated with NMD deficiency (P = 5.4e-05; Fisher's exact test). Notably, among the *Smg6^mut*-specific peptides, three were derived from noncanonical coding sequences annotated as exonic and one as intronic (**Figure 1G**, middle and right panels), all of which were abundant in the three *Smg6^mut* replicates and absent in controls (**Figure 1H**). Further validation in the Ribo-seq and RNA-seq data for one of the peptides, SAPDGIKTPM, indicated that it mapped to the *D17H6S56E-5* gene, a lncRNA-annotated locus with previously reported resemblance to a Mouse Leukemia Virus (MLV) envelope protein coding gene [16]. The RNA-seq data revealed increased abundance of the *D17H6S56E-5* transcript in *Smg6^mut* livers (**Figures 1I** and **1J**), which was striking for exon-mapping reads, yet less pronounced for reads mapping to an intron that the gene contains. Intron-mapping reads can be used as a proxy for transcription from the locus [17], and these findings hence indicate that *D17H6S56E-5* upregulation occurs mainly through posttranscriptional mechanisms (i.e., mRNA stabilization), in line with the mRNA being an NMD substrate. The Ribo-seq data further confirmed efficient translation of a 596 amino acid (aa) open reading frame (ORF) containing the immunopeptide towards its N-terminus (**Figure 1J**). For the VVITFSKM peptide (**Figure 1H**), we could similarly determine a relevant locus, *Gm6545*/*A330040F15Rik*, containing a pseudogene copy of *Fam111a* that is upregulated at the level of RNA abundance and ribosome footprint coverage on a 554 aa ORF (**Figure S2E**), whereas the two other peptides, VSTTNFTHA and AGPSNSEIHL, mapped to an out-of-frame translation product from the *Hfe2* locus and an intronic sequence of *Trf*, respectively (**Table S1**). We concluded that *Smg6* mutation led to the expression of non-canonical transcripts that became translated to proteins that were the source of novel MHC-I-loaded immunopeptides, in line with the observed infiltration by activated CD8+ T-cells.

SMG6-dependent, cell-autonomous type-I IFN response

We next investigated whether the recruitment of innate immune cells was triggered by a specific, *Smg6*-dependent mechanism as well. This hypothesis was supported by the *Smg6^mut*-dependent increase in expression of NF-κB-regulated inflammatory response genes (see **Figure S2B**) and RNA-seq data showing upregulation of a broad panel of transcripts [18] indicative of an activated type-I interferon (IFN) response (**Figure 2A**). Quantitative real-time

PCR (qPCR) analysis of key IFN-stimulated genes (ISGs), *Ifih1*, *Oas1a*, *Ifi44*, *Zbp1*, and *Ifit1*, confirmed robust *Smg6^{mut}*-dependent upregulation (**Figure 2B**), consistent with sustained type-I IFN pathway activation. In the context of the full liver tissue – consisting of *Smg6^{mut}* hepatocytes and other cell types including infiltrating leukocytes that were *Smg6^{wt}* – ISG induction could be dependent on hepatocyte-immune cell interactions, or it could represent a cell-autonomous consequence of mutant SMG6. To test this, we used an *ex vivo* model with *Smg6$^{flox/flox}$* primary fibroblasts retrovirally engineered to express a tamoxifen-activatable CreERT2 (**Figure 2C**) [14]. Tamoxifen treatment induced a >10-fold increase in abundance of an NMD-sensitive *Hnrnpl* splice variant, confirming NMD pathway inactivation (**Figure 2D**). Importantly, NMD inactivation led to a massive induction (up to several hundredfold) of ISGs, *Ifih1*, *Oas1a*, *Ifi44*, *Zbp1*, and *Ifit1* (**Figure 2E**), demonstrating that SMG6 mutation directly triggers a type-I IFN response in a cell-autonomous manner.

Requirement of dsRNA sensor MDA5 for SMG6-dependent IFN response

The type-I IFN response is a key antiviral defense mechanism, activated when cytoplasmic sensors detect atypical nucleic acids, including double-stranded RNA (dsRNA). Besides viral infections, endogenous dsRNA can also arise through non-viral mechanisms and enhance anti-tumor immunity and/or cancer cell apoptosis. For instance, anti-tumor strategies that inhibit splicing lead to the leakage of intron-containing mRNAs into the cytoplasm, where they form dsRNA structures likely due to repetitive element sequences within introns [19-21]. Activation of the dsRNA sensor MDA5, encoded by the *Ifih1* gene, triggers a type-I interferon (IFN) response similar to that in antiviral defense [21]. In our hepatocyte *Smg6* mutant model, transcripts containing retained introns accumulate as major mRNA species that fail to undergo NMD [14], prompting us to investigate whether the ISG induction observed in our model also involved the dsRNA-MDA5 pathway. To this end, we generated *Smg6$^{flox/flox}$* fibroblast lines with an inactivated *Ifih1* gene (**Figures 2F**, **S3A,** and **S3B**) and induced Cre-mediated recombination of *Smg6^{flox}* to *Smg6^{mut}* by delivering cell-permeable recombinant TAT-Cre protein (**Figure 2G**). NMD inhibition, measured via the diagnostic *Hnrnpl* splice form, remained intact in MDA5-deficient cells (**Figure 2H**). Importantly, however, the marked increase in ISG expression observed in the presence of MDA5, was significantly blunted in *Ifih1* knockouts, now remaining close to background (**Figure 2I**). Moreover, consistent with the hypothesis that *Smg6^{mut}* leads to cytoplasmic dsRNA accumulation, immunostaining with the dsRNA-specific J2 antibody [22] showed elevated signal in *Smg6^{mut}* fibroblasts compared to control (**Figures 2J** and **2K**). These findings suggest that the molecular pathway linking endonuclease-inactive SMG6 and the type-I IFN response relies on the dsRNA sensor MDA5. Notably, the specificity of these phenotypes for *Smg6^{mut}* and MDA5 also rules out potential non-specific effects

associated with Cre recombinase activity, which have been reported to act via DNA damage and the independent cGAS-STING sensing pathway [23].

SMG6-dependent amplification of early inflammation in a hepatocellular carcinoma model

To investigate how SMG6-dependent adaptive and innate immune activation influences early and late stages of tumor development, we combined our NMD allele with a hepatocellular carcinoma (HCC) model. This model (**Figure 3A**) employs conditional alleles of two tumor suppressors, *Pten* and *Tsc1*, encoding inhibitors of the mTOR pathway. Liver-specific knockout of these genes promotes lipogenesis, leading to non-alcoholic fatty liver disease (NAFLD) and non-alcoholic steatohepatitis (NASH), ultimately progressing to HCC [24], closely resembling human disease [25]. In animals carrying the cancer alleles (*Pten^flox/lfox*; *Tsc1^flox/flox*; *Alb^CreERT2* – termed "Liver double knockout" or "L-dKO") along with either *Smg6^flox/flox* or *Smg6^wt/wt*, we first examined early stages (3 weeks post-tamoxifen, **Figure 3B**). Western blot analysis confirmed significantly reduced TSC1 and PTEN protein levels in L-dKO livers, independent of *Smg6* allele (**Figure 3C** and **3D**). Macroscopically and histologically, both L-dKO *Smg6^wt* and *Smg6^mut* livers displayed NASH features, with focal microsteatosis, abnormal cytoskeleton (ballooning), increased inflammatory infiltrate and necrosis (**Figures 3E** and **S4A**). Notably, the presence of inflammatory infiltrate was more pronounced in L-dKO *Smg6^mut* livers, supported by staining for the neutrophil/monocyte marker Myeloperoxidase (MPO) (**Figure 3F**, left panels) and the T-cell marker CD8 (**Figures 3F**, right panels, **3G**). Hepatic leukocyte quantification via flow cytometry-based counting revealed elevated infiltration (**Figure 3H**), and among innate immune cells, both subsets of monocytes (Ly6c^high and Ly6c^low) and neutrophils were particularly increased in L-dKO *Smg6^mut* livers compared to L-dKO *Smg6^wt* livers (**Figures 3H** and **3I**) or compared to *Smg6^mut* livers without the L-dKO background (**Figures 1C** and **1D**). Additional observations supported this synergistic effect on immune responses in the presence of both L-dKO alleles and mutant SMG6. Notably, apoptotic markers indicated increased cell death (**Figures S4B-F**), pro-fibrotic gene expression suggested increased liver damage (**Figure S4G**), hepatomegaly was prominent (**Figure S5A**), and serum damage markers were elevated (**Figure S5B**). These findings reveal that NMD inhibition in L-dKO strongly amplified early inflammation, lymphocyte infiltration, and apoptosis during the NAFLD/NASH stage i.e., at a timepoint before tumor development in this HCC model.

HCC suppression through mutant SMG6

We next assessed the impact of *Smg6^mut* on the formation and progression of HCC at late-stage (**Figure 3B**). Weekly magnetic-resonance imaging (MRI) showed tumors in the livers of

L-dKO *Smg6^wt^* mice starting at week 12 (**Figure 4A**), with rapid progression that required sacrifice latest by week 17 due to advanced-stage HCC (**Figure 4B**). Crucially, L-dKO *Smg6^mut^* mice did not develop any tumors and none of the animals required sacrifice, indicating full suppression of the HCC phenotype. Macroscopic and histological analyses confirmed HCC in L-dKO *Smg6^wt^* (**Figure 4C**, top). Instead, from week 12 and until the experimental endpoint at week 21, L-dKO *Smg6^mut^* mice presented with prominent duct proliferation and moderate perisinusoidal and periportal fibrosis, altering the hepatic parenchyma structure and leading to a nodular architecture (**Figure 4C**, bottom). CD8+ T-cell levels remained elevated in late-stage L-dKO *Smg6^mut^* livers (**Figures 4D** and **4E**), suggesting continued augmented adaptive immune responses. By contrast, some other liver parameters showed tendencies to stabilization. In particular, liver damage markers in serum showed recovery as compared to early-stage livers (**Figure S5A**) and hepatomegaly between early- and late-stage L-dKO *Smg6^mut^* only showed mild further increase (non-significant; **Figure S5B**). Importantly, L-dKO *Smg6^mut^* livers still displayed expression of the recombined, mutant *Smg6* mRNA (**Figure S5C**) as well as the absence of PTEN and TSC1 proteins from hepatocytes (**Figures S5D** and **S5E**), with remaining protein localizing to non-hepatocyte cells such as Kupffer cells (**Figure S5F**). These findings controlled for potentially trivial explanations to the absence of HCC – such as lethality of the allele combination *Smg6^mut^*; *Pten^ko^*; *Tsc1^ko^* and regeneration of non-mutant tissue – and demonstrated that the suppression of tumor formation was the result of the specific interaction of mutant SMG6 with the tumor-prone, *Pten-* and *Tsc1*-deleted genetic state. In summary, we concluded that the inhibition of NMD via *Smg6* mutation prevents cancer formation in the genetic HCC model.

DISCUSSION

We demonstrate that targeting the endonuclease function of SMG6 to inhibit NMD shows therapeutic benefits as it prevents tumor formation in a fully immunocompetent HCC model, leading instead to NASH. Mechanistically, our data are consistent with a simple model in which both innate and adaptive immune responses are triggered as a direct consequence of stabilized SMG6 target transcripts, involving two distinct downstream mechanisms (**Figure 4F**). Consistent with the long-postulated neoantigen hypothesis, we provide evidence for NMD-specific, endogenous MHC-I peptides originating from non-canonical protein coding sequences that could be presented to CD8+ T-cells.

Importantly, we identify a new mechanism for the innate immune activation via the dsRNA sensor MDA5 that triggers an antiviral-like type-I IFN response – a step that in the logic of immune activation would precede and stimulate the subsequent adaptive response. This SMG6-dependent response may involve intron-retained transcripts that fold into dsRNAs due to the enrichment for repetitive elements in intronic sequences – analogous to the pathway

and mechanism associated with anticancer spliceosome inhibition [19,20]. Intriguingly, our
findings hence also suggest a novel biological function of the NMD pathway in the control of
immune responses, which would directly implicate the NMD-targeted RNAs, rather than the
proteins that are translated from these erroneous, PTC-containing transcripts. Under wild-type
conditions, we propose that NMD/SMG6 reduces cytoplasmic dsRNAs, thus setting the
threshold to prevent overactivation of the type-I IFN response – a likely crucial, yet so-far
underappreciated, immune regulatory role of NMD.
Our *in vivo* findings indicate that NMD serves as a protective barrier for cancer cells, limiting
neoantigen expression and immune activation. Therapeutic targeting of SMG6 – whose
mutation is well-tolerated in our model – emerges as a promising avenue for anticancer
treatment. Development of a pharmacological SMG6 endonuclease inhibitor could allow for
the precise modulation of immune activation against HCC, balancing effective immune
responses while minimizing the risk of fibrosis and autoimmune complications.

STAR★METHODS

Animals

All animal experiments were conducted in accordance with the cantonal guidelines of the Canton of Vaud, Switzerland, license VD3739. Healthy adult male mice of age 8 to 10 weeks were used. Animals with $Alb^{CreERT2}$; $Smg6^{wt}$ and $Alb^{CreERT2}$; $Smg6^{flox}$ alleles were maintained on a C57BL/6J background. Mice with $Alb^{CreERT2}$; $Pten^{flox}$; $Smg6^{wt}$; $Tsc1^{flox}$ and $Alb^{CreERT2}$; $Pten^{flox}$; $Smg6^{flox}$; $Tsc1^{flox}$ alleles were maintained on a hybrid background (C57BL/6J, 129SvJ, and BALB/2c). The alleles $Alb^{CreERT2}$, $Pten^{flox}$, $Smg6^{flox}$, and $Tsc1^{flox}$ have been previously described [14,26-28].

Induction of hepatocyte-specific *Pten* & *Tsc1* double knockout and *Smg6* mutation

8- to 10-week-old male L-dKO $Smg6^{wt}$ and $Smg6^{flox}$ mice, carrying the liver-specific *Albumin*-driven *CreERT2*, and their control littermates received four intraperitoneal injections of tamoxifen, dissolved in corn oil at a dosage of 75 mg/kg of body weight, in the consecutive days. The early-stage mice were euthanized 3 weeks after tamoxifen injections. In the late-stage experiment, L-dKO $Smg6^{wt}$ mice were euthanized based on the progression of HCC (latest at week 17). Animals in the other groups (Ctrl $Smg6^{wt}$, Ctrl $Smg6^{mut}$ and L-dKO $Smg6^{mut}$) were euthanized 21 weeks after tamoxifen injections.

Magnetic resonance imaging (MRI)

Mice were scanned weekly (starting from week 12), to monitor HCC evolution and progression, using a 3 Tesla small animal MRI scanner (Bruker BioSpin MRI, Ettlingen, Germany) with a 40-mm volume coil as a transmitter. Animals were anaesthetized using isoflurane (Attane) at 3-4% for 2 min. When fully sedated, animals were transferred into the MRI machine. The imaging procedure was performed under 1.5% isoflurane in oxygen. Data was acquired via Paravision 360 v2.0 software.

Histopathology and immunohistochemistry analyses

Livers were fixed in 4% buffered formalin for 24 h and embedded in paraffin. For histology 3-5 µm-thick sections were cut and stained with Hematoxylin and Eosin (H&E) and Masson's Trichrome (MTC). Immunohistochemistry was performed on an automated immunostainer (Ventana Medical Systems, Inc.) according to the company's protocols for open procedures with slight modifications. All slides were stained with the antibodies CD4 (SP35; Zytomed, Berlin, Germany), CD8 (C8/144B; Dako, Glostrup, Denmark), PTEN (Cell Signaling Technology, 9188), Cleaved-Caspase3 (Cell Signaling Technology, 9661), and MPO (anti-MPO Ab-1, Lab Vision UK, Ltd., Newmarket, Suffolk, Great Britain). Appropriate positive and negative controls were used to confirm the adequacy of the staining. The histologic samples

were analyzed by an experienced pathologist (L. Quintanilla-Martinez). All samples were scanned with the Ventana DP200 (Roche, Basel, Switzerland) and processed with the Image Viewer MFC Application. Final image preparation was performed with Adobe Photoshop 2024.

Intrahepatic leukocyte isolation and flow cytometry staining

Leukocytes in liver were isolated as described previously [29]. Mice were euthanized and subsequently perfused with 10 ml 1x PBS via the inferior vena cava. 1 g of liver tissue was excised from each mouse and placed into a tube containing 10 ml RPMI. The tissues were then crushed using 70 µm cell strainers and a plunger, ensuring all pieces were passed through the strainer. The resulting cell suspensions were centrifuged at 1600 x g for 5 min. The cell pellets were resuspended in a solution containing 2 mg collagenase, 25 µl DNase and 10 ml RPMI. The mixture was incubated at 37°C for 40 min, constantly stirring. After incubation, 25 ml RPMI was added to dilute the mixture. The samples were then centrifuged at 300 x g for 3 min to precipitate the connective tissue. The supernatants were transferred to new tubes and centrifuged at 1600 x g for 5 min. The cell pellets were then resuspended in a Percoll density gradient solution (36% Percoll [Cytiva], 4% 10x PBS, 60% RPMI) and centrifuged at 2000 x g for 20 min without brake. The pellets were resuspended with 2 ml of Ammonium-Chloride-Potassium (ACK) lysis buffer for 2 min to lyse remaining red blood cells. Following that, 8 ml RPMI was added to the tubes, and the samples were centrifuged at 1600 x g for 5 min. The purified leukocyte pellets were resuspended in 1 ml HBSS. The cells were blocked with anti-CD16/32, and then washed with flow cytometry buffer (1x PBS, 2% FCS, 2mM EDTA). Next, the cells were incubated with following primary antibodies for 25 min at 4°C in the dark: CD19-BV605 (BD biosciences, 563148), TCRb-PE (BD biosciences, 12-5961-81), CD4-biotin (homemade), CD8a (Biolegend, 100750), CD44-FITC (homemade), CD11b-FITC (Biolegend, 101206), CD45-PE-Cy7 (Biolegend, 10114), Ly6c-BV785 (Biolegend, 128041), Ly6G-APC-Cy7 (Biolegend, 127624), CD19-PE (Immunotools, 22190194), TCRb-PE (BD biosciences, 12-5961-81), MHCII-BV711 (Biolegend, 107643), CD11c-biotin (homemade), NK1.1 (BV605, 108753), Streptavidin (APC, 405207) and BV510-Zombie aqua (Biolegend, 423102). Following washes with flow cytometry buffer, the cells were incubated with secondary antibodies for 20 min at 4°C in the dark. The cells were fixed with BD fixation kit (554714).

Serum parameters

Following the euthanasia of the animals, blood was quickly collected from the decapitated body, and then transferred into a lithium-heparin (LiHep) added tube (BD microtainer) to obtain serum. After 30 min to 1 h incubation at room temperature (RT), samples were centrifuged

328   (2,000 g x 10 min, RT) to separate serum. Following that, 100 µl of serum was loaded to a
329   Cobas c111 analyzer to measure the levels of following enzymes: ALT, AST and LDH.

Smg6 cDNA genotyping

Total RNA was prepared as described previously [30]. For each RNA sample, the following
reaction was assembled: 4.5 µg RNA, 1.5 µl random hexamer (100 µg/ml), 1.5 µl 10 mM
dNTPs, RNase-free water to 18 µl. Samples were heated for 5 min at 65°C, and then
immediately put on ice. A master mix containing the following was added to each tube: 6 µl 5x
First-strand buffer, 3 µl 0.1 M DTT, 0.375 µl RNase inhibitor, 1.5 µl RNase-free water. After a
short incubation (2 min, at RT), 1.125 µl Superscript II reverse transcriptase enzyme was
added to each reaction. Samples were incubated 10 min at 25°C, 50 min at 42°C, 15 min at
70°C, respectively. *Smg6* genotyping polymerase chain reaction (PCR) was performed as
described previously [14]. The primer sequences – encompassing both mutant sites – are as
follows: forward: CCA GAT ACC AAC GGC TTC AT; reverse: TCT GGG TGG ATT GGT AGC
TC. Reactions were run on a 0.8% agarose gel, at 100 V for 100 minutes. Bands
corresponding to ~620 nt were excised, and then purified using Qiaquick Gel Extraction Kit
(QIAGEN, 28704). DNAs were Sanger-sequenced by Microsynth.

Quantitative Reverse Transcriptase PCR

Total RNA was prepared, and cDNA was synthesized as mentioned above. 10-times diluted
cDNA templates and a master mix containing SYBR green master mix (2x), forward and
reverse primers (3.0 µM) were mixed, and then a 384-well plate was prepared using the Tecan
Freedom EVO software. RT-PCR was performed using QuantStudio6 real-time systems.
Relative mRNA expression levels were obtained by normalizing each CT value (mean of three
technical replicates) to *Rpl13* and *Rpl27* expressions. The qPCR primer sequences can be
found in Supplementary Table 2.

Transcriptomics analysis

Total RNA was prepared as mentioned above. RNA-seq libraries were prepared from
individual mouse livers according to the standard protocols. Single-end sequencing (150
bases) was performed on NovaSeq6000 (Illumina) with a sequencing depth of 400 million
cDNA-mapping reads in total. Sequencing reads were trimmed for the first two low quality
(nucleotides) nt. Trimmed reads were then mapped using STAR [31] (v2.7.11b; --twopassMode
Basic --seedSearchStartLmax 50 --outSAMmultNmax 1) in a sequential manner: mouse rRNA
(Ensembl version 39.111), human rRNA (Ensembl version 38.111), mouse tRNA, and mouse
genome. Read counts per genes were obtained using summarizeOverlaps() of the R (v4.4.0)
library GenomicAlignments (mode = 'Union') and low read counts were excluded (≤5 counts

in less than three samples). Differential gene expression analysis was performed using
DEseq2 [32].

Ribosome profiling

The libraries for ribosome profiling were generated as [33] with slight changes. Frozen liver
tissues (200 mg) from individual mice were homogenized with 5 strokes using a Teflon
homogenizer in 3 volumes of polysome buffer (150 mM NaCl, 20 mM Tris-HCl [pH 7.4], 5 mM
DTT, complete EDTA-free protease inhibitors [Roche] and 40 U/ml RNasin plus [Promega])
supplemented with 1% Triton X-100 and 0.5% Na deoxycholate. Liver lysates were incubated
on ice for 10 min and cleared by centrifugation at 10,000 g, 4°C for 10 min. Supernatants were
flash-frozen and stored in liquid nitrogen. For each sample, 15 OD_{260} of liver lysate was
digested with RNase I (Ambion) for 45 min at RT under constant shaking. RNase I-digested
RNA was separated on 15% urea-polyacrylamide gels to excise monosome (~30 nt) footprints.
From the gel slices, RNA was extracted overnight at 4°C on a rotating wheel before
precipitation in isopropanol for 1 h, at -20°C. RNA 3'-end repair was performed with 2 U/µl of
T4 PNK (Lucigen) before 2 h of adapter ligation at 25°C using T4 RNA Ligase 1 (NEB) and
T4 RNA Ligase 2 Deletion Mutant (Lucigen) and 1 µl of a 20 µM 5'-adenylated DNA adapter.
Adapter removal was performed by treating individual libraries with 5'deadenylase (NEB) and
RecJf exonuclease (NEB) for 1 h at 30°C and 1 h at 37°C. Samples were purified and pooled
using Zymo Clean & Concentrator columns. Ribosomal RNA was depleted according to
siTools Biotech rRNA depletion kit specifications with a custom-made riboPOOL. The clean-
up step was performed using Zymo Clean & Concentrator columns. Further library preparation
steps were performed as described. The amplification of libraries was performed using i5 and
i7 [NexteraD502 or NexteraD503] primers. Libraries were sequenced on a NovaSeq6000
(Illumina).

Ribosome profiling data analysis

Sequencing reads were cleaned and trimmed. Briefly, adapter sequences were removed
using cutadapt (v3.5) [34] with the following parameters --match-read-wildcards --overlap 8 --
discard-untrimmed --minimum-length 30. Reads were filtered by quality using FASTX Toolkit
(v0.0.14; -Q33 -q 30 -p 90) and by size using an in-house Python script (length 26-35 nt).
Cleaned reads were then mapped using STAR (--twopassMode Basic –seedSearchStartLmax
28 –outSAMmultNmax 1) [31] in a sequential manner: mouse rRNA (Ensembl version 39.111),
human rRNA (Ensembl version 38.111), mouse tRNA, and mouse genome. STAR was used
for the mapping to splice junctions, as neoantigens can be produced from both exons and
introns. The A-site position of mapped reads to the mouse genome was retrieved using the R
(v4.4.0) package ribosomeProfilingQC (v1.16.0; estimatePsite() and getPsiteCoordinate(),

and addition of 3 nt to recover the A-site position). The A-sites were assigned to the counting
bins and the A-site count per bin was retrieved. Counting bins were defined using an in-house
R script (main functions: makeTxDbFromGFF() from txdbmaker [v1.1.1]; exonicParts() from
GenomicFeatures [v1.57.0]; and reduce(), gaps(), and findOverlaps() from IRanges [v2.39.2])
and A-site counts were obtained using summarizeOverlaps() of GenomicAlignments (v1.41.0;
mode = 'Union') [35]. The low A-site counts (≤5 counts in less than three samples) were excluded
and the differential analysis was performed using DESeq2 (v.1.45.3). To identify putative
neoantigens, the median A-site counts were calculated for each condition and the bins with at
least one A-site count in L-dKO $Smg6^{mut}$ were retained. The nucleotide sequences of each bin
were extracted, translated in the three reading frames, and the resulting amino acid sequences
were then split by stop codon, and retained if the peptide sequence lengths were ≥ 8 amino
acids.

MHC-I antibody production

MHC-I monoclonal antibodies were purified from the supernatant of HB-51 and HIB 34.1.2
hybridoma cells (ATCC), respectively, with Protein A-Sepharose 4B beads (Invitrogen). HB-
51 has specificity for H2-Db and H2-Kb, HIB 34.1.2 has specificity for H2-Dd, H2-Kd, and H2-
Ld. Each antibody type was cross-linked separately to Protein A-Sepharose 4B beads at
concentrations of 5 mg of antibodies per 1 ml of bead volume. To this end, the antibodies were
incubated with Protein A-Sepharose 4B beads for 1 hour, at RT. Antibodies and beads were
cross-linked with dimethyl pimelimidate dihydrochloride (Sigma-Aldrich) in 0.2 M sodium
borate buffer pH 9 (Sigma-Aldrich) to achieve a final concentration of 20 mM for 30 min. The
reaction was quenched via incubation with 0.2 M ethanolamine pH 8 (Sigma-Aldrich) for 2
hours. Cross-linked antibodies were stored at 4°C.

Purification of MHC-I-eluted peptides

200 mg of liver tissue per biological replicate was lysed in 2 ml phosphate buffered saline with
0.5% sodium deoxycholate (Sigma-Aldrich), 0.2 mM iodoacetamide (Sigma-Aldrich), 1 mM
EDTA, 1:200 Protease Inhibitor Cocktail (Sigma-Aldrich), 1 mM phenylmethylsulfonylfluoride
(Roche), and 1% octyl-beta-D glucopyranoside (Sigma-Aldrich) at 4°C for 1 hour, after
homogenization with an IKA T10 standard ULTRA TURRAX. Lysates were cleared by
centrifugation with a table-top centrifuge (Eppendorf Centrifuge) at 4°C at 20,000 g for 50 min.
MHC-I molecules purification was done with HB51 antibodies for C57BL/6 and a 1:1 mix of
HB51, HiB antibodies for C57BL/6; BALB/2c; 129_SvJae. Immunoprecipitations in 96-well
plates followed the protocol of [36]. Shortly, after plate conditioning, cross-linked beads and then
lysates were added to single wells, followed by washes at different sodium chloride
concentrations and an acidic elution step. Peptides were then desalted and purified on C18-

columns. Recovered peptides were dried using vacuum centrifugation (Thermo Fisher Scientific) and stored at -80°C.

Mass-spectrometry acquisition

For Mass spectrometry (MS) analysis, MHC-I peptide samples were resuspended in 8 µl of 2% ACN and 0.1% formic acid (FA). 3 µl of peptide resuspension was injected into the LC-MS setup per measurement, counting two in DDA and one in DIA. The LC-MS setup consists of an Easy-nLC 1200 (Thermo Fisher Scientific) connected to a Q Exactive HF-X (Thermo Fisher Scientific). Chromatographic separation was done with a 450 mm homemade column of 75 µm inner diameter packed with ReproSil Pur C18-AQ 1.9µm resin (Dr. Maisch GmbH). For DDA measurements, the chromatographic separation was performed over 2 hours using a gradient of H_2O:FA, 99.9%:0.1% (solvent A) and CH_3CN:FA 80%:0.1% (solvent B). The gradient consisted of sequential, linear steps: 0 to 110 min (2-25% B), 110 to 114 min (25-35% B), 114 to 115 min (35-100% B), and 115 to 120 min (constant at 100% B) at a flow rate of 250 nl/min. The mass spectrometer had the following parameters set: full-scan MS spectra were acquired from m/z = 300-1,650 at a resolution of 60,000 (m/z = 200) with maximum injection times of 80 ms. Auto gain control (AGC) target value was tuned to 3×10^6 ions. We acquired MS/MS spectra at a resolution of 30,000 (m/z = 200), a top 20 method and isolation windows of 1.2 m/z, as well as a collision energy of 27 (HCD). All MS/MS scans accumulated ions to an AGC target value of 2×10^5 at a maximum injection time of 120 ms. Precursors of charge 4 and above were not selected for fragmentation. The dynamic exclusion was set to 20s. For DIA, the chromatographic separation was performed as in DDA measurements. The DIA acquisition cycles included one full-scan MS spectra, acquired from m/z = 300-1,650 (Resolution = 120,000, ion accumulation time = 60 ms), and 22 MS/MS scans. For all MS/MS scans the AGC target value was set to 3×10^6 ion, mass resolution at 30,000 and a stepped normalized collision energy (25.5, 27, 30) was applied. The maximum ion accumulation was set to auto and their first mass was fixed to 200 m/z. Consecutive MS/MS scans overlapped in their m/z windows by 1 m/z.

Immunopeptidomics data processing

All DDA files were used to generate a library with a database search using FragPipe (v22.0), including MSFragger (v4.1) [37]. The FASTA file was compiled as described in 'Ribosome profiling data analysis'. For search space generation, unspecific digestion with peptide lengths of 8 to 14 amino acids was used. Variable modifications included methionine oxidation, N-terminal acetylation, and cysteine carbamidomethylation. No fixed modifications were applied. Peptide, ion, and psm FDRs were set to 0.03 while applying a group-specific FDR as indicated in the FASTA header with PE = X, X being the respective protein group. No protein FDR was

applied. All other settings were set to default. DIA files were searched with the library
described above using DIA-NN (v1.8) with a precursor q-value cut-off of 0.01. Peptide binding
affinities were predicted with MixMHC [38]. Peptides were considered as binders when they had
a %-rank below 2 for at least one HLA allele present in the sample haplotypes. Data analyses
were done with Julia and R, visualizations with R.

Protein extraction and Western Blot
Total proteins from mouse liver samples were isolated according to the NUN (NaCl, Urea,
Nonidet P-40) procedure, as [14]: Livers were homogenized in two tissue volumes of 10 mM
Hepes (pH 7.6), 100 mM KCl, 0.1 mM EDTA, 10% glycerol, 0.15 mM spermine, and 0.5 mM
spermidine for 15 s using a Teflon homogenizer. Four tissue volumes of 2x NUN buffer (2 M
urea, 2% NP-40, 0.6 M NaCl, 50 mM Hepes [pH 7.6], 2 mM dithiothreitol, and 0.1 mM
phenylmethylsulfonyl fluoride; supplemented with complete protease inhibitor tablets, Roche)
were added dropwise on a vortex with low speed. Lysates were incubated 1 h on ice and
cleared through centrifugation at 10,000 rpm, 4°C, for 20 min. Aliquots of the lysates (40 µg
of protein loaded per lane) were separated by SDS-polyacrylamide gel electrophoresis and
transferred to PVDF membrane using an iBlot 2 gel transfer device. The membrane was
blocked using 5% milk in Tris-buffered saline with 0,1% Tween 20 (TBST), 1 h at RT, followed
by an incubation overnight at 4°C with appropriate dilutions of primary antibodies, including
anti-Cleaved CASPASE3 (Cell Signaling Technology, 9661), anti-MDA5 (Cell Signaling
Technology, 5321), anti-PTEN (Cell Signaling Technology, 9188), anti-Hamartin/TSC1 (Cell
Signaling Technology, 6935), anti-GAPDH (Cell Signaling Technology, 2118), and anti-
VINCULIN (Abcam, ab129002). Following TBST washing (5 min, three times), the membrane
was incubated with the appropriate secondary antibody conjugated with horseradish
peroxidase for 60 min at RT, followed by TBST washing (15 min, three times).
Chemiluminescence signal was detected using Supersignal West Femto Maximum Sensitivity
Substrate (Thermofisher Scientific, 34095), as described by the manufacturer. The
quantification of signal was performed using ImageJ software.

Deletion of *Ifih1* in *Smg6^flox/flox*; *CreERT2* fibroblasts via CRISPR
First, lentiCRISPRv2-Blast-mU6 empty backbone (kind gift from J. Van Leeuwen, Addgene
plasmid #206806) [39] was digested with BsmBI (NEB, 0580) enzyme. The digestion products
were run on an agarose gel (0.8%), and the band corresponding to the open vector (~11 kb)
was excised, followed by DNA purification using QIAquick Gel Extraction Kit. Following
annealing reaction was assembled in a tube: 1 µl Forward primer (100 µM), 1 µl Reverse
primer (100 µM), 1 µl 10x T4 ligation buffer (NEB, B0202S), 0.5 µl T4 PNK (NEB, B0201S),
and 6.5 µl H₂O. Primers were annealed with the following protocol: incubate 30 min at 37°C,

and 5 min at 95°C, respectively, then cool to 25°C at a rate of 5°C/min. Annealed primers were

ligated into the open vector using the following mixture: 50 ng open vector, 2 μl 10x T4 ligation

buffer, 1 μl T4 DNA ligase (NEB, M0202S), 1 μl annealed primers (1:100 diluted), and

nuclease-free H_2O to 20 μl. Ligation mix was incubated at RT for 1 h. 10 μl ligation mix was

added to 100 μl Stbl3 competent cells, and incubated on ice for 30 min, followed by a heat-

shock for 30 sec at 42°C. After a short incubation (5 min, on ice), 1 ml S.O.C. medium was

added to the mixture, and the tube was incubated at 37°C, for 1 h with shaking. 100 μl of the

transformation mixture was plated on an agar plate containing Ampicillin and incubated

overnight at 37°C. Positive colonies were selected and cultured overnight with shaking at

37°C, in LB medium containing Ampicillin, then purified using a Midiprep kit (QIAGEN, 12943).

Cells were transfected with the plasmid using Lipofectamine 3000 (Thermo Fisher Scientific,

L3000001), according to the manufacturer's protocol, for 24 h, then were selected with

Blasticidin (5 μg/ml) for 96 h. *Ifih1*$^{ko/ko}$ cells were obtained through single cell cloning. *Ifih1*

sgRNA primer sequences: forward, CAC CGC GTA GAC GAC ATA TTA CCA G; reverse,

AAA CCT GGT AAT ATG TCG TCT ACG C.

Induction of Cre-mediated recombination in fibroblasts

Two different methods were used to induce Cre-dependent recombination:

1-Direct delivery of recombinant CRE protein (TAT-CRE, kind gift from I. Lopez-Mejia)*:

Smg6*$^{w/wt}$ and *Smg6*$^{flox/flox}$ (-/+ *Ifih1*$^{ko/ko}$) fibroblasts were seeded in 6-well plates. The standard

culture medium (Thermo Fisher Scientific, 41965062) was replaced with Opti-MeM (Thermo

Fisher Scientific, 31985062). Cells were subsequently treated with 2.5 μM TAT-CRE or vehicle

for 8 h. After treatment, OptiMeM was replaced with the standard culture medium.

2-Recombination via 4-hydroxytamoxifen (4-OHT): *Smg6*$^{flox/flox}$; *CreERT2* cells were treated

with 2 μM 4-OHT or DMSO for 3 days (4-OHT containing media was refreshed every 24 h).

In both methods, cells were maintained in culture for at least one-week post-treatment to

ensure efficient recombination. Cells were subsequently collected for RNA extraction (as

explained above).

J2 immunofluorescence

Immunofluorescence of dsRNA was performed as [40]. First, *Smg6*$^{flox/flox}$ cells were seeded in a

6-well plate, then treated with 2.5 μM TAT-CRE or vehicle as above. One week after the

treatment, cells were transferred to a new 6-well plate containing coverslips, at a confluency

of ca. 20%. Next day, the culture medium was removed, and cells were fixed using 4%

paraformaldehyde (PFA) for 15 min at RT, then washed three times (5 min each time), with

1x PBS. Fixed cells were permeabilized with 500 μl PBSTX, followed by a 10 min incubation

at RT. PBSTX was removed, 500 μl of IFA blocking buffer was added into each well, and

incubated for 1 h, at RT with rocking. After blocking, cells were incubated with 500 μl primary antibody solution (anti-dsRNA monoclonal antibody J2: Jena Bioscience, RNT-SCI-10010200) in IFA blocking buffer (1:1000), overnight, at 4°C with rocking. Primary antibody solution was removed, and cells were washed with 500 μl PBSTX (three times, for 5 min each). Cells were incubated with the secondary antibody solution in PBSTX (1:300, Goat anti-mouse IgG Alexa Fluor 488 for detection of J2, followed by washes with 500 μl PBSTX 3 times, for 5 min each). To prepare the slides for imaging, coverslips were removed from 6-well plate, and cleaned with 70% ethanol, then placed face down onto the glasses, sealed with a nail polish. Images were captured using a fluorescence microscope. The quantification of J2 intensity was performed on ImageJ software.

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AUTHOR CONTRIBUTIONS

Conceptualization: E.S.A. and D.G.; methodology: E.S.A., V.R., I.E.S., M.J., I.G.-M., and A.P.B.; investigation: E.S.A., V.R., I.E.S., M.J., I.G.-M., and L.Q.-M.; visualization: E.S.A., V.R., I.E.S., M.J., and I.G.-M.; supervision: D.G., L.Q.-M., J.R., S.A.L., and M.B.-S.; writing: E.S.A. and D.G.

DECLARATION OF INTERESTS

The authors declare no competing interests.

DATA AVAILABILITY

The transcriptomics and ribo-seq data discussed in this publication have been deposited in NCBI's Gene Expression Omnibus [41] and are accessible through GEO Series accession numbers GSE278996 and GSE278997. The mass spectrometry proteomics data have been deposited to the ProteomeXchange Consortium via the PRIDE [42] partner repository with the

dataset identifier PXD057903. All computational scripts are available on GitHub (https://github.com/NMD_Smg6/).

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Figure 1. Increased non-canonical immunopeptide expression in *Smg6* mutant livers

(A) Schematic of the genetic NMD-deficient mouse model. Cre-mediated recombination of the *Smg6^flox^* allele to *Smg6^mut^* introduces two-point mutations in catalytically important residues of the PIN domain. EBM, exon-junction complex binding motif. LoF, loss of function.

(B) Schematic of the experimental design for intrahepatic leukocyte isolation and flow cytometry-based counting. *Smg6^wt/wt^* and *Smg6^flox/flox^* mice (both also expressing *Alb^CreERT2^*) received 4 intraperitoneal tamoxifen injections. Livers were dissected 3 weeks later, and leukocytes were isolated for flow cytometric quantification. FACS, fluorescence-associated cell sorting.

(C) Overall leukocyte numbers per gram liver tissue (mean values from 5 mice per group), as assessed by flow cytometry. Cells are identified according to indicated color code.

(D) Relative leukocyte counts for individual cell types as assessed by flow cytometry. Graphs show normalized numbers (set to 1 in control) of indicated leukocyte type (n = 5 mice for each group. Data are plotted as means, and the error bars indicate SEM. The *P*-values were calculated with two-tailed unpaired *t*-test. DC, dendritic cells; NK, natural killer; ns, not significant.

(E) Schematic of the immunopeptide identification by combining ribo-seq and immunopeptidomics data.

(F) MHC-I binder peptide count and distribution across *Smg6^wt/wt^* and *Smg6^mut/mut^* liver replicates (n = 3 mice per genotype). Enrichment of unique peptides in *Smg6^mut/mut^* samples (18 in all replicates) as compared to *Smg6^wt/wt^* (4 in all replicates) is highly significant (*P* = 0.000053; Fisher's exact test).

(G) Scatter plots show canonical and non-canonical (exonic or intronic) peptide intensity in *Smg6^wt/wt^* (x-axis) and *Smg6^mut/mut^* (y-axis). Data are plotted as medians from the three replicates. Unique peptides in all three replicates are colored orange (mutant-specific peptides) and blue (control-specific peptides), with specific peptides highlighted and annotated with their sequence.

(H) Bar plot of peptide intensity of *Smg6* mutant-specific non-canonical antigens (n = 3 mice for each group).

(I) Normalized exonic and intronic RNA-seq read counts of *D17H6S56E-5*. Each dot represents the merged sequencing data from three biological replicates/livers.

(J) RNA-seq (top-panels) and ribo-seq (bottom-panels) read pileup plots show the upregulated transcript and footprint abundance of *D17H6S56E-5* in *Smg6^mut/mut^*. Left panel shows the larger genomic region, including the CDS (highlighted in turquoise) from which the non-canonical polypeptide is translated, while the right panel zooms in the specific region where the immunopeptide is translated (highlighted in light-

753   magenta). Plots were generated using merged sequencing data from three biological

754   replicates (individual livers) per group. Please note gene orientation from right to left.

Figure 2. *Smg6* mutation results in a Type-I IFN response mediated by dsRNA sensor MDA5.

(A) Heatmap showing ISG expression in control and mutant livers (n = 3 livers for each group). RNA-seq data was plotted after Z-score transformation of normalized expression levels across the 6 samples.

(B) Relative hepatic mRNA levels of indicated ISGs (n = 3 mice for each group). Control samples were set to 1.

(C) Schematic of the experiment to analyze SMG6-dependent ISG expression. To induce *Smg6* mutation in *Smg6$^{flox/flox}$; CreERT2* fibroblasts, cells were treated with 2 µM 4-hydroxytamoxifen (4-OHT) during days 1 to 4, and cells were collected 6 days later (day 10) for RNA isolation and qPCR. Control treatment was DMSO.

(D) Relative mRNA expression of the endogenous, diagnostic NMD-target, an *Hnrnpl* splice form, in samples collected as described in (C). Three biological replicates were used per group.

(E) Relative mRNA expression of indicated ISGs in same samples as in (D). Three biological replicates were used per group.

(F) Western blot validation of the loss of MDA5 expression in *Ifih1$^{ko/ko}$* fibroblasts (*Smg6$^{flox/flox}$* cells). GAPDH serves as loading control.

(G) Schematic of the experiment. Cells with indicated genotypes were treated with either TAT-CRE (2.5 µM) or vehicle for 8 hours, and then harvested at day 10 for RNA extraction and qPCR analyses.

(H) Relative mRNA expression of the endogenous, diagnostic NMD-target, an *Hnrnpl* splice form, in samples collected as described in (G). Three biological replicates were used per group.

(I) Relative mRNA expression of indicated ISGs. Arrows indicate the fold-change in the expression of indicated genes between cells nontreated vs. treated with TAT-CRE. Three biological replicates were used per group.

(J) Representative images from J2 (red) immunofluorescence (IF). DAPI (blue) serves to visualize nuclei.

(K) Quantification of J2 signal intensity (n = 238 cells for TAT-CRE-negative, n = 185 cells for TAT-CRE-positive). Black lines indicate the third quartile of each group.

For (B), (D), (E), (H), (I), and (K) data are plotted as means, and the error bars indicate SEM. The *P*-values were calculated with two-tailed unpaired *t*-test.

Figure 3. SMG6-dependent early inflammation in early-stage hepatocellular carcinoma model.

(A) Schematic of the genetic HCC model. Inactivation of tumor suppressor genes *Tsc1* and *Pten* via Cre-mediated recombination leads to tumors/HCC from week 12.

(B) Schematic of the experimental design. Both L-dKO *Smg6^{wt/wt}* and *Smg6^{flox/flox}* mice received 4 intraperitoneal tamoxifen injections. Early-stage experiment was terminated 3 weeks after tamoxifen injections. Late-stage animals were scanned via MRI from

week 12 to 21 (endpoint). In L-dKO *Smg6*^{*wt/wt*}, livers undergo NAFLD and NASH stages
as indicated.

(C) Western blot analysis on total liver proteins, for PTEN and TSC1. GAPDH serves as
loading control (Control, n = 2 mice; L-dKO *Smg6*^{*wt*}, n = 6 mice; L-dKO *Smg6*^{*mut*}, n = 5
mice).

(D) Quantification of western blots from (C).

(E) Representative images of whole-livers and Hematoxylin and Eosin (H&E)-stained
sections (at 10x magnification) from early-stage L-dKO *Smg6*^{*wt*} and *Smg6*^{*mut*} mice.

(F) Representative IHC images of livers from early-stage mice against neutrophil marker
Myeloperoxidase (MPO) and T-cell marker CD8, at 20x magnification. Arrowheads
mark MPO-positive or CD8-positive cells (brown).

(G) Quantification of CD8 IHC images. For each sample, the number of CD8+ T-cells was
counted in 15 randomly selected images, at 20x magnification (mean values from 4
mice per group).

(H) Overall leukocyte numbers per gram liver tissue (mean values from 7 mice per group),
as assessed by flow cytometry. Cells are identified according to indicated color code.

(I) Relative leukocyte counts for individual cell types as assessed by flow cytometry.
Graphs show normalized numbers (set to 1 in control) of indicated leukocyte type (n =
7 mice for each group).

For (D), (G), and (I) data are plotted as means, and the error bars indicate SEM. The *P*-
values were calculated with two-tailed unpaired *t*-test.

Figure 4. *Smg6* mutation suppresses cancer in genetic HCC model.

(A) Representative longitudinal MRI scans for a tumor-bearing L-dKO *Smg6^wt* mouse (top) and a tumor-free L-dKO *Smg6^mut* animal. Tumors in L-dKO *Smg6^wt* liver are indicated with yellow arrows (upper). Fibrotic plaques marked by yellow line in L-dKO *Smg6^mut* liver (lower).

(B) Kaplan-Meier plot, from two different cohorts, displays survival percentage of L-dKO *Smg6^wt* (n = 11) and *Smg6^mut* (n = 13) mice throughout the experiment. *P*-value by a log-rank (Mantel-Cox) test. Asterisk indicates 3 animals that deceased for other reasons than HCC.

(C) Whole liver, Masson's Trichrome (MTC) staining for fibrosis (at 20x magnification) and H&E images (at 2x magnification) from late-stage L-dKO *Smg6^wt* and *Smg6^mut* mice. Dashed lines surround tumors in L-dKO *Smg6^wt*. Arrowheads indicate fibrotic areas in L-dKO *Smg6^mut*.

(D) Representative IHC images of livers from late-stage mice, showing CD8-positive cells, at 20x magnification. Arrowheads mark CD8+ T-cells (brown).

(E) Quantification of CD8 IHC images. For each sample, the number of CD8-positive T-cells was counted in 15 randomly selected images, at 20x magnification (L-dKO *Smg6^wt*, n = 5 mice; L-dKO *Smg6^mut*, n = 6 mice). The *P*-value was calculated with two-tailed unpaired *t*-test.

(F) Model for how the suppression of NMD activity via endonuclease-inactive SMG6 activates both innate and adaptive branches of the immune system. For innate responses, aberrant mRNAs (shown here: intron-retained transcripts known to contain repetitive elements) can form double-stranded configurations, causing activation of cytoplasmic dsRNA sensor MDA5, which upregulates a type-I IFN response, resulting in innate immune cell infiltration. With the accumulation of aberrant or otherwise NMD-suppressed mRNAs in the cytoplasm, their translation leads to the production of unusual/non-canonical peptides which are then subsequently processed for MHC-I presentation on the cell surface, which attracts CD8+ T-cells to infiltrate the tissue, leading to adaptive immune cell recognition. Please note that for simplicity, prior steps required for CD8+ T-cell activation (i.e., antigen presentation by dendritic cells) have been omitted from the schematic.

A

Figure S1. *Smg6* mutation leads to leukocyte infiltration in the liver.

(A) Hepatic transcriptomics data are plotted for indicated leukocyte-marker genes for

mRNA (top graphs) and pre-mRNA (bottom graphs), for *Smg6wt* and *Smg6mut* liver

(n = 3 mice per group, for every time-point). RPKM values (reads per kilobase of

transcript per million mapped reads) of individual mouse livers are displayed as dots

with lines connecting the means for every time point. The dashed lines show the

rhythmic data fit using the parameters from Metacycle 41.Samples were taken every

4 hours, over a 24-hour period, from light- dark 12:12 entrained mice. ZT: Zeitgeber

Time. *Ptprc* (encoding CD45), global leukocyte marker; *Cd4*, CD4+ T-cell marker;

Cd8a, CD8+ T-cell marker; *Cd44*, activated T-cell marker; *Itgax* (encoding CD11c), DC

marker; *Ly6c1* (encoding Ly6c), monocyte marker; *Adgre1* (encoding F4/80),

macrophage marker; and *Cxcr2*, neutrophil marker.

(B) Flow cytometry gating strategy of intrahepatic myeloid cells.

(C) Flow cytometry gating strategy of intrahepatic lymphocytes.

Figure S2. Increased non-canonical antigen expression in *Smg6* mutant livers

(A) Serum levels (U/L) of indicated liver damage markers (*Smg6*[wt], n = 4 mice; *Smg6*[wt], n = 3 mice).

(B) Relative mRNA levels of indicated inflammatory genes in wild-type vs. mutant livers (n = 3 mice for each group).

(C) Representative IHC images of lviers stained for cleaved Caspase-3 (brown staining), at 20x magnification. Arrowheads show positively stained cells.

(D) Quantification of cleaved Caspase-3 IHC images. For each sample, the number of cleaved Caspase-3 positive cells were counted in 10 randomly selected images, at 20x magnification (mean values from 4 mice per group).

(E) RNA-seq (top-panels) and ribo-seq (bottom-panels) read coverage plots show upregulated transcript and ribosome footprint abundance of *Gm6545* in *Smg6*[mut/mut] compared to *Smg6*[wt/wt]. Left panel shows the whole genomic region, including the CDS (highlighted in turquoise) where the non-canonical polypeptide is translated, while right panel zooms into the specific region where the immunopeptide is translated (highlighted in light-magenta). Read coverage plots were generated by merging sequencing data from three biological replicates (individual livers) per group.

For (A), (B), and (D) data are plotted as means, and the error bars indicate SEM. The *P*-values were calculated with two-tailed unpaired *t*-test.

A **B**

Primary fibroblasts

Figure S3. Deletion of *Ifih1* in *Smg6^flox/flox* fibroblasts via CRISPR.

    (A) Western blot confirmation of the loss of MDA5 activity in different fibroblast single-cell

        clones. GAPDH serves as loading control.

    (B) Quantification of western blot from (A).

Figure S4. *Smg6* mutation in liver leads to increased apoptosis, followed by fibrosis.

(A) Representative H&E images from early-stage L-dKO livers, at 40x magnification.

Arrowheads indicate lipid droplets (white circles) within hepatocytes.

(B) Representative IHC images of livers from early-stage mice, stained with antibodies

directed against cleaved Caspase-3, at 20x magnification. Arrowheads show cleaved

Caspase-3+ cells (brown).

(C) Quantification of cleaved Caspase-3 IHC images as that shown in (B). For each
sample, the number of cleaved Caspase-3+ cells was counted in 10 randomly selected
images, at 20x magnification (mean values from 7 mice per group).
(D) Western blot analysis of total proteins, for cleaved Caspase-3. VINCULIN served as
loading control (L-dKO $Smg6^{wt}$, n = 6 mice; L-dKO $Smg6^{mut}$, n = 5 mice).
(E) Quantification of western blot from (D).
(F) Relative hepatic mRNA levels of *Bax*, from early-stage mice (n = 5 mice per group).
(G) Relative hepatic mRNA levels of indicated pro-fibrotic genes, from early-stage mice (n
= 4 mice per group).
For (C), (E), (F), and (G) data are plotted as means, and the error bars indicate SEM. The
P-values were calculated with two-tailed unpaired *t*-test.

Figure S5. Regression of liver damage marker levels in *Smg6* mutant mice from early-to late-stage L-dKO.

(A) Comparison of the ration of liver-over-body weight between early- and late-stage mice, within the same group (n = 5 mice for early-stage groups; L-dKO *Smg6^wt^* late, n = 10 mice; L-dKO *Smg6^mut^* late, n = 9 mice).

(B) Comparison of the level of indicated liver damage enzymes, detected in serum, between early- and late-stage mice. Arrows display the fold-change alteration in the level of liver damage markers from early-to late-stage, in the same group (n = 5 mice for early-stage groups; L-dKO *Smg6^wt^* late, n = 10 mice; L-dKO *Smg6^mut^* late, n = 9 mice).

(C) Sanger sequencing chromatograms on cDNA, from representative late-stage livers, show the conversion of aspartic acid encoding wild-type codon (GAC) to alanine encoding mutant codon (GCC) in the exon 18 of the *Smg6* gene, through tamoxifen induced CreERT2 expression in liver.

(D) Western blot analysis of total liver proteins for PTEN and TSC1. VINCULIN and
GAPDH served as loading controls (Control, n = 2 mice; L-dKO $Smg6^{wt}$, n = 6 mice; L-
dKO $Smg6^{mut}$, n = 3 mice).

(E) Quantification of western blots from (D).

(F) Representative IHC images of livers from late-stage mice against PTEN. Light brown
staining shows PTEN expression in hepatocytes in control (blue arrowhead). Dark
brown staining indicated PTEN expression in non-hepatocyte cells in both control and
L-dKO (black arrowhead). Images were captured at 20x (large images) and 80x (small
images) magnifications.

For (A), (B), and (E) data are plotted as means, and the error bars indicate SEM. The *P*-
values were calculated with two-tailed unpaired *t*-test.