Analysis of 14q12 microdeletions reveals novel regulatory loci for the neurodevelopmental disorder-related gene, *FOXG1*

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Abstract

Structural variants (SVs) are genetic variants that can vary widely in size, but are generally greater than 50bp. While there are many different types of SVs, deletions are perhaps the easiest to interpret given the loss of genetic material. As such up to 17% of neurodevelopmental disorders (NDDs) can be explained by SVs that disrupt coding regions causing gene dosage defects. Conversely, the contribution of non-coding SVs to the etiology of NDDs is unknown., From a few NDDs, and other mendelian disorders we know that non-coding SVs can perturb *cis*-regulatory elements (CREs) and disrupt downstream gene expression. In this study, we identified multiple deletions in the 14q12 region downstream of NDD-related gene *FOXG1* in individuals with epilepsy, microcephaly, intellectual disability (ID) and/or developmental delays. This gene encodes a transcription factor essential for cerebral corticogenesis, and *FOXG1* haploinsufficiency is associated with epilepsy and other NDDs. To test whether the 14q12 deletions alter *FOXG1* expression, we chose the minimum region overlapping these deletions (MRO), and modeled this deletion in HAP1s, a haploid line expressing *FOXG1.* Deletion of the MRO reduced *FOXG1* mRNA and protein levels, while altering FOXG1's native genomic interactions. We identified at least two novel putative *FOXG1* CREs in the MRO and propose multiple CREs coregulate *FOXG1*. Moreover, changes in the transcriptomic profiles seen with MRO loss overlap in part with *FOXG1* loss, indicating converging molecular pathways of *FOXG1* haploinsufficiency. These findings expand the scope of *FOXG1's* complex regulatory mechanisms, and more broadly, of regulatory SVs in NDD susceptibility. A comprehensive understanding of regulatory SVs will enable the identification of regulatory elements that are potential targets for gene-targeting therapies, including in FOXG1-related NDDs.

Introduction

Neurodevelopmental disorders (NDDs) are a heterogenous collection of developmental disorders that impair functions of the brain and the nervous system. These disorders have childhood onset and include, among others, intellectual disability (ID), autism spectrum disorder (ASD) and epilepsy [1–3]. It is now well established that disease-causing protein-coding variants in hundreds of genes account for up to 40% of NDDs [4–6]. This still leaves a large fraction of cases unexplained, rekindling interest in investigating the non-coding regulatory regions of the genome for causative variants in individuals with NDDs [7–10].

In particular, structural variants (SVs) are attractive candidates for understanding non-coding variation due to the thousands to millions of base pairs that can be disrupted and thus, in theory, easier interpretation. SVs, defined as alterations greater than 50 base pairs, include deletions, duplications, insertions, inversions, and translocations. SVs can overlap known NDD-related genes and cause these conditions through gene dosage effects. Coding SVs account for 15-17% of NDDs in general [11,12] and 10-12% of specific NDDs, such as the genetic epilepsies [13–15]. However, some SVs do not span coding regions but rather disrupt cis-regulatory elements (CREs) or higher order chromatin structures, including topologically associated domains (TADs). When SVs disrupt CREs, promoter-enhancer interactions can be perturbed, which affects gene transcription [16–18]. For example, noncoding single nucleotide variants and duplications in the *GATA2* regulatory region cause hereditary congenital facial paresis. These variants cause disease by aberrant prolonged *GATA2* expression which in turn impairs an essential neural fate switch during development [19]. SVs can also disrupt TAD boundaries, leading to an alteration of the native chromatin architecture, promoting non-canonical promoter-enhancer interactions and gene misexpression. TAD disruption by SVs has been reported in human limb malformations and congenital disorders [20,21]. Moreover, in NDDs, there is an enrichment of non-coding variants in the TAD encompassing NDD-related gene, *MEF2C*, and deletion of a proximal *MEF2C* TAD boundary resulted in reduced gene expression [22]. Collectively, these studies highlight an emerging role for non-coding SVs in the etiology of NDDs. Here we add to this burgeoning field by describing NDD-related microdeletions at the 14q12 locus flanking the gene, *FOXG1*.

FOXG1 encodes Forkhead Box G1, a key transcription factor in forebrain development that is highly dosage sensitive [23,24]. *FOXG1* expression is especially critical during corticogenesis, triencephalon specification and development, as well as maintenance of mature neurons [25–27]. Neurodevelopment is reliant not only on precise spatio-temporal *FOXG1* expression, but also on its cellular expression levels; both increased and decreased *FOXG1* expression is associated with poor neurological outcomes [24,28,29]. Heterozygous loss of *FOXG1* causes *FOXG1* syndrome – a congenital NDD characterized by epilepsy, ID, microcephaly, developmental delays, loss of motor skills and overlapping clinical features with Rett syndrome [30–32]. Several heterozygous *de novo* whole gene deletions, truncating variants and loss of function missense variants cause *FOXG1* syndrome. The pathogenic mechanism is thus haploinsufficiency, wherein one autosomal allele of *FOXG1* is functional, but insufficient to prevent disease [31,33]. In addition, *de novo* duplications of *FOXG1* result in increased gene dosage

and are associated with developmental epilepsy, ID, and severe speech impairment [34]. Interestingly, 14q12 deletions not encompassing *FOXG1* have been reported in individuals with overlapping clinical features of *FOXG1* haploinsufficiency [32,35–37].

Using DECIPHER, we identified several individuals with clinical features overlapping *FOXG1* haploinsufficiency phenotypes, without coding *FOXG1* variants, but rather downstream microdeletions that potentially disrupt CREs. We refine the regulatory landscape of *FOXG1* expression and demonstrate that deletion of a minimum region of overlap (MRO) reduced gene expression, likely contributing to haploinsufficiency in individuals with NDDs.

Results

Deletion of downstream *FOXG1* 14q12 minimum region of overlap leads to reduced *FOXG1* expression

We identified 9 microdeletions in the 14q12 region downstream of *FOXG1* described in DECIPHER. These deletions were reported in individuals (6 females and 3 males) with ID (n=8), seizures (n=3) and microcephaly (n=6). (**Figure 1 and Table 1**). Most of these deletions were *de novo* (patients 2-7); one deletion was maternally inherited (patient 9) and two were of unknown inheritance (patient 1 and 8). None of these deletions encompassed any other gene except *PRKD1.* This gene is completely tolerant to loss of function in the general population with a pLI score of 0 (gnomAD, [38]) and is not associated with NDDs [35]. Thus, we hypothesized that disruption of CREs in the region likely contributed to the phenotype via disruption of *FOXG1* expression. We selected the minimum region of overlap (MRO) between these deletions for modeling in the HAP1 cell line. This region (hg38: chr14:29,704,736-29,803,897) spans ~0.1 Mb and is ~0.93 Mb downstream of *FOXG1*. The MRO was examined for variants in the general population using gnomAD and no large deletions were observed in this locus (**Figure S1**).

We selected the HAP1 cell line due to its haploid nature, which facilitates genome editing, as well as the endogenous expression of *FOXG1* (**Figure 2**). We successfully deleted the MRO using dual flanking guides in HAP1s (14q12-MRO-Del); the *FOXG1* coding region was similarly deleted as a positive control (FOXG1^{KO}). We verified the genotypes of 14q12-MRO-Del (deletion of hg38: chr14:29,704,715-29,803,900) and FOXG1^{KO} (deletion of hg38: chr14:28767269-28768758) using Sanger sequencing, and in the 14q12-MRO-Del confirmed the absence of major off-target SVs using genome sequencing (**Figure S2A-B).** As the MRO encompasses exon 2 as well as flanking intron of *PRKD1*, an expected loss of *PRKD1* expression was observed in 14q12-MRO-Del (**Figure S2C**).

Using qRT-PCR, we demonstrated complete loss of *FOXG1* mRNA expression in FOXG1^{KO} and a 68% reduction in the 14q12-MRO-Del line (p-value 0.0006, Welch's T test) (**Figure 2A**). At the protein level, western blotting revealed similar loss of protein in FOXG1^{KO} and a 45% reduction in the 14q12-MRO-Del (p-value 0.0005, Welch's T test) (**Figure 2B**). Collectively these results demonstrate that deleting the MRO reduces *FOXG1* expression, though not to the same degree as deletion of the complete coding region.

Deletion of the MRO locus alters *FOXG1's* native contacts with downstream CREs

To examine the causal mechanism of reduced *FOXG1* expression with MRO deletion, we examined chromatin interactions of the *FOXG1* locus with downstream CREs in wildtype and 14q12-MRO-Del lines using Unique Molecular Identifier (UMI)-4C. We anchored the viewpoint proximal to *FOXG1's* promoter (**Table S4**) and identified 9997 UMIs in WT and 6805 UMIs in 14q12-MRO-Del. UMI-4C contact intensity profiles were generated which highlight multiple promoter – CRE interactions across the 14q12 region. The overwhelming majority of contacts lie downstream of *FOXG1*, with very few contacts, and no peaks upstream. Moreover, in both HAP1s and neural cell lineages, peaks of UMI-4C interactions correlate with CREs defined by the enhancer histone modification, H3K27Ac, as well as VISTA enhancers and ENCODE Candidate CREs (cCREs) [39–44] (**Figure 3A**).

As expected, in the 14q12-MRO-Del, physical genomic interactions were lost between the *FOXG1* promoter and the MRO locus (**Figure 3A/B**). The 14q12-MRO-Del is expected to lead to the deletion of at least two, but possibly more enhancer elements, as defined by H3K27Ac peaks in the HAP1 cell line (**Figure 3B**). Moreover, there is an overlap of these HAP1 enhancer elements, with those present in stem cell derived neural precursor lines, as well as human brain (**Figure 3B**), suggesting that this locus is also regulatory in a neuronal context. Loss of these enhancer elements is likely what underpins reduced *FOXG1* expression in the 14q12-MRO-Del. In addition, native *FOXG1* genomic interactions were altered when the MRO was deleted, and significant differences in UMI contacts between WT and 14q12-MRO-Del were observed at several loci in the 14q12 region (**Figure S3**). Collectively, deleting the MRO locus impacted the physical genomic interaction of the *FOXG1* promoter and downstream CREs, including deletion of putative *FOXG1* enhancers at the MRO and enhanced contacts across the region; these alterations likely underpin the reduced *FOXG1* expression observed with MRO loss.

Gene expression analysis identifies shared DEGs between 14q12-MRO-Del and *FOXG1*[KO]

Given *FOXG1's* function as a transcription factor, we evaluated the effects of *FOXG1* downregulation on overall gene expression changes using RNA-seq. We identified 1036 differentially expressed genes (DEGs) in 14q12-MRO-Del, and 517 DEGs in FOXG1[KO], compared to WT. Furthermore, we identified 86 DEGs that overlapped between the two datasets. The shared DEGs included genes involved in cell cycle regulation (*CCND1, BMP7)* [45–47] as well as those implicated in epilepsy (*FOSL2, EVAVL3, EPHA5, OLFM3, ARHGAP4)* [48–52], ID/microcephaly (*XYLT1, COLEC11, CADPS2)* [53–55] and other NDDs (*KY, ADGRL3, TCEAL9)* [56–58] **(Figure 4, Table S5).** Functional enrichment analysis of DEGs revealed a few shared molecular functions and biological pathways between 14q12-MRO-Del and FOXG1[KO] (**Figure S4**). In essence, loss of the MRO and the subsequent reduction of *FOXG1* expression resulted in a transcriptome distinct from that of the wildtype, with a subset of DEGs shared with the *FOXG1* coding loss, suggesting shared downstream effects of loss of this transcription factor.

Discussion

FOXG1 is a dosage sensitive gene where both over- and under expression are associated with epilepsy and NDDs [23,24,59]. SVs, especially microdeletions in the 14q12 region downstream of *FOXG1* are reported in several individuals with clinical phenotypes that resemble *FOXG1* haploinsufficiency [32,35–37]. Whether the observed phenotypes are a result of the deletions was unclear, and the complex mechanisms of *FOXG1* regulation by these microdeletions are not fully understood. We identified nine 14q12 microdeletions downstream of *FOXG1* in DECIPHER in individuals with epilepsy, ID and/or microcephaly, and having no other clear causal variants. The deletions ranged from ~151.8 kb to 1.17Mb in size and were of mostly unspecified pathogenicity. We identified a shared 0.1Mb region (MRO), deleted in all patients, nearly 0.93 Mb distal to *FOXG1* that regulates *FOXG1* expression.

Deleting the MRO decreased *FOXG1* expression by more than half (68% reduction of mRNA, 45% reduction of protein) in the haploid HAP1 cell line, suggesting that the MRO is regulatory in nature. To determine what drives this reduced expression, we defined *FOXG1*'s physical genomic interaction landscape using the targeted and quantitative chromatin capture. We show that the *FOXG1* promoter interacts with the MRO, albeit with relatively low contact intensities, and these interactions are eliminated with the deletion of MRO. Along with ENCODE cCRE data, enhancer annotations from VISTA, and H3K27Ac occupancy data from HAP1 and neural lines, we identified putative CREs in the MRO that promote expression of *FOXG1*. We posit that deletion of these CREs leads to the reduction of *FOXG1* expression in the HAP1 cell line and by extension, likely contributes to reduced *FOXG1* expression in individuals with 14q12 deletions.

While *FOXG1* expression was considerably downregulated when the MRO was deleted, it was not fully lost, indicating that multiple enhancers outside the MRO regulate expression. Indeed, we observed enhanced chromatin contacts across the region in the 14q12-MRO-Del (**Figure S3**). Moreover, the MRO from this study lies within a larger regulatory region of *FOXG1* designated as the SRO (smallest region of overlap) (**Figure 3A** [35]). This region was previously defined by *de novo* 14q12 deletions downstream of *FOXG1* in three individuals with *FOXG1* syndrome related phenotypes including epilepsy, ID, developmental delays and severe postnatal microcephaly (patient 3, 5 and 7 [35]). The SRO is a complex region with multiple regulatory elements. A critical regulatory region within the SRO [37] consists of at least five Vista enhancers, hs1193, hs1201, hs1062, hs555 [35] and hs598 [60], predicted to regulate *FOXG1* (**Figure 3A**). Moreover, a human embryonic stem cell specific TAD boundary, hESCb_2291 [20,37] also resides within this critical regulatory region (**Figure 3A**). In our present study, we refined the SRO with a focus on the MRO based on the distal deletions in patient 8 and 9 (**Figure 1**). Of note, these two individuals, with deletions that encompass less of the SRO and associated regulatory elements, present only with ID. In contrast, individuals with more complete deletion of regulatory elements (patient 1-7) generally present with all features of *FOXG1* haploinsufficiency: ID, seizures and microcephaly. This, taken together with the reduction but not complete loss of *FOXG1* expression by deletion of the MRO suggests that disruption of multiple CREs is required to completely ablate *FOXG1* expression. Moreover, the number of disrupted CREs may underpin genotype-

phenotype relationships and as genome sequencing facilitates more widespread and smaller SV detection, these relationships may become more apparent.

The modulation of *FOXG1* via CREs in the SRO and across the 14q12 region that show physical interactions are likely to be important not only in ID/epilepsy, but also neurological conditions more broadly. Indeed, there are multiple GWAS loci in the region that have been associated with increased risk for ADHD and schizophrenia (**Figure 3C** [61]). Furthermore, deletion of a ~500bp region flanking schizophrenia-associated SNP rs1191551 reduced *FOXG1* expression by ~20% in HEK293T cells [62]. Further, a luciferase assay also demonstrated reduced activity of the risk rs1191551 allele, suggesting that this particular variant can modulate FOXG1 expression. Collectively, these studies highlight the need to systematically assess both disease-associated SVs and single nucleotide changes across this important regulatory region in neurological disease broadly.

Overall, our work demonstrates that there is enhancer redundancy across the 14q12 locus, where multiple enhancers exist for a single gene. This is a common phenomenon in mammalian development where key developmental genes that are dosage sensitive are tightly regulated by multiple CREs [63]. Such a redundancy in gene regulation is considered to function as a protective mechanism against deleterious genomic aberrations [64]. For instance, individual deletion of each of ten loci critical for mouse limb development resulted in normal limb phenotypes, whereas pairwise deletions of these loci resulted in noticeably different limb formations [64]. Redundant, or shadow enhancers regulate the same target gene and overlap in part or full, in the developmental space and time to drive expression patterns; they work in complex ways to buffer gene expression and fine tune gene dosage [63]. *FOXG1* is highly regulated for its spatiotemporal expression during corticogenesis. While multiple regulatory features in the critical regulatory region govern *FOXG1* expression, we extend the gene's regulatory region to the MRO and propose that shadow enhancers for *FOXG1* exist across the SRO region including the MRO. Furthermore, the effect of shadow enhancers on gene expression is not always additive; depending on the availability of transcription factors at each of the enhancers and the buffering requirement of the cell, the effects can be superadditive, subadditive, or even repressive [63,65]. This could potentially explain the differences in severity of *FOXG1* haploinsufficiency phenotypes seen in individuals with identical deletion breakpoints (patient 2, 3 from this study and Case 1 [36]).

In addition to neurodevelopmental programming, *FOXG1* is also involved in the transcriptional regulation of numerous other key regulators in the developmental pathways [24]. *FOXG1* modulates BMP signaling and the cell cycle, ensuring cells remain in proliferative states [28,47]. Since *FOXG1* levels were decreased with MRO loss, we evaluated its downstream effects on global transcription through gene expression analysis. Several genes that were differentially expressed with MRO loss were also differentially expressed with *FOXG1* loss, notably, BMP family protein *BMP7* [47], *CCND1*, a G1 phase cyclin [46] and *EGR1*, a transcription factor and member of the EGR-*FOXG1* coupled regulatory network [66]. These results indicate that the impact of MRO loss extends beyond *FOXG1* downregulation and leads to more complex

perturbations of downstream homeostatic and developmental pathways, some of which intersect with those seen with complete *FOXG1* loss.

In summary, our work refines the regulatory landscape of the *FOXG1* locus, and we identify a novel ~0.1 Mb regulatory region downstream of *FOXG1* in the 14q12 region. Within this MRO, we define putative *FOXG1* CREs and emphasize that this locus exhibits both enhancer redundancy as well as shadow enhancer activity. The complex regulatory nature of the *FOXG1* locus is reflected in its importance in disease etiology. We define the causal mechanisms of a subset of clinical features of *FOXG1* syndrome and posit that deletion of multiple CREs is necessary to cause *FOXG1* haploinsufficiency. Overall, this critical regulatory locus should be examined across both NDDs and neuropsychiatric disease for causative and contributory variants and presents unique opportunities for gene-targeting therapies via modulation of *FOXG1* expression.

Methods

Selection of candidate 14q12 microdeletions, HAP1 maintenance and cell line generation

We used DECIPHER (DatabasE of genomiC varIation and Phenotype in Humans using Ensembl Resources) [67] to identify 14q12 microdeletions downstream of the NDD-related gene, *FOXG1* in individuals with epilepsy and related NDDs. Deletions within *FOXG1's* TAD that excluded *FOXG1* and extended up to hg38: chr14:30,550,000 (approaching the distal TAD boundary limit) were considered [68]. Larger deletions spanning multiple genes were excluded as gene dosage effects from multiple encompassed genes are likely to confound patient phenotypes.

Human eHAP (fully haploid engineered HAP1) cells from Horizon Discovery BioSciences (C669) were maintained in DMEM containing 4.5 g/l glucose (Thermo Fisher Scientific) supplemented with 10% Tet-approved FBS (Atlanta Biologicals) and 1% penicillin/streptomycin (Thermo Fisher Scientific). The cells were tested for mycoplasma contamination and all experiments were performed within 3 to 10 passages.

CRISPR genome editing was used to create 14q12-MRO-Del and FOXG1[KO] eHAP lines. Guide RNAs were designed to target each of the two breakpoints of the MRO and cloned into a Cas9-GFP vector (PX458, Addgene #48138) or a Cas9-mCherry vector (a PX458 derivative engineered in-house) (**Table S1** for guide RNA sequences). Dual guide electroporation was performed using the Neon Transfection System. 24-48h post transfection, FACS was performed for single cell clonal isolation and expansion of GFP and mCherry double positive cells. Clonal lines were genotyped by PCR, followed by Sanger sequencing, to detect the presence of the deletion (**Table S1** for primer sequences). Whole genome sequencing (WGS) was performed to further confirm the intended genotype. Moreover, we used the MetaSVs pipeline to detect the presence of any large unintended SVs, and any lines harboring such variants were excluded [69]. FOXG1[KO] lines were similarly generated, with dual guide RNAs targeting the start and

end of *FOXG1*'s coding region (**Table S1**). Clones of 14q12-MRO-Del and FOXG1[KO], along with the parental/unedited line (WT Clone A) and a wildtype clone from the CRISPR screen (WT Clone B) as isogenic controls, were selected for experimentation (**Table S2**).

FOXG1 mRNA and protein quantification

Quantitative reverse transcription PCR was performed to assay *FOXG1* mRNA levels. RNA was extracted and purified from HAP1s in culture using TRIzol reagent (Invitrogen #15596026). qRT-PCR reactions were performed using Biorad iTaq Universal One-Step RT-qPCR Kit (1725150). 25ng RNA per reaction was used and triplicate qRT-PCR reactions were carried out for each target (**Table S1**) on a Biorad CFX384 Real-Time PCR Detection system. Raw Ct values were obtained for each sample. Ct values for *FOXG1* were transformed by first normalizing to EAR and then normalizing to WT to calculate relative fold change of *FOXG1* [70]. Two Sample T-Test (Welch's T-Test) or Wilcoxon Rank Sum Test were performed to test statistical significance between samples.

Western blotting was performed to assay FOXG1 protein levels. Whole cell lysates were prepared using RIPA Lysis and Extraction Reagent (Thermo Scientific 89900) in the presence of protease inhibitors (cOmplete™, Mini, EDTA-free Protease Inhibitor Cocktail, Sigma 11836170001). 20 µg of protein per well was separated on NuPage 3-8% Tris-Acetate precast gels (Invitrogen) and transferred onto a PVDF membrane (Millipore). Immunoblotting was performed using primary antibodies (**Table S3**) and detected with peroxidase-conjugated secondary antibodies (**Table S3**). This was followed by detection with ECL peroxidase substrate (Cytiva Amersham RPN2232). Protein band intensities on immunoblots were quantified by densitometric analysis. Two Sample T-Test (Welch's T-Test) was performed to test statistical significance between samples.

Locus specific chromatin capture

UMI-4C was performed for targeted and quantitative capture of *FOXG1*'s genomic interactions with the following specifications [22]. *FOXG1* viewpoint was defined as a 1kb window at the 5' end of the gene. Crosslinked chromatin from 5×10^6 cells were used per sample. UMI-4C libraries were constructed by enriching the 4C library for *FOXG1* contacts using viewpoint specific primers (**Table S1**) [71]. Two unique barcode adapters per sample were utilized to generate five UMI-4C reactions per adapter, which were pooled to make a final UMI-4C library. UMI-4C experiments were performed at least twice per clone. Libraries were subject to 75 bp paired end sequencing on the Illumina MiniSeq platform at a sequencing depth of 1-2M reads per sample.

Raw read quality was assessed using FastQC [72]. The fastq files from sequencing were analyzed using the UMI-4C R Package as described [22,73]. Since the UMI-4C library is made up of adapter ligated DNA fragments that consist of both the bait and its spatially proximal genomic region, it generates sequencing reads that map to both these loci. To quantify these spatially proximal genomic interactions, the R package

transforms the raw sequencing reads to unique genomic interactions (UMI counts) per genomic restriction fragment and the resulting data is saved as genomic tracks. From these tracks, we extracted viewpoint-specific UMI counts for a given region of interest using the package. UMI counts were normalized to the total UMI counts within the region of interest and a smoothed interaction profile was produced using default parameters in the package. In this way, we generated UMI-4C profiles for the 14q12 region of interest (hg38: chr14: 28,965,045-30,631,045) for WT and 14q12-MRO-Del samples. Differential genomic interactions between samples were evaluated using the UMI4Cats R package [74]. Significant differential contacts between WT and 14q12-MRO-Del were inferred by the Wald Test using the waldUMI4C() function with FDR adjusted *p*-value of 0.05.

Analysis of H3K27Ac data across 14q12 *FOXG1* regulatory region

H3K27Ac ChIP-seq data was assessed from published data in HAP1s (GSE167721), adult brain hippocampus (GSM1112791) and temporal lobe (GSM772995), the embryonic stem cell line H1 (GSM466732) as well as neural precursor cells (NPCs) derived from H1 (GSM753429) and ganglionic eminence neurospheres derived from H1 (GSM1127083).

Bulk RNA-Seq library prep and data analysis

RNA was extracted and purified from HAP1s in culture by the guanidinium thiocyanate-phenol-chloroform extraction method using TRIzol^{TM} reagent (Invitrogen #15596-026). Purified RNA samples were assayed on a TapeStation 4150 (Agilent) to determine the concentration and RIN (RNA Integrity Number) values. RNA samples with RIN > 9 were sent to Novogene for mRNA library preparation and subject to 150 bp paired end sequencing on a NovaSeq platform at a sequencing depth of at least 20 M reads per sample.

Raw read quality was assessed using FastQC [72]. Reads were trimmed to remove adapter sequences using HTStream, aligned to the human reference genome GRCh38/hg38 and GENCODE v38 using STAR [75]. The read count matrix was generated using GENCODE v38 using Rsubread [76]. Differentially expressed genes (DEGs) were detected using DESeq2 using an adjusted p-value threshold of 0.05 and log2Fold change greater/less than absolute value of 1 [77]. Functional enrichment analysis was performed using gene ontology in the clusterProfiler package using a Benjamini-Hochberg corrected p-value threshold of 0.05 [78–81].

Data availability

Data for the study are available at NCBI GEO database with accession number GEO: GSEXXXXXX.

Author contributions: AR, MB, LA, EY, JZC and CB generated the experimental data. JDC assisted with experiments. AR, NB, JDC, GLC performed data analysis, and interpretation of results. GLC and AR conceived the presented idea, developed the theory, wrote this manuscript and generated figures for this manuscript. GLC supervised the project.

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Table 1: Genetic and clinical details of 14q12 heterozygous deletion variants in individuals with epilepsy, ID and/or microcephaly considered in defining the minimum region of overlap (MRO)

Patient	Decipher ID	Chromosomal/ Phenotypic sex	Deletion coordinates (hg38)	Inheritance	Pathogenicity assignment in DECIPHER	Seizures	Intellectual Disability (ID)	Microcephaly	Additional clinical features
DECIPHER									
1	260836	46XY	14:29068799-29865858	Unknown	Unspecified	-	Yes	Yes	
2	248405	46XY	14:29226052-30403168	*De novo*	Unspecified	-	Yes	Yes	
3	3810	46XX	14:29226052-30403168	*De novo*	Unspecified	Yes	Yes	Yes	Bruxism, hypoplasia of the corpus callosum, delayed speech and language development
4	258584	46XX	14:29312198-30083730	*De novo*	Unspecified	Yes	Yes	-	Atypical behavior, delayed speech and language development
5	358785	46XX	14:29360119-29879052	*De novo*	Likely Pathogenic	-	Yes	Yes (secondary)	Agenesis of corpus callosum
6	414554	Female	14:29395780-29803897	*De novo*	Likely Pathogenic	Yes	-	Yes	Delayed myelination, global developmental delay, simplified gyral pattern
7	252353	46XX	14:29435514-29847454	*De novo*	Unspecified	-	Yes	Yes	Hypoplasia of the corpus callosum
8	259935	46XX	14:29704706-30500956	Unknown	Unspecified	-	Yes	-	Atypical behavior
9 [37]	284715	46XY	14:29704736-29856618	Maternally inherited	Unspecified	-	Yes (mild)	-	Delayed speech and language development
Published									
Case 1 [36]	-	Female	14:29226052-30403168	*De novo*	-	Yes	-	Yes	Intellectual impairment, agenesis of corpus callosum, global developmental delay
Case 2 [36]	-	Female	14:28868223-30018792	*De novo*	-	Yes	-	Yes	Intellectual impairment, agenesis of corpus callosum, global developmental delay
Case 3 [36]	-	Male	14:28960335-29847513	*De novo*	-	-	-	Yes	Intellectual impairment, severe developmental delay

Figure 1: 14q12 microdeletions downstream of *FOXG1* in this study. Deletions present in individuals with epilepsy and other NDDs in DECIPHER are represented by horizontal bars and color-coded for pathogenicity. Additionally, three deletions from prior work that met our selection criteria are also shown (red horizontal bars) [36]. The overlap between the 14q12 deletions was used to define the minimum region of overlap (MRO), in this case by the deletion breakpoints in patients 6, 8 and 9 (black enclosure). The panel on the right indicates whether individuals with the respective 14q12 deletions presented with seizures, intellectual disability (ID) or developmental delays (DD) and microcephaly. Grey bar represents a single overlapping region (SRO) in the 14q12 region previously predicted to regulate *FOXG1* [35].

Figure 2: *FOXG1* expression is reduced with the loss of the MRO locus (A) *FOXG1* mRNA fold change relative to *EAR* assayed by qRT-PCR (n: WT Clone A = 9, WT Clone B = 3, 14q12-MRO-Del = 9, FOXG1^{KO} = 3) (Two sample T-test, WT vs 14q12-MRO-Del, p= 0.0006; WT vs FOXG1^{KO}, p = 5.4e-6). (B) FOXG1 protein levels relative to TAF5 were assayed using Western Blotting (n: WT Clone A =15, WT Clone B = 3, 14q12-MRO-Del = 9, FOXG1^{KO} = 6) (Two sample T-test, WT vs 14q12-MRO-Del, p= 0.0005; WT vs FOXG1^{KO}, p = 4.7e-10). Error bars represent one standard error.

Figure 3: The MRO locus harbors putative *FOXG1* CREs. (A) The MRO defined by the 14q12 patient deletions in this study is highlighted in red. *FOXG1* UMI-4C profiles represent genomic interactions of *FOXG1* in the 14q12 region (WT, grey; 14q12-MRO-Del; purple). ADHD- and schizophrenia-associated GWAS loci and CREs defined by the enhancer histone modification, H3K27Ac, as well as VISTA enhancers and ENCODE Candidate CREs (cCREs) in this region overlap peaks from the UMI-4C contact profiles. A previously described *FOXG1* regulatory region, SRO (smallest region of overlap, horizontal grey bar) in 14q12 encompasses VISTA enhancers hs1193, hs1201, hs1062, hs555 [35] and hs598 [60] (in bold). The schizophrenia-associated SNP rs1191551(pale yellow vertical highlight) [62] and the stem cell specific *FOXG1* TAD boundary, hESCb_2291, (pale grey vertical highlight) [37] also lie within the SRO. (B) A focus on the MRO region (red highlight) showcases native *FOXG1* genomic interactions in WT that are lost in 14q12-MRO-Del. Putative *FOXG1* CREs in the MRO are identified by the two H3K27Ac peaks conserved in HAP1s (ENCODE) and neural cell types (RoadMap Epigenomic Project).

Figure 4: Differential gene expression analysis in MRO and *FOXG1* loss. Volcano plot of DEGs in (A) 14q12-MRO-Del vs WT and (B) FOXG1^{KO} vs WT highlighting down regulated (blue: log2FC<1) and upregulated (orange:log2FC>1) DEGs (adjusted p-value<0.05). Genes that overlap both MRO and FOXG1 loss datasets are indicated by triangles. (C) Heatmap of gene expression changes for overlapping DEGs between 14q12-MRO-Del, and FOXG1^{KO} HAP1s. (n=3 for WT Clone A, WT Clone B, 14q12-MRO-Del and FOXG1^{KO}). Genes implicated in *FOXG1* pathophysiology and clinical phenotypes are highlighted (panels A and B) and appear in bold in panel C.

A. Relative fold change of *FOXG1* mRNA

B. Relative fold change of FOXG1 protein