# Cellular and Regional Vulnerability Shapes the Molecular Landscape of Psychosis in Alzheimer's Disease

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## Highlights

- Cell-type- and brain-region-specific transcriptional changes in AD with psychosis (AD+P)
- Upper-layer pyramidal dysfunction and metabolic vulnerability marks the pathophysiology of AD+P
- Circuit wiring programs are evoked in AD+P as maladaptive compensatory responses
- AD+P-associated IL-6 signaling impairs neuronal network function in brain organoids

## Abstract

Approximately 40% of Alzheimer's disease (AD) patients develop psychosis, yet the molecular and cellular processes that govern the manifestation of psychotic symptoms in dementia remain

poorly understood. To define the neurobiological correlates that distinguish AD patients with

psychosis (AD+P) from AD patients that never exhibited psychotic symptoms (AD-P), we

performed single-nucleus transcriptome and epigenome profiling from prefrontal cortex and

hippocampus of 48 postmortem brains from AD subjects segmented by psychiatric diagnosis. Our

snRNA-seq profiling uncovered differentially expressed genes (DEGs) across multiple cell types,

including transcriptional signatures of enhanced synaptic transmission in upper-layer pyramidal

neurons of the AD+P cortex. Cell fraction analysis and histology both indicate greater loss of

upper-layer pyramidal neurons in AD+P in comparison to AD-P cortex. Integrating our snRNA-

seq data with functional screens in stem-cell derived brain organoids, we defined how genetic

perturbations modify input-output network connectivity *in vitro* in a model of cortico-cortical

communication. We find that differential vulnerability of pyramidal neurons in AD+P is associated

with CDK5/p35-associated neurotoxicity and IL6-mediated glial inflammatory expression

changes. This neuronal response is associated with microglial exhaustion and astrocytic

inflammation signatures triggered by layer-specific neuropathological changes in the brains of

AD+P patients. Lastly, we elucidate common and distinct transcriptional signatures between

psychosis in AD and several other psychiatric conditions, and found significant enrichment of

schizophrenia genetics with AD+P that is most convergent in upper-layer pyramidal neurons. Our

work provides novel insight into the pathophysiological role of hyperexcitable circuits in the

etiology of neuropsychiatric symptoms of AD.

## Introduction

Alzheimer's disease (AD) is characterized by progressive memory loss, language deficits,

impaired cognitive abilities, and behavioral disturbances, all of which severely compromise an

individual's ability to perform daily activities[1–3]. Hallmark pathological features of AD include the

accumulation of amyloid-beta plaques and tau neurofibrillary tangles, accompanied by glial

inflammation and reductions in brain volume, particularly within the hippocampus and prefrontal

cortex, regions integral to memory formation and executive functions[4,5]. These molecular and

structural alterations are often preceded by changes in brain activity patterns, detectable through

neuroimaging techniques, which manifest within regions harboring early pathological

accumulations long before clinical symptoms arise[6].

Therapeutic efforts in AD have predominantly focused on mitigating cognitive decline. However,

current pharmacological treatments offer limited efficacy in halting or reversing cognitive

impairment[7]. Given the complex and multifactorial nature of AD, it is essential to consider

alternative therapeutic targets beyond cognition, particularly those that address non-cognitive

symptoms of AD like psychosis, which includes hallucinations and delusions[8]. Mitigating these

symptoms may significantly enhance the quality of life for patients and alleviate the burdens faced

by caregivers, presenting a more attainable clinical goal compared to reversing advanced

cognitive decline in individuals with dementia.

Alzheimer's disease with psychosis (AD+P) is associated with accelerated cognitive deterioration,

a heightened burden of tau pathology, pronounced neurodegeneration, and increased mortality

risk[9]. Alarmingly, current antipsychotic treatments are accompanied by a black box warning due

to a documented rise in fatal outcomes, underscoring the urgent need for novel and effective

therapeutic strategies[10,11]. Despite the high prevalence and severe impact of psychosis in AD[12],

the underlying neurobiological mechanisms remain poorly understood. Genetic studies of AD+P

suggest a common neurobiological pathway rather than nonspecific consequences of widespread

neurodegeneration[13–16]. Moreover, emerging evidence implicates the glutamatergic system in the

development of a number of psychotic disorders, particularly through neuronal hyperactivity and

resultant disruptions in functional connectivity[17,18]. Neuropsychiatric symptoms in AD, including

psychosis, have been linked to altered neural circuitry and synaptic dysfunction[19,20], potentially

stemming from maladaptive compensatory mechanisms in response to progressive

neurodegeneration[21,22].

In this study, we utilized single-nucleus RNA sequencing (snRNA-seq) and single-nucleus assay

for transposase-accessible chromatin sequencing (snATAC-seq) to investigate the cellular and

molecular landscape associated with psychosis in AD. Our analyses reveal that surviving

excitatory pyramidal neurons in the upper cortical layers of AD+P brains re-engage

developmental genetic programs aimed at circuit assembly, perhaps as an attempt to remodel

network connectivity amid ongoing neurodegeneration. Surprisingly, data from stem-cell-based

models indicate that these compensatory responses may inadvertently exacerbate

neurodegenerative pathology and network dysfunction, offering new insights into the paradoxical

nature of neuronal plasticity in AD+P.

**Results**

**1. snRNA-seq atlas of PFC and hippocampus in Alzheimer's disease with and without**

**psychosis**

To investigate molecular and cellular differences in AD individuals with and without psychosis

(AD+P vs. AD-P), we performed single-nucleus RNA-seq (snRNA-seq) on the prefrontal cortex

(PFC) and anterior hippocampus (AH) from 24 AD+P and 24 AD-P individuals (**Methods and**

**Patient Manifest in Supplementary Table S1**). After quality control, we obtained 160,875

transcriptomes, identifying major cell types, including excitatory neurons, inhibitory neurons,

astrocytes, oligodendrocytes, oligodendrocyte progenitor cells (OPCs), microglia, vascular cells,

and ependymal cells (**Fig. 1A**, **Methods**). Cell types were annotated based on canonical marker

gene expression (**Fig. 1B**), and we further classified subtypes within excitatory and inhibitory

neurons (**Fig. 1A**). Excitatory neuron subtypes were transcriptionally distinct by cortical layers

and brain regions, while inhibitory neuron subtypes were distinguishable based on marker gene

expression (**Fig. 1A**).

We then assessed whether specific cell type proportions differed between AD+P and AD-P

individuals, accounting for confounding factors such as sex, age, and postmortem interval (PMI)

(**Methods**). In the PFC, we found that excitatory and inhibitory neurons showed significantly

reduced proportions in AD+P, while OPCs were significantly increased in cortex (**Fig. 1C**). At the

subtype level, we observed that cortical layer L2 and L3 (ExL2/3) and layers L3 and L4 (ExL3/4)

excitatory neurons were disproportionately reduced in AD+P, suggesting cortical layer-specific

neuronal loss associated with psychosis in AD (**Fig. 1D**). These correlates are based on marker

gene expression that span layers 2 to 4 (L2-L4), suggesting that upper-layer excitatory pyramidal

neurons may show differential vulnerability in AD+P. To confirm these findings based on high-

throughput sequencing, we performed histology with immunohistochemistry (IHC) in a separate

cohort consisting of tissue from 20 postmortem human brain PFCs  (n= 10 AD+P versus 10 AD-

P) (**Fig. 1E-H, Supplementary Table 2**). Images were segmented into layers based on nuclei

density with the marker DAPI. Our histology analysis revealed consistent findings to our snRNA-

seq cell fraction analysis, with AD+P subjects showing decreased density of neurons in upper

cortical layers L2, L3 and L4, based on the expression of the pan-neuronal marker, NeuN (**Fig.**

**1E**). Neurons in deeper layers (i.e. L5 and L6) were not significantly altered between AD+P and

AD-P. To understand how the distribution of pathology across the cortex correlates with neuronal

loss, we quantified amyloid-beta plaques and hyperphosphorylated neurofibrillary tau tangles

(NFTs) across PFC brain tissue (**Fig. 1F-H**). Numerous postmortem studies have reported that

AD+P subjects exhibit greater NFT burden, while less consistent changes have been described

for the levels of amyloid plaques[23–25]. We found that the density of amyloid plaques with the

amyloid probe Methoxy-X04 are greater in upper cortical layers (L1-L4) and reduced in deeper

layers (L5 and L6) across all subjects, suggesting upper cortical neurons bear greater plaque

burden (**Fig. 1F)**. Nevertheless, comparisons of amyloid densities segmented by psychosis

presence (i.e. AD+P versus AD-P) did not show significant changes. When segmented by cortical

layers, L4 showed a trend for increased plaques in AD+P (p-value = 0.09 with two-way ANOVA

with bonferroni post hoc test) (**Fig. 1F and Supplemental Fig. S1A**). Next, we assessed if the

levels of Tau phosphorylation (pTau), which is the main substrate of NFTs, were significantly

altered in postmortem PFC brain tissue of AD+P relative to AD-P samples (**Fig. 1F)**. Although the

pattern of the distribution of pTau across the cortex were seemingly distinct between the two

groups, we did not find statistically significant changes in specific cortical layers, but an overall

increase across all layers (**Fig. 1F and Supplemental Fig. S1A**). These results suggest that

neuropathological changes do not drive the differential vulnerability of upper cortical neurons in

AD+P. However, our results do not rule out the possibility that neuropathological changes may

act as a trigger to neuronal susceptibility. Of note, we did not find significant differences in the cell

proportions of the AH (**Supplemental Fig. S2**). Although the mechanism at play remains

unknown, we reasoned that transcriptional programs may reveal the differential responses in

AD+P that lead to the relative greater loss of upper cortical neurons.

**2. Cell-type- and brain-region-specific transcriptional changes in AD with psychosis**

We next examined transcriptional changes in AD+P versus AD-P individuals by performing

differential gene expression analysis for each cell type and brain region. Using MAST (single-cell

level) and EdgeR (pseudo-bulk level), we obtained consistent results across methods

(**Supplemental Fig. S3A-B, Methods**). In PFC, we identified 1,534 upregulated and 1,416

downregulated genes in AD+P individuals, with high cell-type specificity (**Fig. 2A, Supplemental**

**Table 3**). In the hippocampus (AH), we found 576 upregulated and 540 downregulated genes

(**Fig. 2B, Supplemental Table 4**), fewer than in the PFC, suggesting more dramatic

transcriptional changes in the PFC at the time of sample collection.

We systematically compared DEGs between the two regions and categorized them into six

groups: shared upregulated, AH-specific upregulated, PFC-specific upregulated, shared

downregulated, AH-specific downregulated, and PFC-specific downregulated. Gene expression

changes showed consistent trends across regions, even with varying significance levels (**Fig. 2C**).

Notably, the PFC had more region-specific DEGs in excitatory neurons, inhibitory neurons, and

astrocytes, while the hippocampus showed higher microglia-specific DEGs. These findings

suggest more severe neuronal loss in the PFC, consistent with the cell proportion analysis (**Fig.**

**1C**), and stronger microglia-driven inflammation in the hippocampus in AD+P individuals.

To explore the biological functions of DEGs in these six groups, we performed gene ontology

(GO) enrichment analysis for each cell type (**Fig. 2C, Supplemental Fig. S4, Methods**). In

excitatory neurons (**Fig. 2D**), we found that shared upregulated genes were enriched in protein

unfolding and synaptic vesicle endocytosis. Hippocampus-specific upregulated genes were linked

to protein folding and JUN kinase activity, while PFC-specific upregulated genes were associated

with synapse organization, neuron projection regulation, and neuron death. Shared

downregulated genes were involved in cell cycle signaling and glucose starvation response, while

PFC-specific downregulated genes showed enrichment in cilium organization and extracellular

transport. These results highlight distinct and shared functional pathways in the PFC and

hippocampus, emphasizing region-specific mechanisms in AD+P individuals.

Our cell fraction analysis and transcriptional results likely reflect the regional impact of AD

progression, with more severe neurodegenerative phenotypes in AH than PFC[26]. Notably, our

snRNA-seq profiling data was derived from subjects with an average age at death of 86 years old

(ranging from 65 to 102 years old and balanced between AD+P and AD-P). Adding further support

to the notion that disease progression may hinder our ability to uncover early pathological triggers,

particularly as it relates to AH. It is also possible that the neural substrates that drive psychosis

are indeed more dependent on cortical than hippocampal processes, particularly as it pertains to

AD patients with or without psychosis. Nevertheless, due to the salience of our results in the PFC,

we decided to focus on these processes to further derive mechanistic insights into the neural

substrates that drive the manifestation of psychotic symptoms in dementia.

**3. Compensatory mechanism evoked by surviving excitatory neurons in PFC.**

Neuronal DEGs in the PFC are particularly striking for pathways related to metabolic processes.

This includes GO terms associated with up-regulated genes that relate to glycolysis, mitochondrial

respiration, mitochondrial membrane remodeling and mitochondrial apoptotic signaling

(**Supplemental Figure S5** and **Supplementary Table S5**). Along with these transcriptional

programs that may suggest metabolic dysfunction across a wide range of neuronal subtypes,

excitatory neurons also exhibit up-regulated terms related to synaptic transmission,

neurotransmitter signaling, neuronal development and neuronal projection morphogenesis. To

define the relative enrichment of these synaptic-related DEGs, we curated the genes from these

GO terms and mapped their expression across cortical layers. Here, we stratified their relative

enrichment by cortical laminae based on the co-expression of layer-specific markers. We found

that synaptic-related DEGs were mostly enriched in upper cortical layers L2 and L3 (**Fig. 3A**).

This initial finding was counterintuitive, given that based on cell fraction analysis and histology we

identified a significantly lower number of neurons in cortical layers L2 and L3 of the AD+P brains.

We hypothesized that the upregulation of synaptic and neuronal transmission genes may rather

reflect a compensatory mechanism by surviving neurons in the face of neurodegeneration. To

test this idea, we probed PFC human brain sections from AD+P and AD-P subjects with

fluorescent in situ RNA hybridization using an RNAscope probe for synapsin 1 (SYN1), an AD+P

up-regulated DEG which encodes a critical neuronal protein well-known to regulate

synaptogenesis and neurotransmitter release[27] (**Fig. 3B**). Notably, SYN1 is robustly and

restrictively expressed by neurons[28]. Our analysis revealed that the number of RNAscope dots

per nucleus for a given SYN1-positive neuron (comprising at least 3 SYN1 dots) increased in

AD+P (**Fig. 3C and 3D**). While these results were only significantly increased in L2 and L3, deeper

layers also showed trends for increased SYN1 RNAscope dots. In agreement with our previous

observations, the overall percentage of cells positive for SYN1 in cortical layers L2 and L3 were

significantly reduced (**Fig. 3E**). From these experiments we concluded that the relatively greater

expression of this synaptic-related transcriptional signature in AD+P PFC captured by our snRNA-

profiling is indicative of a compensatory mechanism by surviving neurons, perhaps in an attempt

to maintain circuit function and integrity. Nevertheless, it remains unclear from these observations

what are the impact of these genetic programs on the function of neural circuits.

The balance between excitation and inhibition (E/I) is tightly regulated in the adult cortex[29].

Disturbances to E/I balance are linked to many neuropsychiatric disorders, including

schizophrenia [30]. The association between schizophrenia and E/I disturbances has been

implicated particularly with changes in the activity of Parvalbumin (PV) interneurons[31–33]. PV

interneuron's fast-spiking properties and fast GABA release are thought to be critical in shaping

the activity of cortical ensembles and network synchrony[34]. PV-expressing interneurons can be

divided into several subpopulations, with the most prominent being basket cells[35]. In our snRNA-

seq analysis, PV basket cells are significantly decreased in AD+P, with DEGs indicative of

widespread metabolic dysfunction (**Fig. 3F and 3G**). Lack of balance in the ratio of excitatory to

inhibitory neurons or perturbations in the activity of inhibitory neurons can greatly modify the

output of excitatory neurons[36]. Although enhanced glutamatergic signaling has been previously

implicated in psychosis[17,18], many studies have also reported through functional imaging that AD

patients with psychotic symptoms have reduced correlates of neuronal activity[8]. Hence, the

functional consequence of our snRNA-seq results to circuit function is uncertain. Next, we decided

to explore the functional impact of the gene expression perturbations we uncovered in AD+P

brains to the activity of neuronal ensembles by employing induced pluripotent stem cell (iPSC)-

based models of the human brain.

**4. Functional characterization of AD with psychosis DEGs from upper-layer pyramidal**

**neurons.**

The mammalian neocortex processes signals through local microcircuits that are arranged in

distinct layers of information processing pathways[37]. Excitatory pyramidal neurons in layers L2

and L3 send long-range axons to distant brain regions, making them essential for cortical

information processing[38]. We envisioned building an in vitro platform of cortico-cortical

connectivity from which we could infer how genetic perturbations in L2 and L3 of AD+P brains

impact circuit function. Human iPSCs patterned to adopt neural fates and forced to grow in 3D

form structures known as brain organoids that have become sophisticated tools to model the brain

in a human-based context[38,39]. Here, we employed established protocols to generate forebrain

organoids[40], composed predominantly of excitatory neurons, that recapitulate major cortical layers

to engineer an input-output model of neuronal connectivity.

To gain control over neuronal activity patterns, we first generated an iPSC line that constitutively

expressed the channelrhodopsin variant CheRiff [41] under the neuronal-restrictive promoter human

Synapsin (hSyn-CheRiff). We then differentiated this line into forebrain organoids (**Fig. 4A**) We

found that CheRiff and its increased sensitivity to blue light, allowed for faithful control of neuronal

activity in organoids with blue light stimulation despite the high refractive index of culture media

(**Fig. 4B**). Towards our goal of building a model of cortico-cortical connectivity, we created an

assembloid by fusing two forebrain organoids together. Assembloids have been previously used

to model connectivity across distinct brain regions, as they allow for organoids derived from

multiple iPSC lines or organoids separately patterned to adopt distinct brain regionalities to be

assembled post-production [40]. To test the extent to which excitatory neurons in one organoid

hemisphere projects across to the contralateral hemisphere, we infected organoids with the

axonal-restricted genetically-encoded calcium indicator AAV Axonal-GCaMP6s and later

generated assembloids with non-infected organoids[42]. This allowed us to image the activity of

neurons whose projections crossed the assembloid junction line and confirm their input to the

contralateral side (**Fig. 4C** and **Supplemental Movie S1**).

Next, we fused organoids that harbored constitutive Syn-CheRiff expression with organoids

previously infected with Synapsin-GCaMP6s to generate assembloids. Here, we would gain

optogenetic control of neuronal activity in one hemisphere while having the capability of observing

neuronal activity in the contralateral hemisphere via calcium imaging. Using this simple input-

output model of neuronal connectivity, we reasoned that we could ectopically express synaptic-

related upregulated DEGs from L2 and L3 of AD+P brains to the input hemisphere to probe its

impact on the function and connectivity of neural circuits (**Fig. 4D**). In our model, optogenetic

stimulation produced large amplitude calcium events on the contralateral organoid **(Fig. 4E, Fig.**

**4F, and Supplemental Movie S2**). We curated 37 genes upregulated in AD+P L2/L3 excitatory

neurons from GO terms related to neuron projection development (genelist in **Fig. 3A**) and

delivered them with lentiviral vectors under a ubiquitous promoter to hSyn-CheRiff organoids at

90 days after differentiation. In parallel, a separate set of organoids from the same line and batch

that did not carry the hSyn-CheRiff construct were infected with AAV Synapsin-GCaMP6s. On

day 120, these two sets of organoids were fused and made into assembloids. Ten days later, we

screened activity patterns following stimulation in distinct assembloids in comparison to non-

transduced controls (**Supplemental Movie S3**). We ranked the activity of the contralateral

organoid based on calcium dynamics and binned them into groups of increased activity (n=9 of

DEGs tested), no change (n=10 of DEGs tested), or reduced activity (n=18 of DEGs tested) in

comparison to controls (**Fig. 4G**).

Given that we chose to ectopically express genes related to neuronal projection development,

and that the majority of the DEGs we tested decreased activity on the contralateral organoid, we

wondered to what extent these genetic manipulations modify the span of projections across

assembloid junctions. Using the stable GFP signal of the hSyn-CheRiff line, we traced

fluorescence to the contralateral hemisphere near the vicinity of the assembloid junction and

ranked it from least to most projection (**Fig. 4H**). Interestingly, we found instances of DEGs that

decreased activity on the contralateral organoid but counterintuitively increased projections

across the assembloid junction. One such example is CAMK2B, a gene that encodes the beta

subunit of the calcium/calmodulin-dependent protein kinase II and plays a critical role in synaptic

plasticity and dendritic arborization[43]. In experiments overexpressing CAMK2B or an identical

construct but that instead carried the blue fluorescent protein EBFP, we found that CAMK2B

overexpression leads to enhanced vulnerability of neurons following optogenetic stimulation

compared to controls, likely due to excitotoxicity (**Supplemental Figure S6**). In fact,

overexpression of CaMKII has previously been shown to increase glutamate-induced neuronal

death in similar contexts[43,44]. While the overexpression of CDK5R1, an AD+P L2/L3 upregulated

DEG, led to similar phenotypes as CAMK2B overexpression (i.e. less contralateral activity but

more projection across assembloid junction), we did not find evidence of enhanced excitotoxicity

(**Fig. 4H** and **Supplemental Figure S6**). CDK5R1 encodes for a protein known as p35, a neuron-

specific activator of the cyclin-dependent kinase 5 (CDK5)[45]. While the activation of CDK5 is

required for proper central nervous system development and cortical lamination [45,46], CDK5 is also

a key enzyme responsible for the phosphorylation of tau[47]. Of note, p35 can be proteolytically

cleaved by excitotoxic triggers such as amyloid beta aggregation or high levels of intracellular

calcium to generate a smaller peptide known as p25[48,49]. Interestingly, the p25 form of this protein

has been shown to accumulate in neurons of patients with AD[50]. Since p25 has been shown to

increase CDK5 kinase activity, it is thought that this could be a critical mechanism linking disease-

associated toxic events to neuronal tau hyperphosphorylation and the pathological formation of

NFTs[51]. In mice, CDK5R1 peaks in expression during early development where it plays a crucial

role in promoting neurite outgrowth[51,52], congruent with our observation of greater projections

across the assembloid junctions in CDK5R1 overexpressing organoids. Since we observed

decreased activity on the contralateral organoid, we decided to test the impact of CDK5R1

overexpression on the infected organoid itself. We found that CDK5R1 overexpression

dramatically decreased levels of neuronal activity in infected organoids two weeks post-

transduction (**Fig. 4I and 4J**).

To determine the integrity of the neurons following CDK5R1 overexpression, we fixed and

performed immunostaining on infected organoids derived from a healthy control subject cultured

for over 18 months. Staining for the neuronal marker MAP2 showed neuronal processes that were

free of blebbing with intact morphologies (**Fig. 4K**). We probed pTau at a known Cdk5

phosphorylation site, Ser396 [53], in CDK5R1 overexpressing or EBFP-infected organoids and

found a robust increase in the levels of pTau with CDK5R1 overexpression (**Fig. 4K**). It is

important to also note that many of the Cdk5 target sites are hyperphosphorylated in post-mortem

AD brain samples[51]. IHC with pTau Ser396 antibody in a cohort of postmortem human brain PFCs

also revealed increased levels of pTau in AD+P compared to AD-P subjects (n= 10 AD+P versus

10 AD-P) (**Fig. 4L**). Notwithstanding, this study and others have reported that overall levels of

pTau are increased in AD+P, and not only in a phosphorylation site-specific manner[23].

Collectively, our experimental data suggests a compensatory mechanism by pyramidal cells in

AD+P that may ultimately disrupt network connectivity and exacerbate neuropathology. Notably,

many functional imaging studies to date have reported that AD patients with neuropsychiatric

symptoms have decreased gray matter volume and reduced network connectivity [54].

Nevertheless, the molecular and cellular cues that evokes these genetic programs in AD+P

excitatory upper-layer neurons leading to their preferential vulnerability remains unclear.

**5. Glial response in AD with psychosis is marked by microglial exhaustion and astrocyte-**

**driven inflammation.**

Next we sought to explore how transcriptional programs in glia may reflect our findings of neuronal

vulnerability in the AD+P cortex. We were particularly interested in exploring the crosstalk of

astrocytes and microglia, as the most significant pathways for DEGs in each cell type suggested

enrichment of an inflammatory signaling axis. Up-regulated DEGs for astrocytes include GO terms

for "cellular response to cytokine stimulus" while up-regulated DEGs for microglia include

"cytokine-mediated signaling pathway" (**Fig. 5A** and **Supplemental Table S6**). Microglial

transcriptional programs in response to aging and AD have been previously deeply characterized

with snRNA-seq from mouse models of neurodegeneration and postmortem human brains[55–59].

While a wide variety of transcriptional programs associated with disease states have been

catalogued, microglial activation across disease is consistently marked by the downregulation of

a handful of homeostatic gene markers. One such case is the loss of P2RY12 expression, a

purinergic receptor thought to mediate microglial surveillance[60]. Even though our cell fraction

analysis did not capture any significant changes in microglial content between AD+P and AD-P

brains (**Fig. 1A**), we attempted to determine via immunohistochemistry if the coverage of

P2RY12-positive microglial processes were changed between AD+P and AD-P subjects. Our

analysis did not find significant changes (**Fig. 5B**), suggesting that microglia number and

activation status is similar across AD independent of neuropsychiatric diagnosis. At closer

inspection, up-regulated DEGs of microglia revealed a widespread genetic program reflective of

cellular response to stress (e.g. unfolded proteins and heat shock proteins) (**Fig. 5C** and

**Supplemental Table S6**). Additionally, upregulated DEGs include PLCG2, whose expression

increases in plaque-associated microglia[61], suggesting that perhaps AD+P stress-induced

microglial states could be triggered by neuropathology burden. Moreover, AD+P microglia

differentially upregulated canonical markers of inflammation, such as JAK-STAT pathway (e.g.

JAK3 and STAT3[62]). Interestingly, upregulation of stress and inflammatory programs in AD+P

microglia is also accompanied by well-established markers of cellular senescence (i.e. CDKN1A

which encodes the protein p21)[63] (**Supplemental Table S6**). Many reports have now identified

that exposure to tau is a potent inducer of microglial senescence[64,65]. Hence in the AD+P cortex,

microglia adopt an exhausted state that is marked by pro-inflammatory programs, possibly

reflecting a maladaptive response to persistent stress signals in the local microenvironment. This

may represent a decoupling of classical neuropathology burden from immune cell activation,

where microglia respond to subtle cues, such as altered synaptic function or tau pathology, rather

than overt plaque deposition.

While our cell fraction analysis did not capture changes in astrocytic content between AD+P and

AD-P brains, there was a non-significant trend for increased numbers of astrocytes in AD+P

subjects (**Fig. 1A**), which was similarly the case through histology of cortical gray matter using

the astrocyte marker GFAP (**Fig. 5D**) (n= 10 AD+P versus 10 AD-P; p-value = 0.076, student's t-

test). Using the nuclear stain DAPI to parse cortical layers, our quantification of astrocytes across

the cortical gray matter revealed greater levels of GFAP specifically in layer L2 of AD+P brains

(**Fig. 5E**). To further define the astrocytic response, we attempted to identify the master regulators

of this transcriptional program and build a Transcriptional Regulatory Network (TRN)[66]. Here, we

used the top GO term related to the up-regulated DEGs of "cellular response to cytokine stimulus"

and found that STAT3 showed the greatest enrichment for transcription factors (TFs) (**Fig. 5F**).

Of note, we found that STAT3 itself is upregulated in astrocytes of AD+P versus AD-P subjects

(**Supplemental Table S6**). To confirm this finding, we probed PFC human brain sections from

AD+P and AD-P subjects with fluorescent in situ RNA hybridization using RNAscope probes for

STAT3 and GFAP (**Fig. 5G**). Using this approach, we first defined astrocytes as cells bearing at

least 3 GFAP RNAscope dots, and subsequently mapped the percent of these cells that were

also double positive for STAT3. We focused this analysis specifically on layers L2 and L3 since

we had seen greater GFAP signal in the proximity of this cortical region in AD+P brains. Our

results identified a robust increase in the presence of STAT3 expression in AD+P astrocytes,

further confirming our snRNA-seq dataset (**Fig. 5G**).

To define the cellular signaling pathways that drive this response, we imputed the same list of up-

regulated DEGS into the Pathway Interaction Database (PID)[66] and found that IL6-mediated

signaling is the major driver of this STAT3 astrocytic response (**Fig. 5H**). IL-6 (Interleukin-6) is a

pleiotropic cytokine involved in the activation of the transcription factor STAT3 through JAK/STAT

signaling[67]. Of interest, the IL6ST, a gene that encodes a critical interleukin 6 cytokine family

signal transducer[67,68], is also up-regulated in AD+P astrocytes (**Supplemental Table S6**). In the

brain, IL-6 is largely produced by activated astrocytes and microglial cells[69]. Furthermore,

aberrant IL-6 signaling is known to lead to neuronal dysfunction and synaptic loss and therefore

to be correlated with cognitive decline and memory impairment in AD[70]. To test the impact of IL-

6 signaling to neuronal physiology and CDK5R1 expression, we treated organoids seeded on

multielectrode arrays (MEA) with recombinant IL-6 and recorded their activity (**Fig. 5I-5K**). Using

organoids derived from our hSYN-CheRiff optogenetic iPSC line, we first tested the ability of

optogenetic stimulation to drive population spikes following overnight incubation with 5ng/ml of

recombinant IL-6. During a 15 minute recording session, we observed a dramatic decrease in

activity in organoids with very few spikes detected upon 10Hz blue stimulation when treated with

IL-6  (**Fig. 5I** and **Fig. 5J**). It has been previously reported that IL-6 treated primary mouse neurons

accumulate abnormal levels of hyperphosphorylated tau, which is mediated through increased

levels of CDK5R1 and its encoded protein p35, the activator of CDK5 [71]. Hence, we tested the

expression of CDK5R1 in IL-6 treated organoids and found that indeed suppression of neuronal

activity is concomitant with up-regulation of CDK5R1 expression (**Fig. 5K**). Collectively, these

results point to a neuroinflammatory axis driven by IL-6 that promotes astrocyte activation and

the demise of circuit function.

**6. Epigenetic regulation of cell-type-specific gene expression changes and association**

**with Schizophrenia genetics**

To uncover the epigenetic mechanisms underlying cell-type-specific gene expression changes,

we analyzed chromatin accessibility using single-nucleus ATAC-seq (snATAC-seq) from human

postmortem brain samples of the same cohort (**Methods**). From 241,430 high-quality nuclei, we

identified epigenetic patterns across major brain cell types, including excitatory and inhibitory

neurons, astrocytes, oligodendrocytes, OPCs, microglia, and vascular cells, using promoter

signals of canonical marker genes (**Fig. 6A, Supplemental Fig. S7A**). Similar to snRNA-seq

results, nuclei were clustered primarily by cell identity in UMAP space, regardless of phenotypic

group or brain region (**Fig. 6B-C**). Cell proportion analysis revealed fewer neurons in the

hippocampus compared to the PFC (**Supplemental Fig. S7B**). Notably, PFC snATAC-seq data

captured fewer excitatory neuron nuclei than snRNA-seq data, possibly reflecting epigenetic

erosion[72] (**Supplemental Fig. S7C**).

To validate cell-type annotation in snATAC-seq, we integrated snRNA-seq and snATAC-seq data

for each brain region, in which nuclei from the same annotated cell type clustered tightly together

(**Supplemental Fig. S7D-E**). We identified accessible chromatin peaks, annotated their genomic

features, and performed GREAT enrichment analysis, which revealed cell-type-specific biological

functions (**Fig. 6D, Supplemental Fig. S7F, Supplementary Table S7**). For instance, peaks in

excitatory neurons were enriched in synaptic plasticity, trans-synaptic signaling, and ion transport

regulation. Inhibitory neuron peaks were enriched in interneuron axon guidance and fate

commitment. Astrocyte peaks were linked to Ras signaling and sensory organ development.

Oligodendrocyte peaks were associated with myelination and axon ensheathment, while

microglial peaks were enriched in immune effector processes and regulation of immune response.

These findings demonstrate that cell-type-specific epigenetic patterns reflect functional identities

and provide insights into gene expression changes in disease contexts.

To explore how epigenetic regulation influences gene expression, we linked distal peaks to

promoters using co-accessibility patterns (**Methods**). We identified 158,246 peak-to-promoter

links implicating 16,193 genes and 82,695 peaks (**Supplemental Fig. S7G, Supplementary**

**Table S8**). Motif analysis on distal peaks associated with differentially expressed genes between

AD+P and AD-P individuals identified 171 transcription factors (TFs) regulating DEGs in SF

(**Methods**). Additionally, we inferred 94 TFs whose known targets were enriched among DEGs

using enrichment analysis. By integrating these approaches with expression of TFs, we identified

30 TFs regulating upregulated DEGs in AD+P and 22 TFs regulating downregulated DEGs (**Fig.**

**6F-G**). Notably, TFs like FOS, JUND, and JUN were implicated in both upregulated and

downregulated DEGs, indicating dual regulatory roles. SPI1, a key microglial TF, was linked to

downregulated microglial genes in AD+P, suggesting potential microglial dysfunction.

We further investigated how genetics influences downstream gene expression changes. Using

Stratified Linkage Disequilibrium Score Regression (S-LDSC)[73], we evaluated the heritability

enrichment of AD and schizophrenia genetic variants in accessible peaks linked to DEGs in AD+P

(**Methods**). Schizophrenia variants were more associated with AD+P DEGs than AD variants

(**Fig. 6H, Supplemental Fig. S8H**), implying a shared genetic basis for psychotic symptoms in

AD and schizophrenia. For instance, DEGs in layers 2/3, 3/4, and 4/5 excitatory neurons in AD+P

were strongly associated with schizophrenia variants (**Fig. 6H**). Moreover, comparing DEGs

across AD vs. controls, AD+P vs. AD-P, and schizophrenia vs. controls revealed shared

downregulated DEGs in excitatory neurons between AD+P and schizophrenia (**Fig. 6I,**

**Supplemental Fig. S8I-J**). Gene Ontology analysis showed AD+P-specific downregulated DEGs

in excitatory neurons were enriched in DNA repair, TOR signaling regulation, and extracellular

transport, while upregulated DEGs were linked to gluconeogenesis, neurotransmitter secretion,

and autophagy (**Fig. 6J-K**). These findings highlight distinct molecular and cellular responses to

psychosis in AD patients.

**Discussion**

By leveraging single-nucleus transcriptomic and epigenomic profiling of postmortem brains

alongside functional validation in stem-cell-derived models, our study highlights the intricate

interplay between neuronal circuit function, glial inflammation, and metabolic vulnerability in

shaping the pathophysiology of AD+P. Nevertheless, the precise temporal sequence of these

pathological events remains unclear. Our findings lack the resolution to resolve these events as

consequences or drivers of disease manifestation. First, our profiling suggests that pre-existing

neuropathological changes, namely tau accumulation and glial inflammation, are primary drivers

of circuit dynamic changes of upper-layer pyramidal neurons. Notably, both AD-P and AD+P

subjects exhibit increased amyloid plaque burden in superficial cortical layers, which may serve

as a shared upstream trigger initiating a cascade of neuroinflammatory and neuronal responses.

This is congruent with the notion that tau pathology disrupts synaptic integrity[74], which could

secondarily enhance transcriptional programs for excitatory drive in an attempt to compensate for

declining connectivity. However, it is equally plausible that changes to neuronal activity itself may

contribute to synaptic vulnerability and the selective progression of pathology in these circuits. In

fact, it has been previously shown that optogenetically increasing neuronal activity can enhance

the release and transfer of tau and exacerbate tau pathology[75]. Notwithstanding, our results align

with previous findings demonstrating that upper-layer pyramidal neurons exhibit a transitional

hyperactive state as a response to amyloid plaques prior to degeneration in AD[76]. Interestingly,

this hyperactive state in L2 and L3 pyramidal cells of the prefrontal cortex was similarly marked

by the expression of CDK5, SYT1 and SNAP25. This supports the notion that cortical circuits

undergo maladaptive compensatory responses, perhaps as an attempt to maintain network

integrity in the face of progressive pathology.

Secondly, our data suggest that metabolic stress of interneurons may contribute to their

dysfunction, further impairing inhibitory tone and perpetuating network dysfunction. Here we

reasoned that a potential major consequence of neuronal excitability changes is the increased

metabolic burden placed on inhibitory interneurons, which must continuously buffer excessive

excitatory input. Alternatively, metabolic impairments in interneurons could be the initiating event,

leading to inability to properly regulate excitatory pyramidal neurons and thus driving

hyperexcitability and circuit dysfunction. Given that interneurons rely heavily on oxidative

metabolism, disruptions in their energy supply potentially mediated by glial inflammation or

mitochondrial dysfunction, could precipitate inhibitory failure and circuit instability[77]. Importantly,

our findings also implicates microglial exhaustion and senescence in AD+P, which could play a

critical role in driving circuit dysfunction. Microglial dysfunction, characterized in AD+P by a loss

of homeostatic gene expression and upregulation of stress and senescence markers like

CDKN1A (p21), is increasingly recognized as a contributor to impaired neuronal network

regulation. While microglial numbers and gross activation markers were unchanged through

histology of AD+P postmortem brains, the shift toward an exhausted, inflammatory state suggests

loss of microglial functional capacity. Since prior studies have linked microglial loss-of-function to

epileptiform activity[78–80], this raises the possibility that microglial senescence in AD+P

exacerbates cortical hyperexcitability. This dysfunctional glial state may contribute to the failure

of interneurons to maintain inhibitory tone, further amplifying excitatory-inhibitory imbalance and

promoting network instability. Understanding the interplay between glial dysfunction, particularly

microglial exhaustion, and interneuron vulnerability will be critical for identifying therapeutic

strategies that restore network homeostasis in AD+P.

Of note, psychosis in dementia has been increasingly linked to dysfunction in the prefrontal cortex

(PFC)[81], with our findings highlighting more pronounced transcriptional and cellular alterations in

this region compared to the hippocampus. For instance, we found nearly three times more

differentially expressed genes  in the PFC than in the Hippocampus between AD+P and AD-P.

The PFC plays a crucial role in executive function, attention, and reality monitoring, processes

that are frequently disrupted in psychotic states, making it a plausible locus for disease-related

dysfunction[82]. However, our findings are derived from an aged cohort that spans subjects from 65

to 102 years old (average age at death of 86 years old across both groups). Given that the

hippocampus is affected earlier in AD[26], it is also possible that by the time of our molecular

profiling, the most critical cellular processes contributing to psychosis had already occurred,

leaving the PFC as the dominant site of pathology at later disease stages. This raises important

questions about whether hippocampal dysfunction in earlier stages plays a fundamental role in

initiating psychotic symptoms, with the PFC becoming increasingly impacted as the disease

progresses.

Our functional studies suggest that the upregulation of CDK5R1, the regulatory subunit of CDK5,

may be driven by glial inflammatory responses in AD+P. CDK5 is a key kinase involved in

neuronal development and synaptic plasticity, but its dysregulation has also been implicated in

tau hyperphosphorylation and neurodegeneration[51]. Notably, inhibition of CDK5 has been shown

to ameliorate tau pathology and prevent neuronal loss in preclinical models of AD[83]. Given the

strong association between CDK5 activity, tau pathology, and circuit dysfunction in AD+P, our

findings suggest that CDK5 inhibitors[84,85] may hold promise for mitigating not only

neurodegeneration but also the neuropsychiatric symptoms associated with AD. Future

investigations should explore whether CDK5 inhibition can restore synaptic balance and

attenuated psychotic symptoms in preclinical AD+P models, paving the way for targeted

therapeutic interventions.

Additionally, we uncovered convergent and divergent molecular features of psychosis across

Alzheimer's disease and schizophrenia by integrating genetic risk and gene expression analysis.

Stratified LD score regression revealed that schizophrenia genetic variants were more strongly

associated with differentially expressed genes (DEGs) in AD+P than were AD variants,

suggesting a shared genetic architecture that may predispose to psychotic symptoms across

etiologically distinct disorders. These findings imply that while some neuronal vulnerabilities may

be common to psychosis broadly, potentially enabling cross-diagnostic therapeutic strategies,

other features are disease-specific and reflect the unique pathophysiological context of AD. As

such, treatment development efforts may benefit from a dual approach. For instance, targeting

core neuronal stress and synaptic dysregulation pathways shared across AD+P and

schizophrenia, while also addressing AD+P-specific mechanisms, such as metabolic vulnerability,

to achieve more tailored and effective interventions.

Collectively, our findings underscore the need for a deeper mechanistic understanding of the

molecular and genetic drivers of psychosis in dementia, an area that remains largely uncharted.

As single-cell and multi-omic technologies continue to refine our ability to map disease-associated

alterations, the field is poised to leverage this expanding molecular landscape, including datasets

like ours, for targeted therapeutic development. A particularly promising avenue is the use of

patient-derived iPSCs to model psychosis-associated circuit dysfunction, providing a controlled

platform to dissect the genetic contributions to neuronal and glial pathology. However, given the

complexity of psychiatric symptoms in dementia and our limited understanding of their genetic

underpinnings, these efforts require large-scale iPSC repositories derived from diverse patient

cohorts. With greater access to patient genetics, the generation of isogenic lines will allow for

more precise manipulation of risk variants, accelerating the discovery of disease-modifying

treatments and ultimately guiding the development of more effective therapeutics for psychosis in

neurodegenerative disease.

**Methods**

**Human postmortem brain samples**

Postmortem brain tissue samples were obtained from the neuropathology core of the University

of Pittsburgh Alzheimer's disease research center. Subjects underwent annual neurological,

neuropsychological and psychiatric evaluations as previously described [19,23,86]. An independent

committee of experienced clinicians made consensus DSM-IV diagnoses for each subject.

Psychosis was defined as the presence of delusions or hallucinations at any visit. Subjects with

a pre-existing psychotic disorder (e.g. schizophrenia) were excluded from the study.

Brain banking protocols were approved by the local Committee for Oversight of Research and

Clinical Training Involving Decedents (CORID). At the time of autopsy, the brain was bisected

and the left hemisphere fixed in formalin for subsequent diagnostic evaluation using consensus

guidelines [87–90]. The right hemisphere was dissected fresh with multiple aliquots taken from

different brain regions and frozen at -80°C.

## Nuclei isolation from frozen postmortem brain tissue for snRNA-seq and snATAC-seq

We extracted nuclei from frozen postmortem brain tissue following an adapted version of the

method described by Mathys et al. with some modifications. In brief, brain tissue was

homogenized in 700 µL of Homogenization buffer, then filtered through a 40 µm cell strainer

(Corning, NY). After adding 450 µL of Working solution, the sample was layered onto a 30%/40%

OptiPrep density gradient (750 µL of 30% OptiPrep solution and 300 µL of 40% OptiPrep solution)

to form a 25% OptiPrep solution. Nuclei were separated via centrifugation at 10,000g for 5 minutes

at 4°C using a fixed rotor tabletop centrifuge. The nuclei pellet was collected from the 30%/40%

interphase, transferred to a clean tube, washed twice with 1 mL of ice-cold PBS containing 0.04%

BSA (centrifuged at 300g for 3 minutes at 4°C), and resuspended in 100 µL of PBS with 0.04%

BSA. After counting, nuclei were diluted to a final concentration of 1000 nuclei per µL.

For single-nucleus RNA sequencing (snRNA-seq), the isolated nuclei were processed using the

10x Genomics Chromium Single-Cell 3′ Reagent Kits v3, targeting 5000 nuclei per brain region

per individual. Library preparation was carried out following the manufacturer's protocol, and

sequencing was performed using the Illumina NovaSeq 6000 S2 system (100 cycles). For single-

nucleus ATAC sequencing (snATAC-seq), the remaining nuclei were pelleted, resuspended in 1x

Diluted Nuclei buffer, and adjusted to a concentration of 2500 nuclei per µL. Library construction

was completed using the 10x Genomics Chromium Single-Cell ATAC Reagent Kit v1 according

to the manufacturer's instructions, with sequencing conducted on the NovaSeq 6000 S2 platform

(100 cycles, Illumina).

## snRNA-seq data processing

We processed raw sequencing reads by mapping them to the human reference genome GRCh38

and quantified unique molecular identifiers (UMIs) for each gene in each cell using CellRanger

v6.1.2 (10x Genomics)[91]. We then pre-processed the resulting gene-cell count matrix using

Seurat v4.4.0[92]. For quality control, we retained cells with more than 500 UMIs and less than 5%

mitochondrial genes, and included genes expressed in at least 50 cells for further analysis. We

normalized UMI counts by total counts per cell, scaled them to 10,000 UMIs per cell, and

performed log transformation. We identified the top 2000 highly variable genes for principal

component analysis (PCA) and used the top 30 principal components (PCs) to generate a UMAP

embedding. To correct for batch effects, we applied Harmony [93]. Clusters were identified using a

resolution of 0.5. To filter out potential doublets, we applied DoubletFinder [94] with default

parameters and removed cells with a doublet score above 0.2. Additionally, after clustering, we

excluded clusters expressing markers from two or more cell types, as they were likely doublets.

**snATAC-seq data processing**

We processed snATAC-seq data by first generating raw FASTQ files for each sample through

demultiplexing with cellranger-atac software(v2.0) [95]. Next, we aligned the reads to the human

reference genome (GRCh38) using "cellranger-atac count", producing fragment files for each

sample. For downstream analysis, we used ArchR (v1.0.1)[96], removing potential doublets with the

"filterDoublets" function. We retained cells with TSS enrichment >6 and fragment counts between

1,000 and 100,000 for further analysis. We performed iterative latent semantic indexing (LSI)

dimension reduction and clustering using a 500 bp tile-based matrix, setting `iterations=4`,

`resolution=0.2`, and `varFeat=50000`. We visualized cell embeddings with UMAP and generated

the gene score matrix in ArchR. Cell type annotation was based on gene scores of well-

established brain marker genes[97].

**Peak calling and differential peak analysis**

We identified chromatin accessible peaks using MACS2, following the ArchR pipeline[96,98], and

constructed a peak-by-cell matrix. To identify marker peaks for each cell type, we applied a

Wilcoxon test in ArchR, using a p-value cutoff of <0.01 and $\log_2$ fold change >0.5. We then

annotated the marker peaks with GREAT analysis[99,100] , using the basalPlusExt model and

extending 100kb upstream and downstream of each peak. For motif analysis, we expanded peaks

to 2000 bp and applied Homer with default parameters [101].

**Co-accessibility analysis**

We inferred co-accessibility between proximal and distal peaks as a proxy for peak-to-gene links,

assessing correlations between peak accessibility and gene expression. We applied the following

parameters: corCutOff = 0.3, FDR = 1e-4, upstream = 50,000 bp, downstream = 50,000 bp. The

identified peak-gene pairs were further analyzed to link distal accessible peaks with differentially

expressed genes in AD with psychosis.

**Cell proportional analysis**

We performed propeller[102] analysis to evaluate the statistical significance for compositional

differences between phenotypic groups with the consideration of the confounding variables in the

model including sex, age and TDP pathology. We used the *speckle* package in R and adjusted

p-value < 0.05 as cutoff for significance.

**Gene Ontology enrichment analysis**

We applied Enrichr in R to perform enrichment analysis for Gene Ontology biological process

(adjusted p-value < 0.05 as a cutoff)[103,104]. We selected the representative terms for visualization

manually based on the diverse functional categories and the number of genes involved in each

term.

**Immunohistochemistry of postmortem human brains**

Formalin-fixed, paraffin-embedded (FFPE) human brain tissue (prefrontal cortex) was sectioned,

mounted, and processed at the neuropathology core of the University of Pittsburgh Alzheimer's

disease research center (ADRC). Slides were deparaffinized with xylene, and then rehydrated

through a series of graded ethanol rinses (e.g., 100%, 95%, 70%) followed by a final rinse with

1xPBS before immunostaining. Sections were blocked for 1 h at room temperature (RT) in

blocking buffer (PBS containing 5% bovine serum albumin, 1% normal donkey serum and 0.3%

Triton X-100). The sections were incubated for 24 hours at 4°C with the primary antibodies in

blocking buffer. NeuN (Synaptic Systems; Cat#266 004), Vglut1 (Synaptic Systems; Cat#135

302), MAP2 (BioLegend; Cat#822501), Phospho-Tau (Ser202, Thr205)(AT8) (Thermo Fisher

Scientific; Cat#MN1020), Phospho-Tau (Ser396) (Thermo Fisher Scientific; Cat#44-752G).

Following primary antibody incubation, the sections were washed three times for 5 min each at

RT in PBS and then incubated with secondary antibodies (dilution 1:1000) for 2 h at RT. For

plaque staining, Methoxy-X04 (Tocris; #4920) was added together with secondary antibodies.

The slides were once again washed three times at RT in PBS and incubated in TrueBlack

(Biotium; Cat#23007) for 90 seconds. After a final round of washes, the slices were mounted in

Fluromount-G (SouthernBiotech; Cat#0100-01). Primary antibodies were visualized with Alexa

Fluor 405, Alexa Fluor 488, Alexa Fluor 555, and Alexa Fluor 647 antibodies (Molecular Probes),

and cell nuclei visualized with DAPI using a confocal microscope (LSM 900; Zeiss) with a 20× or

63× objective. For experiments quantifying fluorescent intensity, images were analyzed with

Imaris imaging software (Oxford Instruments).

**In situ hybridization with RNAscope in postmortem human brains**

Slides of FFPE human brain tissue corresponding to the prefrontal cortex were processed by

University of Pittsburgh ADRC and shipped to ACD Biotechne for RNAscope assays and imaging.

Brain sections were probed for human SYN1, STAT3, and GFAP and counterstained with DAPI.

Slides were imaged with a slide scanner and files shared from ACD Biotechne were quantified

with Slideviewer software from 3D Histech.

**Gene overexpression, plasmid cloning, lentivirus production**

We obtained AAV-hsyn-CheRiff-eGFP from Adam Cohen through Addgene (Plasmid #51697),

then subcloned it into a lentiviral vector carrying a second promoter PGK driving blasticidin

resistance cassette (Addgene; #666808) to create a lentiviral construct that would allow for the

generation of a stable cell line expressing neuronal-restrictived hSyn-CheRiff upon transduction

and selection with blasticidin in iPSCs prior to organoid derivation. After antibiotic selection,

colonies were confirmed to carry hSyn-CheRiff via PCR screening. For overexpression screen in

organoids, we populated a list of 51 up-regulated DEGs from L2/L3 from the following GO terms:

neuron projection morphogenesis (GO:0048812), regulation of neuron projection development

(GO:0010975), positive regulation of neuron projection development (GO:0010976), neuron

projection development (GO:0031175), and neuron projection organization (GO:0106027). Of

these, 37 were commercially available in lentiviral vectors through the plasmid repository at

DNASU (Arizona State University, dnasu.org). Received plasmids were made into lentivirus using

established protocols and as reported in Victor et al., Cell Stem Cell 2022. Organoids were

transduced separately with each virus or a control construct under the same conditions carrying

the mammalian codon optimized variant of the blue fluorescent protein, azurite (pLv-Azurite;

Addgene #36086).

**iPSC Cultures, Generation of Forebrain Organoids, and Assembloids**

Human iPSC line used in this study was derived from a healthy donor (APOE3/3 genotype) and

generated by the Picower Institute for Learning and Memory iPSC Facility as first described (Lin

et al., 2018). iPSCs were maintained at 37°C and 5% CO2, in feeder-free conditions in mTeSR1

medium (Cat #85850; STEMCELL Technologies) on Matrigel-coated plates (Cat # 354277;

Corning; hESC-Qualified Matrix). iPSCs were passaged at 60–80% confluence using ReLeSR

(Cat# 05872; STEMCELL Technologies) and reseeded 1:6 onto Matrigel-coated plates. Dorsal

forebrain organoids were generated using a previously established protocol (Sloan et al., 2018)

with an adapted iPS seeding strategy (Marton et al., 2019), as described previously in Victor et

al., Cell Stem Cell 2022. After 60 days of culture, organoids were transduced with lentivirus or

AAVs and cultured separately for an additional 2 weeks. Next, pairs of organoids with desired

infected constructs were moved to microcentrifuge tubes and allowed to fuse for 24 hours to

generate assembloids. Following fusion, assembloids were cultured separately in untreated glass

bottom 24-well microplates (Cat #82421; Ibidi) and fed every 3-4 days with experiments starting

approximately at 90 days in vitro.

**Calcium Reporter, Imaging, and Optogenetic Stimulation**

Organoids were infected with pAAV.Syn.GCaMP6s.WPRE.SV40 (Cat#100843-AAV1; Addgene)

while temporarily plated in 24-well plates (3-4 organoids per well) with 20ul of viral prep (100 µL

at titer ≥ $1 \times 10^{13}$ vg/mL). After overnight incubation with virus, organoids were returned to ultra-low

attachment 10cm dishes. Typically within 12-14 days calcium dynamics were easily detectable.

For experiments with AAV Axonal GCaMP6s, a similar protocol was followed but with pAAV-

hSynapsin1-axon-GCaMP6s (Plasmid #111262). For calcium imaging, live-imaging was

performed with Zeiss LSM900 equipped with a heated chamber kept at 37 C with humidity and

$CO_2$ control. Images were processed and analyzed as described previously (Victor et al., Cell

Stem Cell 2022). Calcium traces from motion-corrected time series were manually segmented on

ImageJ into individual cells based on threshold intensity, variance, and upper and lower limits for

cell size. Image segmentation results were separately inspected for quality control. Fluorescence

signal time series (DF/F: change in fluorescence divided by baseline fluorescence) were

calculated for each segment. The baseline fluorescence for each cell was determined as the

minimum fluorescence signal in the baseline recording epoch. For GCaMP-tagged neurons, The

onset of a calcium transient occurred when DF/F exceeded two standard deviations above the

baseline fluorescence. The termination of a calcium transient was identified as occurring when

DF/F fell below 0.5 standard deviations above the baseline fluorescence. We defined a

multicellular ensemble events when the number of simultaneously active cells exceeded 60% of

all cells. For CheRiff-GCaMP6s assembloid screen, optogenetic stimulation and calcium imaging

were coupled and acquired using low magnification 2.5x objective to scan the entire assembloid

structure. For experiments with chronic optogenetic stimulation, custom LED tissue culture plates

were outfitted under the control of an Arduino board and stimulation carried out for 200ms at 10Hz

every 2 minutes for 48 hours. Heatmaps were generated using GraphPad Prism (GraphPad

Software).

**Patch-Clamp Electrophysiology**

Whole-cell patch-clamp recordings of neurons were performed at 6 to 8 weeks after NGN2

induction from hSyn-CheRiff iPSC line. Intracellular recordings were performed at room

temperature using an Axon CV-7B headstage, Multiclamp 700B amplifier, and Digidata 1440A

digitizer (Molecular Devices). Electrode pipettes were pulled from borosilicate glass on a Model

P-97 Flaming/Brown micropipette puller (Sutter Instrument) and ranged between 4–7 MΩ

resistance. Intrinsic neuronal properties were studied using the following solutions (in mM):

Extracellular: 125 NaCl, 2.5 KCl, 1.2 NaH2PO42H2O, 1.2 MgCl26H2O, 2.4 CaCl22H2O, 26

NaHCO3, 11 glucose (pH 7.4). Intracellular: 135 K-gluconate, 5 KCl, 2 MgCl26H2O, 10 HEPES,

2 Mg-ATP, 0.2 Na2GTP (pH 7.2). Membrane potentials were typically kept at -70 mV. In current-

clamp mode, action potentials were elicited by photostimulation with blue light. Data was first

collected and analyzed using pCLAMP 11 software (Molecular Devices).

**MEA Recordings**

Intact organoids were plated onto Poly-D-Lysine (Cat#P6407-10X5MG; Sigma-Aldrich) coated

wells of a CytoView MEA 48-well plate (Cat#M768-tMEA-48B; Axion BioSystems) and covered in

a Matrigel droplet (Cat # 354277; Corning) to anchor the organoid. After 15–30 min in 37 C,

droplets were flooded with warm BrainPhys Medium (Cat#05790; STEMCELL Technologies) and

allowed to recover for at least four weeks before recording sessions. A recording session

preceded the 5ng/ml IL-6 treatment, denoted as baseline recording. For optogenetic stimulation,

organoids were pulsed continuously at 6Hz with blue light. All extracellular recordings were

performed using the Axion Maestro Pro MEA system (Axion Biosystems). Spontaneous neural

activity was recorded for 15 min at a sampling rate of 12.5 kHz, and an adaptive threshold set at

5.5 times the standard deviation of baseline noise was used for spike detection. Electrodes were

defined as active if neuronal firing occurred at a minimal rate of 5 spikes/min. For MEA data

analysis, only wells containing a minimum of 3 active electrodes were included. Neuronal firing

metrics were exported as the averages from each well from Axion Biosystems' Neural Metrics

Tool and plotted with Prism GraphPad (GraphPad Software). For optogenetic stimulation, custom

blue LED panels were adapted to fit the Axion Maestro Pro and delivered under the control of an

Arduino board at 6Hz.

**Gene Expression analysis with qPCR**

RNA extraction for qPCR analysis was performed with RNeasy Plus Mini Kit (Cat# Cat#74134;

Qiagen), and reverse transcription was performed with RNA to cDNA EcoDry Premix (Cat#

Cat#639549; Takara) according to the manufacturer's instructions. Gene expression was

analyzed with Real-Time PCR (CFX96; Bio-Rad) and SsoFast EvaGreen Supermix

(Cat#1725202; Bio-Rad). Expression data was normalized to house-keeping gene GAPDH using

the 2 DDCT relative quantification method. CDK5R1 expression was assessed with primers (5' -

> 3'): Forward - AGAACAGCAAGAACGCCAAG and Reverse - CGGCCACGATTCTCTTCCA.

Housekeeping primers for GAPDH (5' -> 3'): Forward - AGAAGGCTGGGGCTCATTTG and

Reverse - AGGGGCCATCCACAGTCTTC.

**Identification of differentially expressed genes between AD with and without psychosis**

We applied two methods (one single-cell based method, MAST, and a single-cell based method

edgeR) to detect the differentially expressed genes for each cell type between AD with and without

psychosis individuals per brain region. We controlled the covariates for both methods, including

percentage of mitochondrial genes, percentage of ribosomal genes, age, sex, PMI, and TDP

pathology. The genes with FDR <= 0.05 for MAST and p-value <= 0.05 for edgeR were selected

for further analysis. We found the DEGs were highly consistent between two methods.

**Prediction of upstream transcription factors**

We inferred the upstream transcription factors of genes (marker genes or DEGs) using Enrichr in

R for the enrichment-based analysis based on three libraries including TRANSFAC and JASPAR,

ChEA, and ENCODE TF ChIP-seq data [66,105,106]. We used adjusted p-value <0.05 as a cut-off to

select the significant TFs. For motif-based analysis, we linked the DEGs to distal peaks using the

peak-to-gene links represented by co-accessible peaks and then performed motif analysis by

expanding the peaks to 2000bp with the default parameters in Homer [101]. We kept the TFs with

detected expression (average expression > 1 after log2 transformation) in relevant cell types for

further analysis.

**LDSC Heritability Enrichment Analysis**

We applied Stratified Linkage Disequilibrium Score Regression (S-LDSC)[73] to evaluate the

heritability enrichment of genetic risk for Schizophrenia and AD within DEGs related accessible

chromatin regions. To focus on functionally relevant elements, we first identified distal accessible

peaks linked to DEGs in AD+P individuals by leveraging co-accessibility between promoter and

distal regulatory regions. For these DEG-linked peaks, we generated binary annotation files

indicating whether each SNP overlapped with an accessible region. To account for genetic

variants in linkage disequilibrium (LD) and address the sparsity of variant annotations, we

extended annotated regions by 1000 bp to both directions. We formatted these annotations

according to the standard S-LDSC pipeline and computed LD scores using the 1000 Genomes

Project Phase 3 European reference panel. We then estimated partitioned heritability with publicly

available Schizophrenia and AD GWAS summary statistics[107,108], which include SNP-level effect

sizes and standard errors. We defined enrichment as the proportion of heritability explained by

SNPs within accessible peaks relative to the proportion of SNPs in those peaks. A significant

enrichment suggests that disease-associated variants are preferentially located within regulatory

elements specific to the cell types under investigation.

**Figure Legend**

**Figure 1. snRNA-seq atlas of PFC and hippocampus from AD patients with psychosis. A.**

Experimental design and UMAPs of 160,875 nuclei with annotated cell types in snRNA-seq data.

The three UMAPs on the left show the high-resolution of cell types in excitatory neurons, inhibitory

neurons and vasculature. **B.** Dotplot shows the expression of well-known marker genes for major

cell types in the human brain. The color represents the expression level and the size of the dot

represents the percentage of cells with expression. **C.** Cell fraction distribution of major cell types

in AD w/wo psychosis. Propeller analysis to determine the statistical significance highlighted with

*. **D.** Cell fraction distribution of excitatory neuron subtypes in AD w/wo psychosis. Propeller

analysis to determine the statistical significance highlighted with *, (n= 24 AD-P and 24 AD+P;

see Table S1 for patient manifest). **E.** Immunostaining for the neuronal marker NeuN, stratified

by cortical layer based on nuclear density of DAPI (n= 10 AD-P and 10 AD+P). Two-Way ANOVA

with Bonferroni post-hoc test. ns= not significant, *p-value <0.05. **F.** Immunostaining for the

excitatory neuronal marker VGLUT1 as counterstain for the amyloid plaque stain, Methoxy-X04.

Plaque density mapped across cortical layers (n=20 AD-P and AD+P combined). No overall

significant difference in PFC, but near-significant trend for increased plaques in layer L4 based

on Two-Way ANOVA with Bonferroni post-hoc test; plotted separately for panel only. **G.**

Immunostaining for MAP2, Methoxy-X04 and phospho-tau (pTau, AT8). pTau density across

cortical layers for AD-P and AD+P. **H.** Overall increase in pTau density in PFC (n= 10 AD-P and

10 AD+P); Student's t-test, *p-value <0.05.

**Figure 2. Cell-type-specific and brain-region-specific transcriptional changes in AD with**

**psychosis. A.** Heamaps show the log fold change of up-regulated and down-regulated genes

per cell type in prefrontal cortex (SF). The top 5 DEGs per cell type are highlighted on the right

side of the heatmap. **B.** Heamaps show the log fold change of up-regulated and down-regulated

genes per cell type in hippocampus (AH). The top 5 DEGs per cell type are highlighted on the

right side of the heatmap. **C.** The comparison of DEGs in AD+P between AH and SF per major

cell type. Six groups of genes represent up-regulated and down-regulation sharing by two regions

or unique to one region. For each heatmap, the left half shows whether the DEGs are significant

(1 or 0) and the right half shows the real log fold change to present whether the change suggests

the same direction between two regions. **D.** Significantly enriched and representative Gene

Ontology (GO) terms in excitatory neurons binned in six groups based on shared or unique

expression across brain tissue.

**Figure 3. Upregulation of Synaptic-Related Genes is a Compensatory Mechanism Evoked**

**by Surviving Excitatory Neurons. A.** Heatmap of DEGs in GO terms related to synaptic

transmission, neurotransmitter signaling, neuronal development and neuronal projection

morphogenesis across cortical layers. **B.** Histology of PFC human brain sections with H&E

(hematoxylin and eosin) staining and fluorescent in situ RNA hybridization using an RNAscope

probe for synapsin 1 (SYN1) from AD+P (n=3) and AD-P (n=3) subjects. **C.** Quantification of

RNAscope dots per nucleus for a given SYN1-positive neuron (comprising at least 3 SYN1 dots)

increased in AD+P across cortical layers. *p-value <0.05, multiple t-tests adjusted for false

discovery rate. And in Layers L2/L3. **D.** Higher magnification insets of layers L1, L2 and L3 with

SYN1 probe in green and DAPI in blue. **E.** Percentage of cells SYN1-positive ( at least 3 SYN1

dots) in cortical layers L2 and L3 were significantly reduced in AD+P. (n=averages of 3 subjects

per group). *p-value <0.05, **p-value <0.01, Student's t-test. **F.** Cell fraction analysis from PFC

snRNA-seq of inhibitory interneurons. n= 24 subjects per group of snRNA-seq. Propeller analysis

to determine statistical significance. **G.** Top GO terms from AD+P DEGs of Parvalbumin (PV)-

positive cells.

**Figure 4. Functional Characterization of AD+P DEGs from Upper-Layers Excitatory**

**Neurons in iPSC-derived Brain Organoids. A.** Outer surface of an organoid derived from an

iPSC line that constitutively expresses the channelrhodopsin variant CheRiff under the neuronal-

restrictive   promoter   human   Synapsin   (hSyn-CheRiff).   **B.**   Whole-cell   patch-clamp

electrophysiology of iPSC-derived neurons harboring hSyn-CheRiff paced at 5Hz and 10Hz with

blue light stimulation. **C.** AAV Axonal GCaMP6s infected organoids were fused with non-infected

organoids to generate assembloids. Neuronal activity was assessed via calcium-imaging at the

assembloid junction line, and calcium traces are shown for axonal spikes as the change in

fluorescence over baseline fluorescence (ΔF/F). **D.** Assembloid input-output connectivity model

with optogenetic stimulation to drive neuronal activity in one hemisphere and calcium imaging to

readout for neuronal activity in the other hemisphere. **E.** Live-imaging of assembloids showing

high-amplitude calcium events in the contralateral organoid. Color gradient represents minimum

(purple) and maximum (yellow) levels of calcium amplitude. **F.**  Rasterplot showing highly

coordinated ensemble calcium activity dynamics. Change in fluorescence shown as Delta F/F. **G.**

Assembloid quantification of contralateral calcium dynamics in response to optogenetic

stimulation to the ipsilateral organoid overexpressing 37 genes from up-regulated DEGs in AD+P

pyramidal upper-cortical layer neurons (L2 and L3) from snRNA-seq data. Data was ranked and

binned into 3 groups (increased activity, no change, or reduced activity) based on Two-Way

ANOVA with Bonferroni post-hoc test results. Calcium traces from the time series were manually

segmented on ImageJ into individual cells based on threshold intensity results in n=15-88

neuropils per organoid and plotted for maximum amplitude. Control assembloids were transduced

with a lentiviral vector encoding the blue fluorescent protein EBFP. **H**. Quantification of EGFP

intensity on the contralateral organoid that traversed the assembloid junction line from hSyn-

CheRiff ipsilateral organoid ranked from least to most fluorescent intensity. **I**. Representative

image of hSyn-CheRiff across junction line from control and CDK5R1 overexpressing assembloid.

**J.** Calcium dynamics in organoids 14 days post infection with CDK5R1 or EBFP lentivirus.

Student's t-test, *p-value <0.05, n= 5 organoids per group. **K**. Quantification of phospho-Tau

(pTau) fluorescence levels in organoids infected with CDK5R1 or EBFP controls. Student's t-test,

**p-value <0.01, n= 3 organoids per group. **L**. Immunohistochemistry in postmortem brains

showing increased CDK5R1 fluorescent intensity in PFC (n= 10 AD-P and 10 AD+P); Student's

t-test, *p-value <0.05.

**Figure 5. Glial Response in AD+P PFC is Marked by Microglial Exhaustion and Astrocyte-**

**Driven Inflammation. A.** Representative GO terms for microglia and astrocytes from PFC DEGs.

**B.** Histology for microglia-marker P2RY12 in PFC. Student's t-test, ns= not significant, n= 10 AD-

P and 10 AD+P. **C.** Volcano plot for up and down-regulated genes in AD+P PFC microglia. **D.**

Immunofluorescence with the atrocyte-marker GFAP quantified across PFC cortical layers and

white matter (wm) normalized per area. Student's t-test, ns= not significant, n= 10 AD-P and 10

AD+P postmortem brains. **E.** GFAP quantification binned by cortical layers. Two-Way ANOVA

with Bonferroni post-hoc test. ns= not significant, **p-value <0.01, n= 10 AD-P and 10 AD+P

postmortem brains. **F.** Transcriptional Regulatory Network (TRN) from astrocyte top GO term

"cellular response to cytokine stimulus". **G**. RNAscope for STAT3 and GFAP. (n= 3 AD-P and 4

AD+P); Student's t-test, *p-value <0.05. H. Ranked Pathway Interaction Database (PID)

Pathways. **I.** hSyn-CheRiff organoid seeded on multielectrode array (MEA) and raw traces from

recordings of the same organoid at baseline and after 5 ng/ml of IL-6. **J.** Paired t-test, n= 7

organoids recorded at baseline and again following overnight incubation with IL-6, *p-value <0.05.

**K.** qPCR for CDK5R1 following treatment of 5 ng/ml of IL-6. (n= 4 organoids per group); Student's

t-test, **p-value <0.01.

**Figure 6. Epigenetic regulation of cell-type-specific gene expression changes and their**

**association with genetics. A-C.** UMAPs of 241,430 nuclei in snATAC-seq data with annotated

cell types (**A**), brain regions (**B**) and pathological groups (**C**). **D.** GREAT enrichment analysis for

cell type specific peaks to show the function relevance with certain cell types. The color represents

the log2 fold change and the size of dots represents the significance. **E**. The diagram to show the

co-accessible gene-peak pairs and their applications in TF identification and genetic association

analysis by LDSC. TF enrichment for up-regulated DEGs and down-regulated DEGs per cell type.

The dotplot shows the motif enrichment significance by color and TF-target enrichment

significance by size of dots. **F.** AD+P DEGs linked chromatin accessible peaks show the

heritability enrichment of genetic variants implicated for Schizophrenia using S-LDSC analysis.

The barplot shows the enrichment score, where pink ones represent nominally significant cell

types. The -log10 of p-value is shown by the blue point. The red dash line represents the stringent

threshold with p-value < 0.01.**G**. Representative Gene Ontology terms enriched in AD+P unique

down-regulated DEGs. **H**. Representative Gene Ontology terms enriched in AD+P unique up-

regulated DEGs. **I**. The UpSet plot shows the overlap of DEGs between Alzheimer's Disease

(AD), Schizophrenia (Sz) and AD+P (ADP). The pink bars show the significant intersections. The

blue and red bars show the AD+P specific down-/up-regulated DEGs.

<u>**Supplementary Figure Legend**</u>

**Figure S1. Histology for Neuropathological Changes in AD-P and AD+P.** An additional cohort

of postmortem human brain tissue from 20 subjects (n= 10 AD-P and 10 AD+P). Error bar

represents the SEM. Two-way ANOVA with Bonferroni's multiple comparison test.

**Figure S2. Cell Fraction Analysis for Anterior Hippocampus in AD-P and AD+P.** Propeller

analysis was used to determine statistical significance. Error bar represents the SEM.  ns= not

significant. n= 24 AD+P and 24 AD-P postmortem human brain tissue. AH: Anterior Hippocampus.

**Figure S3.Transcriptional Changes in AD with Psychosis. A-B.** Scatter plot to show the

consistency of transcriptional changes identified by two methods in SF (**A**) and AH (**B**). The X-

axis represents the coefficient calculated by MAST, while the Y-axis represents the log

transformed fold change calculated by edgeR.

**Figure S4. Gene Ontology (GO) for Transcriptional changes in AD with psychosis.**

Representative Gene Ontology from significantly enriched terms for five cell types.

**Figure S5. GO Terms from PFC DEGs in Excitatory and Inhibitory Neuronal Subtypes.** Top

10 terms for excitatory neurons catalogued by layer (L2/L3, L4 and L5) and inhibitory neurons

catalogued by cell type (VIP+, PV+ or SST+ interneurons).

**Figure S6. CAMK2B Overexpression Renders Forebrain Organoids Vulnerable to**

**Excitotoxicity. A.** Custom LED Tissue Culture Plate. **B-C**. Diagram of experimental design **D**.

Stimulation protocol. **E**. Control organoids were tagged with pLenti CMV-EBFP. **F**. Organoids

tagged with AAV hSYN-RFP before (baseline) and after stimulation (post-stim) and quantified

(**G**). Paired t-test; **p-value<0.01, ns= not significant. n=10 control and 10 CAMK2B

overpressing organoids).

**Figure S7. Epigenetic Regulation of Cell-type-specific Gene Expression Changes. A.**

Dotplot shows the gene activity score of well-known marker genes for major cell types in the

human brain in snATAC-seq data. The color represents the activity level and the size of the dot

represents the percentage of cells with activity. **B**. The composition of major cell types in snATAC-

seq data in two brain regions, AH and SF. **C.** The comparison of cell fractions captured by

snATAC-seq and snRNA-seq data in two brain regions. **D-E**. UMAPs to show the integrative

analysis of snATAC-seq and snRNA-seq data in two brain regions. The UMAP on the left

represents the joint map, and the right panel represents the nuclei from single modality. The nuclei

were colored by major cell types. **F.** The number of peaks per cell type and union set, colored by

their genomic locations (distal, exonic, intronic or promoter regions). **G**. The heamap to show the

links between distal peak to promoter peaks, representing the co-accessbility between distal

enhancer and promoter. Each row represents one link and each column represents randomly

selected nuclei (500 in total for visualization). The left panel represents the activity in snATAC-

seq, and the right plan represents the gene expression. Z-score values were used. Most of the

links were cell-type specific.

**Figure S8. Cell-type-specific Gene Expression Changes and their Association with**

Schizophrenia Genetics. **H.** AD+P DEGs linked chromatin accessible peaks show the less enrichment of genetic variants of AD using LDSC analysis. The barplot shows the enrichment score, where pink ones represent the significance. The -log10 of p-value is shown by the blue point. The red dash line represents the stringent threshold with p-value < 0.01. **I-J**. The UpSet plot shows the overlap of DEGs in inhibitory neurons (**I**) and glial cell types (**J**) between Alzheimer's Disease (AD), Schizophrenia (Sz) and AD+P (ADP).

## Supplementary Tables and Movies

**Table S1. Patient Manifest for snRNA-seq and snATAC-seq.**

**Table S2. Patient Manifest for Histology Experiments.**

**Table S3. Prefrontal Cortex (PFC) DEGs.**

**Table S4. Anterior Hippocampus (AH) DEGs.**

**Table S5. PFC Neuronal GO Terms.**

**Table S6. PFC Non-Neuronal GO Terms.**

**Table S7. GREAT Analysis.**

**Table S8. Peak-to-Gene Links.**

**Movie S1. Axonal GCaMP at Assembloid Junction Line.**

**Movie S2. Representative CheRiff-GCaMP Assembloid.**

**Movie S3. Functional Screen for L2/L3 DEGs on Assembloids**

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**Data and code availability**

The dataset generated in this study will be made publicly available upon publication. Additional

supporting datasets are available from the corresponding author upon reasonable request. All

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**Author contributions**

M.B.V, N.S., R.A.S., L.-H.T., and M.K conceived and designed the study; R.A.S., M.K. and L.-

H.T. supervised the study; J.K.K. supervised histological experiments, guided data interpretation, and collaborated in study design; N.S. developed the computational framework and conducted data analysis with assistance from Y.T.; M.B.V., N.L., A.N.S., and S.P. performed in vitro experiments and analyzed results; K.G., H.M., X.J., L.-L.H. and A.P.N. performed snRNA-seq and snATAC-seq profiling; L.L. performed electrophysiology analysis; N.S., J.K.K. and M.B.V wrote methods; R.A.S. and J.K.K. provided postmortem samples and scientific input; and M.B.V, N.S., R.A.S., L.-H.T. and M.K. wrote and revised the manuscript.

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**Figure 1. snRNA-seq atlas of PFC and hippocampus from AD patients with psychosis.**

**Figure 2. Cell-type- and brain-region-specific transcriptional changes in AD with psychosis.**

**Figure 3. Upregulation of synaptic-related genes is a compensatory mechanism evoked by surviving excitatory neurons.**

**Figure 4. Functional Characterization of AD+P DEGs from Upper-Layers Excitatory Neurons.**

**Figure 5. Glial response in AD+P PFC is marked by microglial exhaustion and astrocyte-driven inflammation.**

**Figure 6 Epigenetic Regulation of Cell-Type-Specific Gene Expression Changes and Their Association with Schizophrenia Genetics.**