SAMHD1 promotes SARS-CoV-2 infection by enhancing HNF1-dependent ACE2

expression in lung epithelial cells

Short title: SAMHD1 promotes SARS-CoV-2 entry via HNF1-dependent ACE2 expression

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Keywords: SAMHD1, SARS-CoV-2, replication, entry, HNF1, ACE2, Calu-3 cells

Manuscript information:

• 9 main figures, 5 supplementary figures, and 5 supplementary tables

• 258 words in the abstract and 150 words in the author summary

Abstract

Sterile alpha motif and HD domain-containing protein 1 (SAMHD1) restricts a board

spectrum of viruses through multifaceted mechanisms. It also limits spontaneous- and virus-

induced innate immune responses by suppressing proinflammatory cytokine and type-I interferon

(IFN-I) production. Some viruses escape SAMHD1 restriction by utilizing SAMHD1-mediated

innate immune suppression to establish effective infection through viral antagonism. Our previous

studies showed that SAMHD1 is a proviral factor facilitating replication of severe acute respiratory

syndrome coronavirus (SARS-CoV-2) in human macrophages, monocytic THP-1 and epithelial-

like HEK293T cell lines by suppressing IFN responses. However, it is unclear about the function

of SAMHD1 in lung epithelial cells during SARS-CoV-2 infection. Here, we report that SAMHD1

facilitates SARS-CoV-2 replication in lung epithelial Calu-3 cells by enhancing endogenous

expression of the viral receptor angiotensin-converting enzyme 2 (ACE2) via hepatocyte nuclear

factor 1-alpha (HNF1α) and HNF1β. Using pseudotyped SARS-CoV-2 and lentiviral vectors, we

found that SARS-CoV-2 spike protein-mediated viral entry was suppressed in Calu-3 cells with

SAMHD1 knockout (KO). SAMHD1 KO repressed ACE2 expression in Calu-3 cells at mRNA and

protein levels. Functional analyses revealed that HNF1α and HNF1β were crucial for the

endogenous ACE2 expression in Calu-3 cells. Additionally, SAMHD1 KO led to a reduction in the

expression levels and ACE2-promoting function of HNF1α and HNF1β. Inhibition of IFN antiviral

response by baricitinib, a Janus kinase 1 and 2 (JAK 1/2) inhibitor, did not revert the suppression

of SARS-CoV-2 in SAMHD1 KO Calu-3 cells. Our findings demonstrate that SAMHD1 facilitates

HNF1-mediated ACE2 expression and SARS-CoV-2 replication in Calu-3 cells via a novel

mechanism beyond its IFN-suppressive function.

Author Summary

During viral infection, SAMHD1 acts as a viral restriction factor and a suppressor of the innate

immune system, controlling viral replication while also ensuring immune homeostasis. The innate

immune suppressive function of SAMHD1 can be proviral for some viruses. SAMHD1 has been

shown to facilitate SARS-CoV-2 infection in human macrophages, THP-1 and HEK293T cell lines

by promoting IFN antagonism, but its role in lung epithelial cells is unclear. Here, we demonstrated

that SAMHD1 promotes SARS-CoV-2 replication in human lung epithelial Calu-3 cells by

enhancing expression of the major viral receptor ACE2. We found that SAMHD1 facilitated HNF1-

medaited ACE2 expression that was required for spike protein-mediated SARS-CoV-2 entry.

However, inhibiting IFN signaling in SAMHD1 KO Calu-3 cells was not sufficient to revert SARS-

CoV-2 replication. Our findings shed light on the differential proviral function of SAMHD1 in ACE2

expressing cells and suggest that SAMHD1 can facilitate SARS-CoV-2 infection beyond

enhancing IFN antagonism.

Introduction

SAMHD1 is the only deoxynucleoside triphosphohydrolase (dNTPase) of mammalian cells

to be a restriction factor against human immunodeficient virus type 1 (HIV-1) infection in resting

CD4$^+$ T cells and terminally differentiated immune cells, such as macrophages and dendritic cells

[1-3]. Increasing evidence suggests that SAMHD1 restricts different viruses including human T

cell leukemia virus type 1 [4], DNA viruses such as herpesviruses (herpes simplex virus 1, human

cytomegalovirus and Epstein-Barr virus), hepatitis B virus, human papillomavirus and poxviruses

[5-10] as well as RNA viruses including influenza A virus, enteroviruses, and flaviviruses [11-13].

The viral restriction functions of SAMHD1 encompass both dNTPase-dependent and -

independent mechanisms according to the target virus and the contexts of the host cells such as

cell type, differentiation status, IFN-I response and the expression of other host restriction factors

that cooperate with SAMHD1 in cells [14].

SAMHD1 suppresses innate immune responses [15]. Loss-of-function mutation of SAMHD1

correlates with the development of the Aicardi-Goutières syndrome which is an autoimmune

disease implicating central nervous system [16]. SAMHD1 prevents spontaneous activation of

innate immune responses to self-RNA and self-DNA species that respectively activate retinoic

acid-inducible gene I (RIG-I)-like receptor signaling and cyclic GMP-AMP synthase (cGAS)-

stimulator of interferon genes (STING) signaling [17-24]. Similarly, SAMHD1 prevents

inflammation- or virus-induced innate immune responses [25, 26]. SAMHD1 suppresses pattern

recognition receptor signal pathways by interacting with various signal proteins such as

mitochondrial antiviral-signaling protein (MAVS), inhibitor of nuclear factor kappa-B kinase subunit

alpha (IKKα), IKKβ, IKKε as well as transcription factors including p100 and p105 in the NF-κB

pathway which drives proinflammatory cytokine expression and interferon regulatory factor 7

(IRF7) which promotes IFN-I expression [25, 27, 28].

SARS-CoV-2 caused the COVID-19 pandemic, claiming more than 7 million lives worldwide

[29, 30]. SARS-CoV-2 suppresses IFN antiviral responses through multiple strategies to facilitate

viral infection [31]; however, the precise mechanisms remain to be elucidated. Previously, we

reported that SARS-CoV-2 infection was suppressed upon depletion of SAMHD1 expression in

HEK293T, differentiated THP-1 cells, and primary human macrophages [32]. Suppression of IFN

signaling of SAMHD1-defective HEK293T cells by baricitinib, a JAK1/2 inhibitor, alleviated the

repression of SARS-CoV-2 replication, suggesting that SARS-CoV-2 exploits SAMHD1 for IFN

antagonism, thereby facilitating its infection [32]. It remains to be determined if SAMHD1-

mediated immunosuppression promotes SARS-CoV-2 replication in the primary target cell type,

such as epithelial cells expressing the major viral entry factors ACE-2 and transmembrane

protease, serine 2 (TMPRSS2) [33, 34].

In this study, we found that SAMHD1 KO in Calu-3 cells conferred resistance to SARS-CoV-

2 infection, independent of IFN signaling, by reducing the expression of transcription factors

HNF1α and HNF1β, which in turn lowered ACE2 levels and inhibited S-mediated viral entry. Our

findings shed light on a novel function of SAMHD1 in upregulating ACE2 expression to facilitate

SARS-CoV-2 infection in human lung epithelial cells.

Results

Generation and characterization of stable SAMHD1 KO Calu-3 cell lines

To generate SAMHD1 KO Calu-3 cells, CRISPR/Cas9 technology based on the

lentiCRISPRv2 system was employed [35]. Two target sequences of the single guide RNAs

(sgRNAs) were obtained from CHOPCHOP v3 with no off-target effect at less than four

mismatches [36]. With sgRNA 1 and sgRNA 2, the *Streptococcus pyogenes* Cas9 nuclease

(SpCas9) was targeted to the SAMHD1 gene, resulting in cleavage sites that encode ^{11}Lysine and

^{150}Leucine, respectively (Fig. 1A). ^{11}Lysine was the first residue of the nuclear localizing signal

(NLS) of SAMHD1 protein and ^{150}Leucine was in the HD domain before the dNTPase active site.

Calu-3 cells were transduced with the lentiviral vectors, selected by puromycin and clonal

purified with limiting dilution. Several purified cell clones were obtained and tested for SAMHD1

protein expression (Fig. 1B). We obtained clone 4 and clone 3 of the respective cell populations

treated with sgRNA1 or sgRNA2 having the lowest expression of SAMHD1 compared with the

Ctrl clones (Fig. 1B). Therefore, clone 1 of the Ctrl population, clone 4 of the sgRNA1-treated

population and clone 3 of the sgRNA2-treated population were used for the subsequent study

and named Ctrl, KO1 and KO2, respectively.

The genomic DNA sequences at the SpCas9 cleavage sites of KO1 cells (Fig. S1A) and KO2

cells (Fig. S1B) were obtained through sanger sequencing and compared with Ctrl cells. We found

that a single nucleotide insertion occurred near the SpCas9 cleavage sites, which frameshifted

the SAMHD1 coding sequence thereafter (Red arrows, Fig. S1A and S1B). It was noted that

multiple signal peaks were observed after the SpCas9 cleavage sites of KO1 and KO2 which may

indicate the existence of more than one mutant in the clonal purified population.

To confirm whether SAMHD1 KO functionally affected intracellular dNTP levels, cellular

dATP levels were measured (Fig. S1C) as an example [37]. We found that the mean values of

the intracellular dATP levels of KO1 and KO2 were 8.9- and 7.8- fold more than that of the Ctrl

cells (Fig. S1C). This result suggests that KO1 and KO2 were deprived of dNTPase activity of

SAMHD1.

SAMHD1 depletion may enhance innate immune response even in the absence of extrinsic

stimuli depending on cell types [19, 24, 25, 32, 38-40]. To examine if SAMHD1 KO promoted

innate immune responses of Calu-3 cells, the mRNA levels of proinflammatory cytokine *IL-6* as

well as *IFNβ* and two IFN-stimulated genes (ISGs) *OAS1* and *ISG15* of KO1 and KO2 were

detected by RT-qPCR and compared with Ctrl cells (Fig. 1C). We found that KO1 and KO2 cells

constitutively expressed higher levels of IL-6 in the absence of any extrinsic stimuli. Interestingly,

we found that the expression levels of *IFNβ*, *OAS1* and *ISG15* were significantly upregulated in

KO2, but not in KO1 clone (Fig. 1C). Thus, SAMHD1 KO promoted proinflammatory cytokine

production from Calu-3 cells in both KO1 and KO2 clones, while strong constitutive IFN-I response

was only observed in KO2 clone.

SAMHD1 promotes SARS-CoV-2 replication independent of IFN signaling

To test if SAMHD1 affected SARS-CoV-2 replication in Calu-3 cells, kinetics of ancestral

SARS-CoV-2 (Wuhan-Hu-1) replication was examined in Ctrl, KO1 and KO2 cells. We found that

the kinetics of infectious virus production was suppressed in both KO1 and KO2 (Fig. 2A) despite

only KO2 cells having a higher constitutive IFN-I response than Ctrl cells (Fig. 1C). Similarly,

significant suppression of the levels of released viral genome was observed in both KO1 and KO2

clones (Fig. 2B). The expressions of intracellular viral nucleoprotein (N) and spike protein (S) were

significantly reduced in the infected KO1 and KO2 cells (Fig. 2C). Moreover, intracellular viral RNA

levels were suppressed in the infected KO1 and KO2 cells which did not produce higher levels of

IFNβ, IFNλ or OAS1 in response to SARS-CoV-2 infection (Fig. 2D). To confirm if IFN signaling

contributed to the hindered replication of SARS-CoV-2 in SAMHD1 KO Calu-3 cells, infected cells

were treated with or without baricitinib to test if suppressing IFN signaling can rescue SARS-CoV-

2 replication in KO1 and KO2 cells. We found that baricitinib did not rescue SARS-CoV-2

replication in Calu-3 cells in terms of released infectious viral titer (Fig. 2E), intracellular viral N

protein (Fig. 2F), and intracellular viral *N* mRNA, although baricitinib efficiently suppressed virus-

induced *OAS1* expression in Ctrl and KO2 cells (Fig. 2G) as well as virus-induced protein

expression of STAT1 and Ser727-phosphorylated STAT1 (Fig. 2F). Therefore, SAMHD1

expression is required for SARS-CoV-2 replication in Calu-3 cells independent of its suppressive

function to IFN.

SAMHD1 facilitates spike protein-mediated viral entry of SARS-CoV-2

To understand how SAMHD1 promoted SARS-CoV-2 infection, we employed a previously

developed single cycle SARS-CoV-2 which was S-defective and pseudotyped with vesicular

stomatitis virus glycoprotein (VSV-G), namely, ΔS-VRP(G) [41]. ΔS-VRP(G) infection bypasses

S-protein mediated viral entry and infects cell types that do not support authentic SARS-CoV-2

infection. Firstly, we confirmed that remdesivir, a nucleoside analogue inhibiting viral RNA-

dependent RNA polymerase (RdRP) [42], can efficiently suppress intracellular viral RNA levels (N

and E genes) of ΔS-VRP(G) in Calu-3 Ctrl cells, suggesting that ΔS-VRP(G) infection depended

on RdRP activity (Fig. 3A). Next, we asked if SAMHD1 deficiency suppressed ΔS-VRP(G)

infection similarly as that observed in the authentic SARS-CoV-2 infections (Fig. 2). Interestingly,

we found that the intracellular viral N and E RNA levels of ΔS-VRP(G) were not suppressed in

KO1 or KO2 cells compared with Ctrl cells at 24 and 48 hrs post-infection (hpi) (Fig. 3B).

Comparatively, we observed that intracellular viral N protein expression by ΔS-VRP(G) infection

was minimally affected in KO1 cells but was slightly reduced in KO2 cells (Fig. 3C), although the

difference was much less than that observed in the authentic SARS-CoV-2 infection (Fig. 2C).

ΔS-VRP(G) expresses a dual reporter gene (*Gaussia* luciferase-T2A-neon GFP) through the

transcriptional regulatory sequence of S gene [41]. Detection to the *Gaussia* luciferase activity

reflects the infectivity of ΔS-VRP(G) [41]. We found that ΔS-VRP(G) infection produced similar

levels of *Gaussia* luciferase in Ctrl, KO1 and KO2 cells (Fig. 3D). Although ΔS-VRP(G) infection

had a trend of producing less *Gaussia* luciferase in KO2 cells than KO1 and Ctrl, we did not

observe significant reductions in both KO1 and KO2 cells (Fig. 3D). Therefore, unlike authentic

SARS-CoV-2, SAMHD1 deficiency did not inhibit ΔS-VRP(G) infection.

One possible explanation for the selective suppression of authentic SARS-CoV-2 infection

but not ΔS-VRP(G) in SAMHD1 KO cells was due to abolished S-protein-mediated viral entry,

which was not required for ΔS-VRP(G) infection. To validate the possibility, we employed a SARS-

CoV-2 S protein-pseudotyped HIV-1-based reporter virus, namely HIV-1-spike-Luc/ZsGreen [43,

44]. Successful infection of HIV-1-spike-Luc/ZsGreen depended on S-protein mediated viral entry

and the subsequent viral gene expression driven by HIV-1 single-cycle infection. The infectivity of

HIV-1-spike-Luc/ZsGreen can be measured by detecting the expression of the firefly luciferase

[43, 44]. We found that HIV-1-spike-Luc/ZsGreen infected KO1 or KO2 cells produced significantly

less luciferase activity than the Ctrl cells (Fig. 3E). This suggested that SAMHD1 expression

promoted S protein-mediated viral entry, which in turn facilitated infection of authentic SARS-CoV-

2 and HIV-1-spike-Luc/ZsGreen but not ΔS-VRP(G).

SAMHD1 maintains the expression of viral receptor ACE2 of Calu-3 cells

To gain mechanistic insight into how SAMHD1 facilitated spike-protein mediated viral entry,

the transcriptomic profiles of Ctrl, KO1 and KO2 cells were obtained by mRNA-Sequencing

(mRNA-seq). Firstly, principal component analysis (PCA) was performed to cluster Ctrl, KO1 and

KO2 cells. Biological triplicate experiment was performed. Nine PCs were therefore obtained, in

which PC1 (61%) and PC2 (37%) covered 98% of the total variance (Fig. S2A). Ctrl, KO1 and

KO2 cells were well clustered based on PC1 and PC2 (Fig. S2B). Along PC1 axis, KO1 and KO2

cells were clearly clustered and separated from Ctrl cells in the same direction. KO2 cells were

separated from KO1 and Ctrl cells along the PC2 axis which however minimally distinguished

KO1 and Ctrl cells, suggesting clonal specific transcriptomic profile for KO2.

A PCA biplot on the top ten most influential loading genes for the PCA clustering was plotted

(Fig. S2C). The PCA biplot indicated that the major loading contributors of PC1 were cell surface

proteins (CEACAM6, LGALS4 (or Galectin 4), and GJA1) and proteins implicating extracellular

matrix (CST6 (Cystatin E/M) and FAM20C). For PC2, the expression changes of ISGs including

OAS2, IFI27, IFITM1 and IF16 as well as MHC class II β-chain component HLA-DPB1

distinguished KO2 from Ctrl and KO1 but had minimal contribution to PC1 axis (Fig. S2C). In

summary, KO1 and KO2 were distinguished from Ctrl along PC1 which was mainly influenced by

the mRNA expression of genes implicating cell surface and extracellular matrix while KO2 was

further distinguished from Ctrl and KO1 along PC2 which was mainly influenced by the

expressions of ISGs.

Next, by analyzing the differential expressed genes (DEGs) implicated in both KO1 and KO2

having more than 2-fold change and with false discovery rate (FDR)-adjusted P values < 0.01

(Table S1), we found that 806 DEGs were commonly observed in KO1 and KO2 compared with

Ctrl cells (Fig. 4A). Among the 806 DEGs, 681 DEGs were of the same direction of change (Table

S2). We searched for known and validated entry factors of SARS-CoV-2 infection. We found that

the expressions of ACE2 and TMPRSS2 were decreased in both KO1 and KO2 (Fig. 4B). Both

ACE2 and TMPRSS2 transcripts were more suppressed in KO1 than in KO2. Other known SARS-

CoV-2 entry factors were, however, not on the list. Those included alternative receptors

Transmembrane protein 106B (TMEM106B) [45], transferrin receptor [46], CD147 [47], AXL

receptor tyrosine kinase (AXL) [48], kringle containing transmembrane protein 1 (KREMEN1), and

asialoglycoprotein receptor 1 (ASGR1) [49], attachment factors Neuropilin-1 [50], Niemann-Pick

C1 (NPC1) [51], lectin receptors [52], and endosomal protease cathepsin L [53] (Table S2).

Interestingly, we noticed both KO1 and KO2 had enhanced expression of furin protease (Fig. 4B),

which may facilitate S protein priming in infected cells [54].

Finally, ACE2 and TMPRSS2 mRNA and protein expressions were validated respectively by

RT-qPCR (Fig. 4C) and Western blot (Fig. 4D). For ACE2, we designed a primer pair targeting

the full-length isoforms but not the N-terminally truncated ACE2 (dACE2) that is not a functional

receptor to SARS-CoV-2 [55]. We employed a monoclonal ACE2 antibody that detected an N-

terminal region (peptide sequence surrounding Asp201) that is absent in dACE2. For TMRPSS2,

we designed a primer pair that can detect isoform 1 to 3. We employed a monoclonal TMPRSS2

antibody that detected the protease domain which is present in both zymogen (~ 55 kDa) and

active form (~ 31 kDa).

We found that the full length ACE2 mRNA and protein expressions were significantly reduced

in KO1 and KO2 cells (Fig. 4C and 4D). We confirmed the decreased full length ACE2 mRNA

expression in KO1 and KO2 by another qPCR primer pair [55] (Fig. S3A). Interestingly, we found

that KO2, but not KO1 cells, expressed significantly higher levels of dACE2 (Fig. S3B), which is

known to be induced by IFN-I [55, 56]. In contrast, we found that TMPRSS2 mRNA and protein

expressions were only downregulated in KO1 but not in KO2 cells (Fig. 4C and 4D). Indeed,

mRNA-seq results showed that TMPRSS2 transcripts were marginally defined as DEG in KO2

cells with $\log_2$ fold change equal to -1.01 (Fig. 4B, right panel). Therefore, only the expression of

full-length ACE2 but not TMPRSS2 was confirmed to be commonly repressed in SAMHD1 KO

Calu-3 cells. This suggested that SAMHD1 expression was important to maintain full length ACE2

expression that facilitated S protein-mediated viral entry and SARS-CoV-2 infection.

SAMHD1 expression does not affect ACE2 mRNA stability

ACE2 mRNA levels were downregulated in SAMHD1 KO cells (Fig. 4B-4C, S3A). To test

whether SAMHD1 KO affected ACE2 mRNA stability, an actinomycin D (actD) treatment assay

was performed [57, 58]. Ctrl, KO1 and KO2 cells were treated with actD that inhibited transcription.

At various time points following the treatment, the ACE2 mRNA levels were measured by three

specific qPCR primer pairs: the same qPCR primer pair used in Fig. 4C for full length ACE2

targeting exon 2/3 junction and exon 4 (Fig. 5A, primer pair 1 in Table S5), a qPCR primer pair

targeting the 5' end of ACE2 mRNA at exon 1/2 junction (Fig. 5B, primer pair 2 in Table S5), and

a qPCR primer pair targeting the 3' end of ACE2 mRNA at exon 19 (Fig. 5C, primer pair 3 in Table

S5). We found that ACE2 mRNA was relatively stable over time that more than 50% of it remained

by 8 hrs of actD treatment (Fig. 5A-5C), similar to the observation by others [59].

We included additional controls to validate the actD treatment assay. The mRNA stability of

a proapoptotic gene BCL-2 interacting killer (BIK) is suppressed by La-related protein 1 (LARP1),

a protein highly expressed in cancer cells [60, 61]. We found that BIK mRNA in Calu-3 Ctrl cells

exhibited rapid decay following actD treatment, with levels decreasing to below 50% by 4 hrs and

approximately 10% remaining at 8 hrs (Fig. 5D). Comparatively, 18S ribosomal RNA, which is a

structural component of ribosome and more stable than mRNA, was found to remain above 50%

of the initial levels during the actD treatment assay (Fig. 5E). These results confirmed that the

actD treatment assay was valid in distinguishing unstable RNA species. We found that ACE2

mRNA in actD-treated KO1 or KO2 cells were similarly stable as compared with that of the Ctrl

cells with over 50% of *ACE2* mRNA remaining in both KO1 and KO2 cells (Fig. 5A-5C). Therefore,

SAMHD1 expression does not affect ACE2 mRNA stability.

SAMHD1 maintains HNF1α, HNF1β and HNF4α expressions in Calu-3 cells

Next, we questioned how SAMHD1 KO affected *ACE2* transcription. The *ACE2* promoter is

a bipartite promoter that is controlled by various transcription factors depending on cell types [62].

Analysis of human lung tissues and immortalized lung 16HBE cells revealed STAT3

transcriptionally controlled ACE2 expression [63]. HNF1α and HNF1β were found to cooperate

and promote ACE2 expression transcriptionally in HEK293 and pancreatic islet cells [64, 65].

HNF4α was found to be a transcription repressor or activator of ACE2 expression depending on

different cell types and experiment settings [66-68]. Sp1 was found to transcriptionally promote

ACE2 expression in immortalized human type II alveolar epithelial cells [68]. FOXA2 was found

to promote ACE2 transcription in 832/13 insulinoma cells or mouse pancreatic islets [69]. Ikaros

was found to drive ACE2 expression in human cardiac fibroblasts in response to Ang II stimulation

by binding to ATTTGGA sequence of the proximal promoter [70].

The exact transcription factors regulating endogenous ACE2 expression in Calu-3 cells

remain unclear. To the best of our knowledge, GATA6 was the only experimentally identified

transcription factor in Calu-3 cells promoting ACE2 expression and facilitating SARS-CoV-2

infection [71]. GATA6 was identified by CRISPR/Cas9-KO library screening for surviving cells

upon SARS-CoV-2 infection. Two additional independent studies identified HNF1β as a significant

candidate to reduce surviving cells upon SARS-CoV-2 infection by CRISPR/Cas9-activation

library screening [72, 73]. However, unlike GATA6, the role of HNF1β in regulating ACE2

expression in Calu-3 cells was not further validated. Other known ACE2 transcription factors as

mentioned above were not on the candidate list of the three screening studies [71-73]. Our RT-

qPCR analysis revealed that the mRNA levels of HNF1β were reduced in KO1 and KO2 cells (Fig.

6B), while GATA6 mRNA level was unchanged in KO1 and KO2 cells compared to Ctrl cells (Fig.

6D).

HNF1α, HNF1β, and HNF4α are core transcription factors that establish a complex and

interdependent regulatory network during liver and pancreas development [74, 75]. Particularly in

hepatocytes, HNF1α and HNF1β can transcriptionally promote the expression of HNF4α [76]. In

return, HNF4α promotes HNF1α's expression [77, 78] and transcriptional activity [79]. This

network in lung cells is unclear. We found that the mRNA levels of HNF1α (Fig. 6A) and HNF4α

(Fig. 6C) were also downregulated in KO1 and KO2 cells. Western blot analysis showed that the

protein levels of HNF1α, HNF1β and HNF4α were reduced in KO1 and KO2 cells compared to

Ctrl cells (Fig. 6E). These results suggest that endogenous SAMHD1 maintains the expression of

the HNF1α, HNF1β and HNF4α in Calu-3 cells.

HNF1α and HNF1β promote endogenous ACE2 expression in Calu-3 cells

Whether HNF1α, HNF1β and HNF4α controlled the endogenous ACE2 expression in Calu-

3 cells was unclear. To address this question, HNF1α, HNF1β and HNF4α were knocked down

individually in Calu-3 cells. Dicer-substrate siRNAs (DsiRNA) transfection efficiently reduced the

target gene expression by more than 50% (Fig. 7A-7C and S4A). We noticed that knocking down

HNF1β, but not HNF1α, suppressed HNF4α mRNA and protein expression in Calu-3 cells.

Knocking down HNF4α suppressed HNF1α mRNA but not protein (Fig. 7B and 7C). Regarding

endogenous ACE2 expression, we found that knocking down HNF1α and HNF1β, but not HNF4α,

significantly suppressed ACE2 protein expression (Fig. 7A-7B and S4A). Interestingly, only

knocking down HNF1α led to a significant reduction of ACE2 mRNA expression (Fig. 7C).

Knocking down HNF1β suppressed ACE2 protein expression (Fig. 7A-7B, S4A) but not mRNA

expression in Calu-3 cells (Fig. 7C). Finally, we found that knocking down either HNF1α or HNF1β

significantly suppressed SARS-CoV-2 infection in Calu-3 cells (Fig. 7D). Therefore, HNF1α and

HNF1β are required to promote the expression of ACE2 and support SARS-CoV-2 infection in

Calu-3 cells.

HNF1-dependent ACE2 expression is suppressed in SAMHD1 KO Calu-3 cells

We hypothesized that the functions of HNF1α and HNF1β in promoting endogenous ACE2

expression was suppressed in the SAMHD1 KO Calu-3 cells. To test the hypothesis, transient

HNF1α and HNF1β knockdown was performed in SAMHD1 KO cells to examine if the ACE2

expression was less dependent on HNF1α and HNF1β when their expression was suppressed

upon SAMHD1 deficiency. We found that HNF1α and HNF1β protein expression in KO1 and KO2

cells could still be suppressed by DsiRNA knockdown despite their lower expression levels

compared to Ctrl cells (Fig. 8A-8C and S4B). Knocking down HNF1α and HNF1β significantly

reduced ACE2 protein expression in Ctrl cells (Fig. 8A, 8D and S4B). In the case of KO1 and KO2

cells, the suppression of ACE2 protein expression by HNF1α and HNF1β knockdown was

mitigated. Knocking down HNF1α, but not HNF1β, reduced ACE2 mRNA expression in Ctrl cells

(Fig. 8E). In contrast, HNF1α knockdown was less potent in further suppressing ACE2 mRNA in

KO1 and KO2 cells (Fig. 8E). Given that endogenous ACE2 expression was more dependent on

HNF1α and HNF1β in Calu-3 Ctrl cells (Fig. 8D and 8E), our data suggest that SAMHD1

expression promotes HNF1-dependent ACE2 expression in Calu-3 cells.

Discussion

In this study, we investigated the role of SAMHD1 in SARS-CoV-2 infection of Calu-3 cells,

which expressed endogenous ACE2 and supported productive viral replication. Similar to our

previous study using other cell types [32], SARS-CoV-2 replication was enhanced in SAMHD1

expressing Calu-3 cells. Previous study showed that inhibition of IFN signaling by the JAK1/2

inhibitor baricitinib alleviated the replication restraint of SARS-CoV-2 in HEK293T cells with

SAMHD1 KO [32], while in the current study, baricitinib treatment did not promote SARS-CoV-2

replication in SAMHD1 KO Calu-3 cells. We noticed that baricitinib treatment promoted the

intracellular viral N RNA and protein levels of SARS-CoV-2 in Calu-3 Ctrl cells but did not change

the production of infectious progeny viruses. In contrast, baricitinib treatment enhanced neither

the viral RNA nor viral protein levels in SAMHD1 KO1 and KO2 cells, suggesting that some

fundamental mechanisms to SARS-CoV-2 replication were disrupted in KO1 and KO2 cells rather

than IFN signaling.

HEK293T cells support productive replication of SARS-CoV-2 despite negligible expression

of ACE2 and TMPRSS2 [80-82]. Through a CRISPR/Cas9 KO library screen, an alternative viral

receptor TMEM106B was found to be required for SARS-CoV-2 replication in HEK293T cells [82].

In contrast, SARS-CoV-2 infection in Calu-3 cells exhibits a strong dependence on ACE2

expression, as evidenced by multiple CRISPR/Cas9 library screens where ACE2 was consistently

the most critical host factor identified [71-73]. We found that compared to other known viral entry

factors, ACE2 expression was significantly reduced in SAMHD1 KO Calu-3 cells, with consistent

results observed in both the KO1 and KO2 lines. SAMHD1 KO significantly hindered SARS-CoV-

2 S protein-mediated viral entry in Calu-3 cells; however, once this barrier was bypassed by VSV-

G pseudotyping, the single-cycle infection of SARS-CoV-2 replicon was restored. Therefore,

SAMHD1 KO abolished ACE2-dependent and S-mediated viral entry which is required for SARS-

CoV-2 infection of Calu-3 cells, but not HEK293T cells.

We questioned how SAMHD1 promoted ACE2 expression in Calu-3 cells. We found that

SAMHD1 KO repressed ACE2 mRNA expression in Calu-3 cells, but ACE2 mRNA stability was

unaffected. This suggests that SAMHD1 KO might pre-transcriptionally or transcriptionally

suppress ACE2 mRNA expression. We found that SAMHD1 KO suppressed the expression levels

of HNF1α and HNF1β, which in turn downregulated the expression of ACE2 and SARS-CoV-2

infection. We functionally validated the inhibition of HNF1-mediated endogenous ACE2

expression in SAMHD1 KO Calu-3 cells. To the best of our scope, this is the first study functionally

confirming the role of HNF1α and HNF1β in promoting ACE2 expression in lung epithelial cells.

Interestingly, although HNF1α and HNF1β were previously defined to be transcription factors of

ACE2 by binding to the HNF1 response element of the proximal promoter [64, 65], we found that

only HNF1α was required for ACE2 mRNA expression in Calu-3 cells. HNF1β was however

required for ACE2 protein but not mRNA expression. These findings implied that SAMHD1 KO

contributed to suppress ACE2 mRNA and protein levels through downregulation of HNF1α and

HNF1β expression, respectively (summarized mechanisms in Fig. 9).

It is still in question how SAMHD1 promotes the expression and activity of HNF1α and

HNF1β in driving ACE2 expression. SAMHD1 is a nuclear protein that has not been identified to

have direct transcriptional function. SAMHD1 mainly interacts with single-stranded RNA or DNA

but had low affinity to double-stranded DNA [83, 84]. It is possible that SAMHD1 depletion may

have created some cellular stresses that inhibit the expression of HNF1α and HNF1β. We found

that SAMHD1 KO Calu-3 cells spontaneously express higher IL-6 than Ctrl cells. Indeed, the

expression of several proinflammatory cytokines including IL-1α, IL-1β, CSF2 and IL-11 were also

upregulated in both KO1 and KO2 clones (Table S2). Some studies suggest that HNF1α and

HNF1β expressions are suppressed upon inflammation. Firstly, the expression of HNF1α in

hepatocytes was suppressed through a positive feedback circuit when mice were treated with

dimethylnitrosamine that induced liver inflammation followed by hepatic fibrogenesis [85].

Secondly, the expression of HNF1β was downregulated by IFN-γ in kidney cells HK-2, while

lipopolysaccharide injection downregulated HNF1β expression in mouse kidney cells [86]. Thirdly,

we found that HNF4α knockdown reduced HNF1α mRNA expression in Calu-3 cells although the

protein change was not observed (Fig. 7A-7C). One recent study suggests HNF4α is

transcriptionally suppressed by inflammatory stimuli such as IL-6 and IL-1β in differentiated

HepaRG cells [87]. It is possible that the enhanced expression of proinflammatory cytokines of

SAMHD1 KO Calu-3 cells suppresses HNF4α expression, thereby decreasing the expression of

HNF1α. We also found that HNF1β positively regulated HNF4α expression (Fig. 7B-7C). It is

possible that HNF1β plays an upstream role in the expression of HNF1α and HNF4α in Calu-3

cells. SAMHD1 expression prevents spontaneous proinflammatory cytokine production mainly

through inhibition of NF-kB signaling [25, 28] and preventing RIG-I like receptor signaling and

cGAS-STING activation by self-RNA or self-DNA species [17-24]. Therefore, SAMHD1 expression

maintains innate immune homeostasis, which sustains the endogenous expressions of HNF1α

and HNF1β to support ACE2 expression. Further investigation is needed to confirm the idea.

We noticed that several cell surface proteins and proteins related to extracellular matrix

distinguished SAMHD1 KO Calu-3 cells from Ctrl cells through the PCA (Fig. S2C). Similarly, gene

ontology (GO) enrichment analysis (GOEA) of cellular components to the 681 common DEGs of

SAMHD1 KO Calu-3 cells suggest that cell periphery was the best enriched term having the

lowest FDR-adjusted P value (Fig. S5 and table S3). Among the top ten GO terms, four terms

were correlated with cell surface membranes in addition to cell periphery (including plasma

membrane, apical plasma membrane and cell surface) while five terms were correlated with

extracellular matrix (including extracellular matrix, external encapsulating structure, extracellular

region, extracellular space, collagen-containing extracellular matrix). Although we did not observe

any validated SARS-CoV-2 entry factors on the 681 common DEGs except ACE2, TMPRSS2 and

furin in which only ACE2 was found to be consistently downregulated in both KO1 and KO2 clones,

it might be possible that the changes in cell surface and extracellular matrix structures contribute

to the suppressed SARS-CoV-2 infection and viral entry in SAMHD1 KO Calu-3 cells. Any

combinatorial effects of the DEGs contributing to the changes in cell surface and extracellular

structures that may potentially suppress SARS-CoV-2 infection shall be valuable in future

investigation (Table S4).

Why SAMHD1 depletion affected the expression of so many genes encoding cell surface

and extracellular matrix proteins remains unclear. One study suggests SAMHD1 expression

promotes focal adhesion kinase (FAK) signaling by binding to cortactin, and in turn activated Rac

family small GTPase 1 (Rac1)-mediated lamellipodia formation in human clear cell renal cell

carcinoma [88]. It is possible that SAMHD1 KO Calu-3 had lower activity of FAK and Rac-1.

Interestingly, Rac-1 was found to promote SARS-CoV-2 entry via macropinocytosis in ACE2-

expressing cells [89]. Thus, SAMHD1 may enhance SARS-CoV-2 infection by macropinocytosis

through cortactin, FAK and Rac-1, in addition to promoting HNF1-mediated ACE2 expression.

Further investigation is required for the detailed mechanism by which SAMHD1 promotes SARS-

CoV-2 infection in physiologically relevant cell types.

We were surprised to find that only KO2 but not KO1 clone had spontaneous IFN-I responses

(Fig. 1C). Indeed, based on PCA, KO2 cells were clustered away from Ctrl and KO1 cells mainly

by several ISGs (Fig. S2C). IFN-I production requires activation of IRF3/7 in addition to NF-κB

signal pathway [90]. KO1 cells exhibited complete absence of SAMHD1 protein since expression

was abolished with sgRNA1 frameshifting exon 1 at [11]Lysine (Fig. 1A, 1B and S1A). KO2 cells

may express a truncated protein consisting of the first 1-149 amino acids of SAMHD1. Whether

the truncated SAMHD1 protein (aa. 1-149) contributes to IFN-I activation and ISG expression in

Calu-3 cells is unclear and will require further investigation.

In summary, we found that SAMHD1 is a proviral factor to SARS-CoV-2 infection in Calu-3

cells by enhancing S protein-mediated viral entry through maintaining HNF1-mediated ACE2

expression. Our study shed light on a novel function and mechanism of SAMHD1 in facilitating

SARS-CoV-2 infection in lung epithelial cells.

Materials and Methods

Cell culture

Cell culture was performed as previously described [91, 92]. The original wildtype Calu-3

cells were obtained from ATCC (HTB-55™). Wild-type Calu-3 cells as well as Ctrl, KO1 and KO2

cells were maintained in DMEM/F12 (ThermoFisher Scientific, Cat. no. 11320033) with 20% FBS,

100 U/mL penicillin (Gibco, Cat. no. 15140122), and 100 µg/mL streptomycin (Gibco, Cat. no.

15140122). Huh7.5 cells were kindly provided by Dr. Balaji Manicassamy (University of Iowa) [41].

Vero-hTMPRSS2 cells were cultured in DMEM (ThermoFisher Scientific, Cat. no. 11965092) with

10% FBS, 100 U/mL penicillin, 100 µg/mL streptomycin and 5 µg/mL blasticidin (Gibco, Cat. no.

A1113903) as previously described [93]. Huh7.5 cells were cultured in DMEM with 10% FBS, 100

U/mL penicillin, 100 µg/mL streptomycin. Actinomycin D (SellekChemicals, Cat. no. S8964),

remdesivir (MCE, Cat. no.: HY-104077) and baricitinib (MCE, Cat. no.: HY-15315) were dissolved

in dimethyl sulfoxide (DMSO) and stored at -20°C.

Generation of SAMHD1 KO Calu-3 cells

SAMHD1 KO Calu-3 cells were generated similarly as previously described with some

modifications [91, 92]. Briefly, third generation lentiviral particles were rescued from HEK293T

cells (1 x 10^7) transfected with lentiCRISPR v2-puro empty vector, lentiCRISPR v2-puro-sgRNA1,

or lentiCRISPR v2-puro-sgRNA2 together with psPAX2, and pMD2.G (ratio 4:3:1) by PEI (1:5

ratio). The target sequence of sgRNA 1 guided SpCas9 cutting at exon 1 of SAMHD1 gene (chr20:

36,951,611/36,951,612) while that of sgRNA 2 targeted SpCas9 for exon 4 (chr20:

36,935,087/36,935,088). The template sequence for sgRNA1 was *5'-*

GTCATCGCAACGGGGACGCTTGG and sgRNA2 was *5'-CTTCGATACATCAAACAGCTGGG*.

At 24 hrs post-transfection (hpt), the culture supernatant was replenished with fresh media. At 72

hpt, the 12 mL culture supernatant was cleared by 500 x g 5 min centrifugation followed with 0.45

µm filtering and concentrated by lenti-concentrator (ORIGENE, Cat. no TR30026) into 1mL media.

A day before transduction, 4 x 10^5 Calu-3 cells were seeded in 12 well plates. On the day of

transduction, the culture supernatant of the Calu-3 cells was replaced with the 1mL concentrated

virus. At 24 hpi, the culture supernatant was replaced with fresh DMEM/F12 with 20% FBS, 100

U/mL penicillin, and 100 µg/mL streptomycin. At 72 hpi, cells were selected against 1 µg/mL

puromycin. The survival cells of the transduced populations were purified by limited dilution on a

96 well plate. Finally, the purified cell clones were verified for expression of SAMHD1 and

genotyping.

RNA interference and transfection

DsiRNAs were oligo-duplex and the sequences were predesigned by Integrated DNA

Technologies (IDT) [94]. Cells were transfected with DsiRNA with Lipofectamine RNAiMAX

Reagent (ThermoFisher Scientific, Cat. no. 13778150). In brief, equal volume of OPTIMEM-

(Gibco, Cat. no. 31985070) diluted DsiRNA (150 µl for 24 well format and 300 µl for 12 well format)

and OPTIMEM-diluted lipofectamine RNAiMAX (1:3 ratio) were mixed and incubated for 20 min

at room temperature. Cell suspension (0.5 mL in 24 well format and 1 mL in 12 well format) was

mixed with the 600 µl DsiRNA/lipofectamine RNAiMax complex. At 24 hpt, culture supernatant

was replaced with fresh medium. Cells were harvested at indicated time points. The DsiRNA

sequences used in the current study were listed in Table S5.

Virus stocks

Authentic SARS-CoV-2 (Wuhan-Hu-1) was rescued from Vero-hTMPRSS2 transfected with

bacterial artificial chromosome carrying SARS-CoV-2 genome (BAC-SARS-CoV-2) as previously

described with some modifications [95]. In brief, 1×10^7 Vero-hTMPRSS2 cells were seeded in a

T75 flask a day before transfection without blasticidin. Vero-hTMPRSS2 cells were transfected

with 10 µg BAC-SARS-CoV-2 with lipofectamine 3000 (ThermoFisher Scientific, Cat. no.

L3000008). At 24 hpi, the culture supernatant was replaced with serum-free DMEM. At 72 hpi,

80% cytopathic effect was observed. The crude culture supernatant was collected for one freeze-

thaw cycle. Then, the supernatant was cleared by pelleting debris at 2,000 x g, 10 min, 4°C. The

viral containing supernatant was aliquoted and frozen at -80°C for subsequent studies.

ΔS-VRP(G) was rescued from Huh7.5 transfected with BAC carrying spike-defective SARS-

CoV-2 genome (BAC-ΔS-Gluc-T2A-nGFP) together with VSV-G expression plasmid similarly as

previously described [41, 96].

HIV-1-spike-Luc/ZsGreen (BEI resources, Cat. no. NR-53818) was a generous gift donated

by Dr. Jesse Bloom (Fred Hutchinson Cancer Center) and Dr. Alejandro Benjamin Balazs

(Harvard University) and available on BEI resources. The titration of the stock batch (Lot:

70042784) was 4.99×10^5 relative luciferase tissue culture infectious dose 50% ($TCID_{50}$) units in

HEK293-hACE2 cells at 48 hpi.

Virus infection assays

For authentic SARS-CoV-2, cells were seeded a day prior to infection. The culture

supernatant was replaced with serum free DMEM prior to infection. Then, the cells were incubated

with SARS-CoV-2 at appropriate MOI for 1 hr. Then, the virus inoculum was aspirated. The cells

were washed twice with DPBS (Gibco, Cat. no. 14190144). Then, cells were replenished with

serum free DMEM. The culture supernatants or infected cells were harvested at indicated time

points.

For ΔS-VRP(G), cells were infected as previously described [41, 96] and similarly as that of

the authentic SARS-CoV-2 but with 2 hr virus inoculation instead of 1 hr. After virus inoculation,

infected cells were washed twice with DPBS. Cells were then replenished with DMEM/F12 with

20% FBS, 100 U/mL penicillin, and 100 µg/mL streptomycin. The culture supernatants or infected

cells were harvested at indicated time points.

For HIV-1-spike-Luc/ZsGreen, cells were infected as previously described [43, 44]. Cells

were incubated with the virus in the presence of 5 µg/ml polybrene for 1 hr in DMEM/F12 with

20% FBS, 100 U/mL penicillin, and 100 µg/mL streptomycin. Then, virus inoculum was removed.

Fresh DMEM/F12 with 20% FBS, 100 U/mL penicillin, and 100 µg/mL streptomycin was added.

At 48 hpi, infected cells were harvested for downstream analysis.

Plaque assay

A day before infection, 4×10^5 or 8×10^5 Vero-hTMPRSS2 cells were seeded respectively

on 12- or 6- well plates. Vero-hTMPRSS2 cells were infected with serially diluted viral stocks for

1 hr. Then, the virus inoculum was removed. Infected cells were overlayed with 1% agarose in

DMEM/ DPBS (1:1). At 72 hpi, infected cells were overnight fixed with 4% paraformaldehyde/PBS

(ThermoFisher Scientific, Cat. no. J19943.K2). Then, the overlay was removed, and the cells were

stained with 0.5% crystal violet in 10% methanol for at least 5 min. Plaques were visualized. Virus

concentration was calculated based on the number of plaques in the countable dilution.

Viral copy number detection

Viral RNA was extracted by RNeasy Plus kit (QIAGEN, Cat. no. 74134) in which viral

containing solutions and RLT plus lysis buffer was in 1:4 ratio. Viruses were lysed in RLT plus

lysis buffer for 10 min at room temperature. The purified viral RNA was reverse transcribed using

the iScript cDNA Synthesis Kit (BIO-RAD, Cat. no. 1708891). Viral RNA was detected by the

qPCR primer pair targeting the viral RdRP (Table S5) with iTaq™ Universal SYBR® Green

Supermix (BIO-RAD, Cat. no.1725124) [97, 98]. Standard curve for the number of single stranded

DNA against Ct value was generated using the BAC-SARS-CoV-2 DNA. The copy number of

single stranded RNA was estimated from the copy number of cDNA in each sample.

Genomic DNA sequencing

The genome DNA of Ctrl, KO1 and KO2 cells were purified with DNeasy Blood and Tissue

Kits for DNA Isolation (QIAGEN, Cat. no. 69504). Exon 1 and exon 4 regions encompassing the

Cas9 cleavage sites were amplified by Phusion High-Fidelity DNA Polymerase (NEB, Cat. no.

M0530L). The sequences of the PCR primer pair for amplifying exon 1 was *5'-*

CGAAGGGCTCAACTGTCAGT (forward) and *5'-CTCGGGTCTTCCTTTCCTCG* (reverse) and

that of exon 4 was *5'-TGATCTGTCTGGTAGTGATACCT* (forward) and *5'-*

CGATTGTGTGAAGCTCCTGG (reverse). Then, the PCR products were submitted for sanger

sequencing services provided by Genomics Division of Iowa Institute of Human Genetics

(University of Iowa) using the forward primers.

Cellular dATP detection

Cellular dATP levels were measured by a single nucleotide RT incorporation assay

previously described [37, 40, 92]. In brief, 2×10^6 cells were harvested for dNTP extraction with

50% methanol. Methanol extract was dried at 80°C for 1 hr and then reconstituted in reaction

buffer at appropriate dilution within linear range of the assay as previously described for dATP

levels detection. The levels of cellular dATP were calculated by extrapolating the relative band

intensity to the standard curve created by the parallel reactions.

Western blot analysis

Upon harvest, cells were washed once with DPBS and lysed with 1 x cell lysis buffer (Cell

Signaling Technology, Cat. no. 9803) with phosphatase and protease inhibitor (ThermoFisher

Scientific, Cat. no. A32961) for 10 to 30 min until complete lysis. Cell debris was removed by

centrifugation at 16.1 kg for 10 min at 4°C. Total protein concentration was estimated by Pierce™

BCA Protein Assay Kit (ThermoFisher Scientific, Cat. no. 23225). Protein samples with normalized

total protein levels were mixed with 5 x protein sample buffer (0.25 M Tris-Cl pH 6.8, 20% glycerol,

10% SDS and 1% saturated bromophenol blue) to the final concentration of 1 x and heat-

denatured at 98°C for 10 min. Cellular protein (10 to 25 µg) was loaded onto polyacrylamide gels

for Western blot analysis as previous described [91]. Primary antibodies used were as follows:

Anti-GAPDH (BIORAD, Cat. no. AHP1628), anti-viral N (BEI resources, Cat. no. NR-56223), anti-

viral S (ThermoFisher Scientific, Cat. no. PA5114451), anti-SAMHD1 (Abcam, Cat. no. ab117908),

anti-STAT1 (Cell Signaling Technology, Cat. no. 9172T), anti-p-STAT1 (Cell Signaling Technology,

Cat. no. 8826T), anti-ACE2 (Cell Signaling Technology, Cat. no. 92485T), anti-TMPRSS2 (Santa

Cruz Biotechnology, Cat. no. sc-515727), anti-HNF1α (Cell Signaling Technology, Cat. no.

89670T), anti-HNF1β (Proteintech, Cat no. 12533-1-AP) and anti-HNF4α (Cell Signaling

Technology, Cat. no.3113T). For secondary antibody, goat anti-mouse IgG (H+L) HRP (Promega,

Cat. no. W4021) or goat anti-rabbit IgG (H+L) HRP (Promega, W401B) was used. Immunoblots

were developed with Odyssey Fc Imager. Protein band intensity was quantified by Image Studio™.

RNA extraction and RT-qPCR

Cellular RNA extraction was performed with RNeasy Plus Kits according to the

manufacturer's instructions. Upon harvest, cells were washed once with DPBS and lysed with

RLT plus lysis buffer. After column purification, 1 µg of purified RNA was used for reverse

transcription through iScript cDNA Synthesis Kit. The cDNA product was used for qPCR

quantification with iTaq Universal SYBR Green supermix. SYBR signal was quantified by

QuantStudio™ 3 Real-Time PCR or CFX Duet Real-Time PCR System. The qPCR primer pairs

were either previously designed (including Viral E [99], 18S RNA [100] , IL-6 [25], OAS1 [101],

ACE2 and dACE2 [55]), predesigned by PrimerBank [102] or designed in-house based on NCBI

primer-BLAST with Primer3 adjustment (Table S5).

Luciferase detection

To detect secreted *Guassia* luciferease activity, 20 µl of culture supernatant was incubated

with 50 µl of the working solution of Pierce™ Gaussia Luciferase Flash Assay Kit (ThermoFisher

Scientific, Cat. no. 16158) for quantification of the resulting chemiluminescence following

manufacturer's instruction. To detect cellular firefly luciferase 2 activity, cells were washed once

with DPBS and lysed in 1 x passive lysis buffer (Promega, Cat. no. E1941) supplemented with

phosphatase and protease inhibitor. At 30 min lysis, cell debris were removed by centrifugation at

16.1 kg for 10 min at 4°C. Total protein concentration was estimated by Pierce™ BCA Protein

Assay Kit. 10 µl of the PLB lysate was incubated with 100 µl of LAR-II substrate reagent of the

Dual-Luciferase® Reporter Assay System following manufacturer's instruction to quantify the

resulting chemiluminescence (Promega, Cat. no. E1980). The cellular firefly luciferase 2 activities

were calculated as follow: ($RLU_{infected}$ per one microgram protein) – ($RLU_{uninfected}$ per one

microgram protein).

mRNA-sequencing

Calu-3 Ctrl, KO1 and KO2 cells (8×10^5) were seeded in 6 well plates in biological triplicate.

Cells were cultured in 2 mL DMEM/F12 with 20% FBS, 100 U/mL penicillin, and 100 µg/mL

streptomycin. At 20 hrs after seeding, cells were washed once with DPBS and lysed with RLT plus

lysis buffer. Cellular RNA was purified with RNeasy Plus kit following manufacturer's instructions.

All RNA samples got RNA integrity Number (RIN) scores equal to or more than 9.9 as determined

by Agilent BioAnalyzer by Genomics Division of Iowa Institute of Human Genetics (University of

Iowa). The subsequent steps of the mRNA-Seq were performed by the Genomics Division using

manufacturer recommended protocols. Briefly, at least 500 ng of DNase I-treated total RNA was

used to prepare sequencing libraries using the Illumina stranded mRNA library preparation kit

(Illumina, Cat. no. 20040534). Barcoded libraries were quantified using a Qubit fluorometer

(ThermoFisher Scientific) and pooled together to give the same molar concentration per sample.

The pooled libraries were sequenced on the Element AVITI24 sequencing platform on a

Cloudbreak FS 150 cycle (2 x 75 bp) medium output sequencing flow cell (Element Biosciences,

Cat. no. 860-00014) to generate at least 30M paired-end sequencing reads per sample. The raw

base files were converted to FASTQ files using the Bases2fastq v2.1 tool. The mRNA-seq data

have been deposited in the Gene Expression Omnibus (GEO) and an accession number will be

obtained.

Bioinformatic analysis for mRNA-sequencing

The bioinformatic analysis to the raw FASTQ data obtained from mRNA-sequencing was

performed by Bioinformatics Division, Iowa Institute of Human Genetics (University of Iowa). In

brief, PCA including PCA plot, PCA biplot and DEG analysis were generated by SALMON DeSeq2.

Pathway analysis including GOEA was performed by iPathwayGuide platform (ADVAITABIO).

Statistical analysis

At least biological triplicate was performed for each experiment throughout the study.

Statistical analysis was performed by GraphPad Prism. For the dataset of the mRNA-seq

experiment, FDR-adjusted P value was obtained. Only changes that had P values less than 0.05

were considered statistically significant.

Acknowledgements

We thank Drs. Balaji Manicassamy and Patrick Sinn for their invaluable support during this

study. We thank Drs. Jesse Bloom and Alejandro Benjamin Balazs for the resources donated to

Biodefense and Emerging Infections Research Resources Repository (BEI Resources). The

following reagents were obtained through BEI Resources, NIAID, NIH: (1) SARS-Related

Coronavirus 2, Wuhan-Hu-1 Spike-Pseudotyped Lentivirus, Luc2/ZsGreen, NR-53818 and (2)

Monoclonal Anti-SARS-Related Coronavirus 2 Nucleocapsid Protein (produced in vitro), NR-

56223. The mRNA seq data herein were obtained at the Genomics Division (RRID: SCR_023422)

and the Bioinformatics Division of the Iowa Institute of Human Genetics which are supported, in

part, by the University of Iowa Carver College of Medicine. We also thank Mr. Fernando William

Moreira Santana for technical assistance. We appreciate valuable discussions with the members

of Dr. Wu's, Dr. Perlman's, and Dr. Sinn's laboratories at the University of Iowa as well as Dr.

Constanza Espada from the University of Missouri.

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Funding

This work was supported in part by National Institutes of Health grants R21AI181742 (to L.W.),

R01AI129269 (to S.P.), and R01AI136581 and R01AI162633 (to B.K.). L.W. is also supported by

the NIH grants R01AI189220, R33AI169659, and P30CA086862-25S1. The funders had no role

in study design, data collection and analysis, decision to publish, or preparation of the manuscript.

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1044

Figure legends of 9 main figures

Figure 1. Generation and characterization of SAMHD1 KO Calu-3 cell lines. (A) Schematic

diagram of human SAMHD1 protein domains showing the target sites of sgRNA1 or sgRNA2. (B)

SAMHD1 expression of Calu-3 cells transduced to express SpCas9 without the expression of any

sgRNA (Ctrl, two single clones) or with the expression of sgRNA1 (five single clones) or sgRNA2

(three single clones). GAPDH detection was used as normalization control. The relative band

intensities of SAMHD1 were calculated by dividing them with GAPDH bands and were normalized

to Ctrl clone 1. Clone 1 of Ctrl, clone 4 of sgRNA1- and clone 3 of sgRNA 2- treated groups were

chosen for all subsequent experiments and respectively named Ctrl, KO1 and KO2. (C) Levels of

IL-6, IFNβ, OAS1 and ISG15 mRNA were measured with RT-qPCR. 18S RNA was used as

internal control. Biological sextuplicate experiments were performed. One-way ANOVA multiple

comparisons test was used to evaluate the statistical significance of the difference between Ctrl

and KO1 or KO2. * $P<0.05$, *** $P<0.001$, **** $P<0.0001$. ns, not significant.

1058

Figure 2. Suppression of SARS-CoV-2 infection by SAMHD1 depletion independent to IFN

antiviral response. (A, B) Calu-3 Ctrl, KO1 or KO2 cells were infected with authentic SARS-CoV-

2 at MOI=0.05. Culture supernatant was collected at 0, 24, 48 or 72 hpi. (A) Infectious titer or (B)

viral copy number of the conditioned media were respectively measured by plaque assay or RT-

qPCR. Statistical comparison was performed at each time point between Ctrl and KO1 or KO2.

(C) Viral N and S proteins of infected Ctrl, KO1 or KO2 cells (SARS-CoV-2, MOI=1) were detected

at 24 hpi. GAPDH was detected as an input control. The relative band intensities of viral N and

viral S were calculated by dividing them with GAPDH bands and were normalized to Ctrl cells. (D)

The levels of viral RNA (N), IFNβ mRNA, IFNλ mRNA and OAS1 mRNA of infected Ctrl, KO1 or

KO2 cells (SARS-CoV-2, MOI=1, 0 or 24 hpi) were quantified with RT-qPCR. 18S RNA was used

as internal control. (E, F and G) Calu-3 Ctrl, KO1 or KO2 cells treated with 10 µM baricitinib or

DMSO (added 4 hrs before infection) were infected with authentic SARS-CoV-2 at MOI=1. At 24

hpi, culture supernatant, cellular protein and cellular RNA were harvested and respectively tested

with (E) plaque assay, (F) Western blot or (G) RT-qPCR. For (F), viral N protein, total STAT1 or

S727-phosphorylated STAT1 (p-STAT1) were detected and GAPDH was used as input control.

The relative band intensities of viral N, STAT1, or p-STAT1 were calculated by dividing them with

GAPDH bands and were normalized to Ctrl cells treated with DMSO. For (G), viral N RNA and

OAS1 mRNA were detected. 18S RNA was used as normalization control. For (A), (B), (D) and

(G), biological triplicate experiment was performed. For (E), biological quadruplicate experiment

was performed. For (A), (B), (D), (E) and (G), two-way ANOVA multiple comparisons test was

performed. * $P<0.05$, ** $P<0.01$, *** $P<0.001$, **** $P<0.0001$. ns, not significant.

1080

Figure 3. SAMHD1 depletion suppresses spike protein-mediated viral entry. (A) Viral RNA

levels (N and E genes) of Calu-3 Ctrl cells infected with ΔS-VRP(G) at 1.2 x 10^5 copy number per

cell and treated with 5 µM remdesivir (RDV) or DMSO were quantified with RT-qPCR at 24 hpi.

18S RNA was used as normalization control. Biological triplicate experiments were performed. (B,

C and D) Calu-3 Ctrl, KO1 or KO2 cells were infected with ΔS-VRP(G) at 1.2 x 10^5 copy number

per cell. (B) Viral RNA levels (N and E genes) were quantified with RT-qPCR at indicated time

points. 18S RNA was used as normalization control. Biological triplicate experiments were

performed. (C) Viral N protein was detected with Western blot at indicated time points. GAPDH

was used as input control. The relative band intensities of viral N were calculated by dividing them

with GAPDH bands and were normalized to Ctrl cells at 24 hpi. (D) The activities of secreted

Guassia luciferase at indicated time points were assayed through Pierce™ *Gaussia* Luciferase

Flash Assay Kit. Biological quadruplicate experiments were performed. (E) Cellular luciferase

activities of HIV-1-spike-Luc/ZsGreen infected Calu-3 Ctrl, KO1 or KO2 cells (12.5 $TCID_{50}$ per cell)

were measured at 48 hpi. Biological sextuplicate experiments were performed. For (A), (B) and

(D), two-way ANOVA multiple comparisons test was performed. For (E), one-way ANOVA multiple

comparisons test was used. * $P<0.05$, ** $P<0.01$, *** $P<0.001$. ns, not significant.

1097

Figure 4. SAMHD1 depletion downregulates the expression of SARS-CoV-2 receptor ACE2.

(A) Calu-3 Ctrl, KO1 and KO2 cells were subjected to mRNA-Seq using Element Aviti24.

Biological triplicate was performed. DEGs were identified and selected based on the following

criteria: FDR-adjusted P <0.01 and $\log_2$ fold change >1. The number of DEGs in the three different

comparison groups were plotted on a Venn diagram (i.e. Ctrl vs KO1, Ctrl vs KO2 and KO1 vs

KO2). 681 common DEGs of Ctrl vs KO1 and Ctrl vs KO2 were found to have consistent direction

of change. (B) The 681 DEGs described in (A) were plotted on two volcano plots with FDR-

adjusted P values against $\log_2$ fold change according to the values of KO1 vs Ctrl (left) or KO2 vs

Ctrl (right). Three known viral entry factors ACE2, TMPRSS2 and Furin were identified. The values

of $\log_2$ fold change were labelled adjacent to the corresponding data points. (C) mRNA levels of

ACE2 (primer pair 1, Table S5) and TMPRSS2 of Ctrl, KO1 or KO2 cells were quantified with RT-

qPCR. 18S RNA was used as normalization control. Biological sextuplicate experiments were

performed. (D) Protein levels of ACE2 and TMPRSS2 were measured with Western blot. GAPDH

was used as the input control. Triangle (◁) and asterisk (*) symbols respectively represented the

zymogen (~55 kDa) and active form (~31 kDa) of TMPRSS2. The relative band intensities of

ACE2, TMPRSS2 zymogen and TMPRSS2 active form were calculated by dividing them with

GAPDH bands and were normalized to Ctrl. For (C), one-way ANOVA multiple comparisons test

was used to evaluate the statistical significance of the difference between Ctrl and KO1 or KO2.

**** P<0.0001, ns, not significant.

1117

Figure 5. SAMHD1 KO does not affect ACE2 mRNA stability. (A-C) The levels of ACE2 mRNA

of actinomycin D (10 µg/mL) treated Calu-3 Ctrl, KO1 or KO2 cells were quantified with RT-qPCR

using (A) primer pair 1, (B) primer pair 2 or (C) primer pair 3 (Table S5) at indicated time points.

(D) BIK mRNA and (E) 18S RNA were detected with RT-qPCR as controls to the experiment. Total

RNA (1 µg) was used for reverse transcription. mRNA levels were normalized to 0 hr. The one

phase decay curves for KO1 (blue), KO2 (red) and Ctrl cells (black) were plotted.

1124

Figure 6. SAMHD1 KO decreases the expression HNF1α, HNF1β and HNF4α. mRNA levels

of (A) HNF1α, (B) HNF1β, (C) HNF4α and (D) GATA6 were measured with RT-qPCR. 18S RNA

was used as normalization control. (E) Protein levels of HNF1α, HNF1β and HNF4α were

detected with Western blot. GAPDH was detected for input control. The relative band intensities

of HNF1α, HNF1β and HNF4α were calculated by dividing them with GAPDH bands and were

normalized to Ctrl cells. For (A)-(D), one-way ANOVA multiple comparisons test was used to

evaluate the statistical significance of the difference between Ctrl and KO1 or KO2. ** P<0.01, ***

P<0.001, **** P<0.0001. ns, not significant.

1133

Figure 7. Knocking down HNF1α and HNF1β downregulates ACE2 expression and

suppresses SARS-CoV-2 infection. (A) ACE2, HNF1α, HNF1β or HNF4α proteins of Calu-3

cells (4 x 10^5) treated with DsiRNA (24 pmol, 72 hpt) targeting HNF1α, HNF1β, HNF4α or NC

were detected with Western blot. GAPDH was detected for input control. A representative blot

was shown. (B) ACE2, HNF1α, HNF1β or HNF4α protein band intensities of three independent

experiments (i.e. (A) and Supplementary S4A) were quantified by densitometry analysis and

divided by GAPDH and normalized to NC control. (C) Cells were treated similarly as in (A). The

mRNA levels of ACE2 (primer pair 1, Table S5), HNF1α, HNF1β or HNF4α were quantified with

RT-qPCR. 18S RNA was used as normalization control. (D) Calu-3 cells (3.2 x 10^6) transfected

DsiRNA (192 pmol, 72 hpt) targeting HNF1α, HNF1β or NC were infected with authentic SARS-

CoV-2 at MOI=0.05. Released viral progenies in culture supernatants were quantified with plaque

assay. Biological triplicate experiments were performed. For (B-C), unpaired T-test was used to

evaluate the statistical significance of the difference between sample groups and NC. For (D),

two-way ANOVA multiple comparisons test was performed comparing Ctrl and KO1 or KO2 at

various time points. * $P<0.05$, ** $P<0.01$, *** $P<0.001$, **** $P<0.0001$. ns, not significant.

1149

Figure 8. SAMHD1 deficiency mitigates the effect of HNF1α and HNF1β knockdown in

further suppressing ACE2 expression. (A) ACE2, HNF1α and HNF1β proteins of Ctrl, KO1 or

KO2 cells (2 x 10^5) treated with DsiRNA (12 pmol, 72 hpt) targeting HNF1α, HNF1β or NC were

detected with Western blot. GAPDH was detected for input control. A representative blot was

shown. (B) HNF1α, (C) HNF1β and (D) ACE2 protein band intensities of three independent

experiments (i.e. (A) and Supplementary S4B) were quantified by densitometry analysis, divided

by GAPDH bands and normalized to Ctrl NC. (E) Cells were treated similarly as in (A). The mRNA

levels of ACE2 (primer pair 1, Table S5) were quantified with RT-qPCR. 18S RNA was used as

normalization control. One-way ANOVA multiple comparisons test was used to evaluate the

statistical significance of the difference between sample groups. * P<0.05, ** P<0.01, *** P<0.001,

**** P<0.0001. ns, not significant.

1161

Figure 9. SAMHD1 promotes SARS-CoV-2 infection via HNF1-mediated ACE2 expression.

SAMHD1 supports the expression of HNF1α and HNF1β which respectively promote mRNA and

protein expression of ACE2 in human lung epithelial cells (Calu-3). Upon infection, SARS-CoV-2

binds to ACE2 receptor via its surface spike protein to initiate viral entry. In the absence of

SAMHD1 expression (i.e. SAMHD1 KO), cellular stresses are induced such as proinflammatory

cytokine expression (thunder symbols). The expression levels of HNF1α and HNF1β are reduced.

In turn, ACE2 expression is reduced which blocks SARS-CoV-2 infection via spike protein-

mediated viral entry. Whether and how proinflammatory cytokines produced by SAMHD1 KO

Calu-3 cells (e.g. IL-6, IL-1, CSF2, or IL-11) suppress HNF-1-mediated ACE2 expression remains

unclear and requires further studies.

1172

1173   **Figure legends of 5 supplementary figures**

1174

Supplementary Fig. S1. Validation of SAMHD1 deficiency in SAMHD1 KO Calu-3 cells. (A

and B) The sanger sequencing results to the regions of SpCas9 cleavage sites directed by

respectively sgRNA1 or sgRNA2 of (A) KO1 and (B) KO2 cells were shown and compared with

that of the Ctrl cells. Red arrows indicated one base pair insertion near the SpCas9 cleavage site.

(C) dATP levels of Calu-3 Ctrl, KO1 or KO2 cells were measured with HIV-1 RT based single

nucleotide incorporation assay. For (C), one-way ANOVA multiple comparisons test was used to

evaluate the statistical significance of the difference between Ctrl and KO1 or KO2. ** P<0.01. ns,

not significant.

1183

Supplementary Fig. S2. PCA clustering of Calu-3 Ctrl, KO1 and KO2 cells based on the

mRNA-seq profiles. Nine samples of the mRNA-seq analysis gave nine PCs (i.e. Ctrl, KO1 and

KO2 cells, biological triplicate). The influence of each PC was plotted based on their contributing

variance (%). The cumulative variances from 1 to 9 were plotted above and joined by a curve.

PC1 and PC2 gave 98% coverage of all PCs. (B) Individual samples from Ctrl, KO1 and KO2

cells were plotted along the PC1 and PC2 based on the net scores of loading genes obtained

from PCA. (C) A PCA biplot was generated by top ten loading genes influencing PC1 and PC2.

1191

Supplementary Fig. S3. Confirming ACE2 and dACE2 mRNA expressions in SAMHD1 KO

Calu-3 cells. The mRNA levels of (A) ACE2 and (B) dACE2 of Ctrl, KO1 and KO2 cells were

measured by RT-qPCR with qPCR primer pairs previously described [55]. For ACE2, primer pair

4 listed in Table S5 was used. Biological triplicate experiment was performed. One-way ANOVA

multiple comparisons test was used to evaluate the statistical significance of the difference

between Ctrl and KO1 or KO2. ** $P<0.01$, *** $P<0.001$. ns, not significant.

1198

1199   **Supplementary Fig. S4. Independent experiments performed for protein band calculation**

1200   **of Fig. 7B and Fig. 8B-8D.** The Western blot results to two more independent experiment

1201   replicates for the same experiment conducted in Fig. 7A and Fig. 8A were respectively shown in

1202   (A) and (B).

1203

Supplementary Fig. S5. Gene ontology enrichment analysis to cellular components to the

common DEGs of SAMHD1 KO Calu-3 cells. 681 consistent DEGs obtained from SAMHD1 KO

Calu-3 cells as shown in Fig. 4A were used for gene ontology enrichment analysis to the category

of "Cellular component". Top ten GO terms with the best FDR-adjusted P values were plotted on

a bubble plot against the rich ratio (i.e. number of DEGs per all annotated genes of the GO term).

The number of counts of DEGs was shown in terms of the size of the bubble. The bubble plot was

generated with the online resources SR plot (https://www.bioinformatics.com.cn/srplot).

1211

1212   **Information of supplementary Table S1-S5**

1213   **Supplementary Table S1.** DEGs observed in the mRNA-seq data sets on the three comparison

1214   pairs (Ctrl vs KO1, Ctrl vs KO2 and KO1 vs KO2 cells).

1215

1216   **Supplementary Table S2.** The 681 common DEGs observed in both Calu-3 KO1 and KO2 cells

1217   as shown in Fig. 4A.

1218

1219   **Supplementary Table S3.** All GO terms in the category of "Cellular component" enriched based

1220   on the 681 common DEGs shown in Fig. 4A.

1221

1222   **Supplementary Table S4.** Enriched DEGs of the top ten GO terms as shown in Fig. S5.

1223

1224   **Supplementary Table S5.** DsiRNA and RT-qPCR primer sequences and related information.

Fig. 1

Fig. 2

Fig. 3

Fig. 4

Fig. 5

Fig. 6

Fig. 7

Fig. 8

Fig. 9

Supplementary Fig. S1

Supplementary Fig. S2

A

B

C

Supplementary Fig. S3

Supplementary Fig. S4

A

Replicate 2   Replicate 3

B

Replicate 2   Replicate 3

Supplementary Fig. S5