Human iPSC modeling elucidates mutation-specific responses to gene therapy in a genotypically

diverse dominant maculopathy

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SUMMARY

Dominantly inherited disorders are not typically considered therapeutic candidates for gene augmentation. Here we utilized patient iPSC-derived retinal pigment epithelium (iPSC-RPE) to test the potential of gene augmentation versus gene editing to treat Best disease, an autosomal dominant macular dystrophy caused by over 200 missense mutations. Gene augmentation restored calcium-activated chloride channel activity and improved rhodopsin degradation for a subset of dominant mutations depending on the putative role of the affected residue. In comparison, CRISPR-Cas9 editing of the mutant allele resulted in reversal of channel activity deficits for all mutations tested. Importantly, 95% of gene editing events in iPSC-RPE resulted in premature stop codons within the mutant allele, and single cell profiling demonstrated no adverse perturbation of RPE transcriptional programs. These results show that gene augmentation is a viable strategy for a subset of Best disease patients, and that non-responders are candidates for targeted editing of the mutant allele. Similar scenarios likely exist for other genotypically diverse dominant diseases, expanding the therapeutic landscape for patients.

INTRODUCTION

Genotypically heterogeneous dominant diseases pose significant challenges and opportunities for precision medicine (Doudna and Charpentier, 2014). Among gene therapies, gene augmentation for recessive disorders is the most developed, having spurred multiple clinical trials (Cukras et al., 2018; Lam et al., 2019; Russell et al., 2017) and FDA approval for one ocular disease (Ledford, 2017). However, gene augmentation is generally ruled out as a stand-alone therapy for dominant disorders due to a perceived need to eliminate the deleterious effects of the mutant allele. While gene editing holds promise in this regard (Bakondi et al., 2016; Li, 2018; Tsai et al., 2018), testing safety and efficacy for every mutant allele-targeted single guide RNA (sgRNA) presents practical and economic challenges. Further, gene editing may not be able to correct all mutations (Bakondi et al., 2016; Courtney et al., 2016; Pattanayak et al., 2013) and could lead to off-target mutagenesis—particularly within the heterozygous wildtype allele in dominant diseases—or other adverse events (Cromer et al., 2018). As such, it is prudent

to maximize use of gene augmentation in cases where it is deemed safe and efficacious and to reserve

gene editing strategies for those patients who truly require it.

Best disease (BD), a common type of inherited macular degeneration, is a genotypically complex

disorder transmitted primarily in an autosomal dominant fashion, although rare cases of autosomal

recessive bestrophinopathy (ARB) are known (Johnson et al., 2017). Together, autosomal dominant Best

disease (adBD) and ARB are linked to over 200 mutations in the *BEST1* gene. *BEST1* encodes a homo-

pentameric calcium-activated chloride channel (CaCC) found in the RPE, a monolayer of cells essential

for the survival and function of photoreceptors. While canine models of ARB closely mimic the human

ARB phenotype (Guziewicz et al., 2017), no animal models of adBD exist. To provide a therapeutic

testing platform for adBD, we previously developed the first human iPSC-RPE models of the disease,

which demonstrated relevant cellular dysfunction; most notably, delayed degradation of phagocytosed

photoreceptor outer segment (POS) proteins (Singh et al., 2015; Singh et al., 2013b). Recently, high-

resolution crystal structures of Best1 were elucidated, which strongly supported its role as a CaCC

(Dickson et al., 2014; Yang et al., 2014). Mutation hotspots in BEST1 were found to lie within calcium or

chloride ion binding sites, or to contribute to the structural organization of the channel, among other

putative roles (Dickson et al., 2014). Our two prior adBD iPSC-RPE models harbored mutations in a

calcium binding (N296H) or structural (A146K) domain (Singh et al., 2015; Singh et al., 2013b).

Therefore, for the present study, we generated iPSC-RPE from a third patient with adBD caused by a

chloride binding site mutation (R218C), as well as an ARB patient with compound heterozygous

mutations (R141H/A195V) (**Figure 1A**). We also employed RPE derived from two control lines: a

wildtype (WT) iPSC line and an isogenic iPSC line generated via CRISPR-based gene correction of

R218C adBD iPSCs (R218C>WT) (Steyer et al., 2018). Our findings suggest that certain mutations in

BEST1 are amenable to gene augmentation alone while others can be targeted via gene editing, contingent

on suitable sgRNA design. Furthermore, in the absence of suitable animal models, iPSC-derived RPE can

serve as a robust preclinical platform for testing mutation-specific therapeutics.

RESULTS

BEST1 mutations decrease CaCC activity in patient-specific iPSC-RPE

The six iPSC lines were tested for pluripotency, differentiated to RPE, and characterized (**Figures**

1 and S1A-D). iPSC-RPE monolayers for all adBD and control lines, but not the ARB line, showed

robust levels of BEST1 protein expression (**Figure 1D**). The profoundly decreased BEST1 level in our

ARB cultures is consistent with reports using heterologous expression or iPSC-RPE systems that showed

low or undetectable levels of R141H or A195V BEST1 (Marmorstein et al., 2018; Milenkovic et al.,

2018). As a measurement of CaCC activity, single-cell patch clamp recordings of calcium-activated

chloride current density were performed and found to be diminished in all patient-specific iPSC-RPE

relative to WT control iPSC-RPE (**Figures 1E and S1E-I**). Gene-corrected R218C>WT isogenic iPSC-

RPE control also showed CaCC current density at levels similar to native WT control lines (**Figures 1E**

and S1J), confirming that the decreased CaCC activity is indeed the result of the mutation.

Virus-mediated *BEST1* augmentation restores CaCC activity and enhances rhodopsin degradation

in ARB iPSC-RPE

We next sought to confirm that ectopic expression of wildtype human BEST1 (hBEST1) could

ameliorate the disease phenotype of R141H/A195V ARB iPSC-RPE, analogous to gene augmentation

studies using ARB canines or other iPSC-RPE model systems for ARB (Guziewicz et al., 2018; Li et al.,

2017). Single-cell patch clamp recordings of calcium-activated chloride current density were used as a

readout of efficacy in iPSC-RPE cells. In addition, we monitored degradation of rhodopsin following POS

feeding as an assay of intact RPE monolayer function.

For gene augmentation we used a lentivirus construct (*hVMD2-hBEST1-T2A-GFP*) designed to

co-express hBEST1 and GFP under control of the human *BEST1* promoter (*hVMD2*), which assures both

RPE-specific expression and *BEST1*-specific gene regulation (**Figures 2A and 2B**). Lentivirus was

chosen for transgene delivery based on its safe use in human retinal gene therapy trials (Waugh et al.,

2018) (ClinicalTrials.gov Identifiers: NCT01367444, NCT01736592) and its superior transduction

efficiency in cultured human RPE (Pawan K. Shahi, 2019; Singh et al., 2013b). GFP expression was

observed in ARB iPSC-RPE cells starting one week post-transduction, and immunocytochemical (ICC)

and western blot analysis confirmed enhanced expression of BEST1 in treated cultures (**Figures 2C, S2A-**

C). By ≥4 weeks post-transduction, CaCC current density in ARB iPSC-RPE increased significantly,

reaching levels comparable to WT iPSC-RPE (**Figures 2D,E,J and S2E**). Furthermore, transduced

monolayers of ARB iPSC-RPE demonstrated enhanced degradation of rhodopsin following POS feeding

(**Figure 2F and S2I**). These findings, together with those reported by Guziewicz et al. (Guziewicz et al.,

2018) and Li et al. (Li et al., 2017), support virus-mediated *hBEST1* gene augmentation as a treatment for

ARB.

***BEST1* augmentation restores CaCC activity and enhances rhodopsin degradation for some—but**

not all—adBD iPSC-RPE

Although not as intuitive, we also suspected that gene augmentation might be a viable solo

therapeutic strategy for a subset of adBD-causing mutations. Based on the eukaryotic Best1 crystal

structure, we hypothesized that mutations affecting chloride or calcium ion binding sites would not affect

gross structure of the channel, but rather reduce its regulatory response and/or ion conductance capacity

proportional to the ratio of wildtype versus mutant monomers. If so, we would expect increased CaCC

activity simply by shifting this ratio toward incorporation of more wildtype monomers through gene

augmentation.

The *hVMD2-hBEST1-T2A-GFP* lentiviral construct was used to transduce iPSC-RPE from all

three adBD patients (**Figure S2D**), which increased BEST1 expression in each line to a level comparable

to that observed in gene augmented ARB-iPSC-RPE (**Figure 2G**). At ≥4 weeks post-transduction, CaCC

activity was restored in iPSC-RPE containing mutations in a chloride (R218C) or a calcium (N296H)

binding site, whereas iPSC-RPE harboring the A146K mutation, which resides in a structural domain of

the channel, did not show restoration of CaCC activity (**Figure 2H,I,J and S2F-H**). Consistent with these

single-cell electrophysiological findings, gene augmentation improved rhodopsin degradation in R218C

and N296H iPSC-RPE, but not in A146K iPSC-RPE (**Figure 2K and S2J-L**).

Gene editing specifically targets the mutant allele in adBD iPSC-RPE with high efficiency and low

off-target editing

To determine whether A146K iPSC-RPE would respond to an alternative therapeutic approach,

we tested gene editing as a means to eliminate expression of the mutant *BEST1* allele. Gene editing with

CRISPR-Cas9 creates targeted double strand breaks in genomic DNA that are primarily repaired by

endogenous non-homologous end joining (NHEJ) (Cox et al., 2015), leading to insertion and deletion

mutations (indels). These indels can cause transcriptional frameshifts that lead to premature termination

codons, activation of intrinsic nonsense-mediated decay (NMD) pathways, and degradation of

transcription products (Popp and Maquat, 2016).

We first tested gene editing in R218C iPSC-RPE given our previous success targeting the R218C

mutant allele using CRISPR-Cas9, as well as the availability of an isogenic, fully gene-corrected control

iPSC line (R218C>WT) (Steyer et al., 2018). A specific sgRNA sequence targeting the R218C locus in

the mutant allele was cloned into a lentiviral plasmid that encoded both the sgRNA (expressed via a U6

promoter) and a human codon optimized *Streptococcus pyogenes Cas9* (*spCas9*)-*T2A-GFP* transcript

(expressed via a *VMD2* promoter) (**Figures 3A and 3B**). We also cloned a sgRNA control sequence

targeting the *AAVS1* safe harbor locus (Sadelain et al., 2011) into the same lentiviral plasmid backbone to

compare gene editing efficiency in iPSC-RPE from different lines. Transduction of R218C adBD iPSC-

RPE and R218C>WT iPSC-RPE with the lentivirus encoding the *AAVS1* sgRNA revealed similarly

robust and dose-dependent gene editing at the *AAVS1* locus (**Figure S3A**). We next assessed specificity of

the R218C sgRNA for the mutant *BEST1* allele. R218C adBD iPSC-RPE and R218C>WT iPSC-RPE

were transduced with the R218C sgRNA lentiviral genome editor. In R218C adBD iPSC-RPE, we

observed a dose-dependent increase in percent edited alleles (maximum >20%) (**Figure 3C** *right*);

however, minimal (<2%) editing was detected in R218C>WT isogenic control iPSC-RPE (**Figure 3C**

left). This finding indicates that the R218C sgRNA efficiently and selectively edits the R218C mutant

allele while leaving the WT allele nearly untouched, which is critical for therapeutic applications since

concurrent disruption of the WT allele would likely worsen the adBD phenotype.

To test for off-target events after gene editing R218C adBD iPSC-RPE with the R218C sgRNA,

we chose the lentiviral dose that yielded maximum editing (**Figure 3C**). Analysis of the top nine off-

target sites revealed measurable editing only at the second-ranked locus, which maps to an unannotated

region on chromosome 7 (located 140 kb from any known coding region). Conversely, we observed

remarkably efficient (24.9% ± 4.5% [SD]) editing at the on-target R218C *BEST1* locus in iPSC-RPE

(**Figure 3D**), which equates to nearly half of all mutant alleles.

Gene editing as a therapeutic approach for adBD relies on both specific targeting of the mutant

allele as well as introduction of indel mutations that result in premature termination of the mutant allele

transcript. Using deep sequencing, we examined specific indels that were introduced after gene editing

R218C adBD iPSC-RPE (**Figure 3E** *left*). In R218C iPSC-RPE edited with the R218C sgRNA lentiviral

genome editor, an average of 94.5% of the edited alleles resulted in a frameshift mutation (**Figure 3E**

right; **Table S1**). This frequency of out-of-frame indels is higher than that predicted from a recent

machine learning algorithm (Shen et al., 2018) (**Table S1**), indicating a high likelihood that indels

resulting from gene editing at the R218C locus will trigger NMD of the transcribed RNA.

To directly evaluate for NMD, we first quantified the average frequency of deep sequencing reads

corresponding to WT, mutant, and edited alleles in genomic DNA isolated from R218C iPSC-RPE edited

with R218C sgRNA or control (*AAVS1* sgRNA) lentiviral genome editor (**Figure 3F**). After editing with

R218C sgRNA, there was a significant decrease in unedited R218C mutant allele frequency and a

commensurate increase in edited R218C allele frequency. Importantly, no decrease in WT allele

frequency was observed post-editing; rather, a small increase was found. However, this increase likely

represents an artifact from large deletions in the edited mutant allele that are not detected by short read

deep sequencing (Kosicki et al., 2018). This phenomenon has been observed previously with allele-

specific genome editing (Li, 2018) and would result in an underestimation of the R218C mutant allele

editing efficiency by our sequencing methodology. Together, these results reflect highly specific editing

at the R218C mutant allele. After establishing genomic DNA editing efficiency, we sequenced RNA

extracted from gene-edited R218C iPSC-RPE (**Figure S3B**). The ratio of WT to total mutant (R218C +

edited R218C) RNA, but not genomic DNA reads, was increased in gene-edited versus control groups

(**Figure S3C**). This finding is consistent with significant degradation of mutant allele transcripts after

gene editing at the R218C allele, presumably through NMD.

Finally, we also evaluated the efficacy and specificity of gene editing in N296H iPSC-RPE and

A146K iPSC-RPE. N296H and A146K mutant allele-targeted sgRNAs were designed and cloned into

separate lentiviral plasmids. N296H iPSC-RPE and A146K iPSC-RPE were transduced with lentiviral

genome editors encoding either control (*AAVS1*) or corresponding allele-targeted sgRNA and editing

outcomes were measured via deep sequencing (**Figure 3G-J**). As seen with R218C iPSC-RPE gene

editing, a high proportion of editing in these two lines resulted in out-of-frame indels (96.0% and 95.4%

for N296H and A146K iPSC-RPE, respectively), and further quantification of WT and mutant allele

frequency indicated high specificity of the N296H and A146K sgRNAs to their respective mutant alleles.

Mutant allele-specific gene editing restores CaCC activity in iPSC-RPE derived from all tested

adBD lines without perturbing global RPE transcriptional programs

We next assessed phenotypic rescue in control versus gene-edited iPSC-RPE using lentiviral

genome editors expressing sgRNAs that target specific alleles. Single-cell patch clamp experiments

revealed restoration of CaCC activity in R218C, N296H, and A146K iPSC-RPE cells (**Figures 4A-C and**

S4A-D). To search for untoward transcriptional effects from gene editing, we performed single-cell RNA

sequencing (scRNA-seq) for 12,061 individual iPSC-RPE cells treated with genome editors. iPSC-RPE

(R218C, N296H, A146K, or isogenic control R218C>WT) were edited with genome editors encoding

either a mutant allele-targeted sgRNA or a control sgRNA targeting *AAVS1*, to generate a total of eight

separate samples (**Figure S4E-F**).

Evaluation of t-Distributed Stochastic Neighbor Embedding (t-SNE) clustering of cells across all

eight samples indicated that, by virtue of using the *hVMD2* promoter, *spCas9-T2A-GFP* transcript levels

closely corresponded with *BEST1* transcript levels (**Figure 4E**). Visual comparison of t-SNE clustering of

each individual sample demonstrated that transcriptional signatures are grossly similar between iPSC-

RPE lines whether treated with mutant allele-targeted (+GE) or control (*AAVS1*) sgRNA (**Figure 4F** *top*).

This observation was supported quantitatively by non-negative matrix factorization (NMF). NMF analysis

demonstrated that greater transcriptome variation exists between iPSC-RPE from different lines than

between iPSC-RPE from the same line treated with mutant allele-targeted or control sgRNA (**Figure**

S4F).

Additional analysis of global gene expression (**Figure 4F** *bottom*) and of a focused set of genes

related to negative or off-target effects (including cell cycle regulation, apoptosis, DNA damage response,

or innate immune response; **Figure S4G, Table S2**) did not reveal significant upregulation of those gene

sets in mutant allele-targeted (+GE) versus control sgRNA-treated samples.

DISCUSSION

The observation that adBD mutations associated with ion binding may be amenable to gene

augmentation greatly expands the patient population that might benefit from this therapeutic approach.

Among the over 200 known *BEST1* mutations, many are predicted to be directly or indirectly involved in

ion binding (Boon et al., 2009; Dickson et al., 2014). However, the stark difference in functional response

to gene augmentation among our adBD iPSC-RPE models underscores the need to vet patient candidacy

for gene augmentation carefully.

The mechanism underlying selective responsivity of adBD patients to gene augmentation cannot

be due to traditional allelic haploinsufficiency, in which half the normal amount of WT protein and no

mutant protein is produced, resulting in fewer (but fully WT) BEST1 channels. Such a situation exists in

parents of ARB patients, who have no demonstrable disease phenotype. Rather, adBD mutant monomers

must be incorporated alongside WT monomers in all (or nearly all) BEST1 channels (Johnson et al.,

2014). In the case of R218C and N296H, this would selectively cause ion binding site insufficiency and

channel impermeability, a condition that is surmountable by WT *BEST1* augmentation. In contrast, we

hypothesize that *BEST1* mutations like A146K—which converts a nonpolar amino acid to a polar amino

acid in a structural region of the protein—has more pervasive functional consequences, resulting in

resistance to gene augmentation.

Importantly, we showed that BEST1 protein levels were equivalent across all lines following gene

augmentation. Thus, the differences in functional response observed between R218C or N296H adBD

iPSC-RPE and A146K adBD iPSC-RPE cannot be due to variability in transgene expression. It is also

notable that our lentiviral constructs employed the *hVMD2* promoter, which is ideal from a translational

standpoint as it specifies expression in RPE and supports native regulation of *BEST1*. Use of alternative

promoters poses risks of off-target cell effects and/or undesirably low (ineffectual) or high (toxic) levels

of protein expression. For construct delivery, we selected lentivirus based on its current use in RPE gene

therapy trials and its excellent *in vitro* RPE transduction efficiency. However, our findings are applicable

across all *in vivo* transgene delivery platforms that possess comparable safety and transduction profiles.

There is precedence for using patient-specific iPSCs as preclinical efficacy models for gene

therapy (Vasireddy et al., 2013). Our work extends this utility by providing a framework for preclinical

testing of mutation-specific responses in a genotypically heterogenous disease using the affected cell type.

It remains to be determined whether separate adBD iPSC-RPE models will be required to assess

suitability of gene augmentation versus gene editing for every mutation, or if a few models can

sufficiently represent larger categories of mutations (*e.g.*, ion binding sites or structural regions).

For adBD mutations like A146K that are not amenable to gene augmentation, we showed that

targeted gene editing holds great promise as a future therapy. Indeed, there is a wide spectrum of *BEST1*

mutations that potentially could be treated by CRISPR-Cas9 by designing appropriate sgRNAs (examples

shown in **Table S4**). While other gene therapy strategies also exist for dominant ocular diseases, they are

often conceptually more complex, requiring knockdown of both wildtype and mutant allele transcripts

with simultaneous introduction of a modified wildtype gene (Cideciyan et al., 2018). Whether such an

approach would be safe and effective for adBD mutations that fail to respond to straightforward gene

augmentation is not known.

In our gene editing experiments, we observed higher efficiency out-of-frame editing in iPSC-RPE

when compared to a prior study using undifferentiated iPSCs (Steyer et al., 2018). This finding is

consistent with recent reports of variable mutation bias across different cell types (Shen et al., 2018), and

points to the importance of evaluating gene editing using the specific cell type(s) targeted by disease, and

not surrogate cell types. In addition, editing at *BEST1* in iPSC-RPE did not provoke an increase in

expression of genes associated with cell cycle regulation, apoptosis, DNA damage response, or innate

immune response in comparison to editing at a well characterized safe-harbor locus (Sadelain et al., 2011)

with a previously described sgRNA (Mali et al., 2013). This result is in contrast to studies in other cell

types that have reported potential for Cas9-mediated gene editing to provoke undesirable effects,

including innate immune response (Wienert et al., 2018) and apoptosis, among other concerns (Cromer et

al., 2018).

Our results provide a blueprint to guide gene therapy choice in the era of gene augmentation and

gene editing. With its inherently larger target populations and established track record in patients, it is

practical to utilize gene augmentation when possible, reserving gene editing for mutations that require

allele repair or knockout or are otherwise untreatable by gene augmentation. It is noteworthy that the two

adBD lines that demonstrated restoration of CaCC activity with gene augmentation or gene editing did so

with equal efficacy, underscoring the suitability of Best disease for either approach. Other desirable

characteristics of Best disease as a clinical candidate for gene augmentation or gene editing include 1) a

wide time window for gene therapy intervention, 2) accessibility of RPE using standard surgical

techniques, 3) a small (5.5 mm diameter) treatment area, 4) availability of noninvasive retinal imaging

and functional assessment tools, and 5) growing patient safety data from other RPE-based gene therapy

trials (Cukras et al., 2018; Lam et al., 2019; Russell et al., 2017). As such, Best disease is well-positioned

to become the first genotypically heterogeneous disorder with dominant and recessive inheritance patterns

to have a full menu of therapeutics for all affected individuals. Furthermore, implications of this work

likely extend beyond the eye and Best disease to other intractable monogenic conditions caused by

mutations in multimeric ion channels, including congenital myasthenic syndromes and some forms of

epilepsy (George, 2004; Schaaf, 2014; Villa and Combi, 2016).

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AUTHOR CONTRIBUTIONS

D.S. and D.M.G. designed the gene augmentation experiments. B.S., D.S., D.M.G. and K.S. designed the gene editing experiments. P.K.S. and B.R.P. performed and analyzed the electrophysiology experiments. D.S. and B.S. performed all other experiments with contributions from R.V., K.L.E., C.B, S.S.S., A.A., and E.C. K.M., S.S., V.P., A.F.S., and S.R. were primarily responsible for the scRNA-seq analysis. B.A.T. and E.M.S. provided and characterized the ARB iPSC line, D.S., B.S., K.S., and D.M.G. wrote the manuscript and analyzed data with input from all authors. D.M.G., K.S., and B.R.P. supervised research.

COMPETING INTERESTS STATEMENT

The authors declare no competing interests.

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FIGURES AND FIGURE LEGENDS

Figure 1

Figure 1 | *BEST1* mutations reduce CaCC current in Best disease iPSC-RPE. (A) *top*, image (in

grayscale) of a normal fundus; *bottom left*, fundus image of an ARB patient with R141H/A195V

compound heterozygous mutations in *BEST1* showing a vitelliform lesion in the macula (*red* arrowhead)

as well as small lesions outside the macula (*white* arrowheads); *bottom right*, fundus image showing a

vitelliform macular lesion (*red* arrowhead) in an adBD patient with a heterozygous R218C encoding

mutation in *BEST1*. **(B)** A fully functional homo-pentameric BEST1 channel is formed by assembly of

WT subunits (*green*), allowing movement of chloride ions (*yellow* circles) upon binding of calcium ions

(*blue* circle) (based on the eukaryotic Best1 crystal structure (Dickson et al., 2014)). **(C)** Light

microscopic images of normal, patient-specific, and isogenic control iPSC-RPE used in this study. Scale

bar = 50 µm (applies to all images in C). **(D)** Immunocytochemical analyses of ZO-1 and BEST1 protein

expression in iPSC-RPE cells. Scale bar = 50 µm (applies to all images in D). **(E)** CaCC current density-

voltage plots from WT, R141H/A195V ARB, or adBD iPSC-RPE cells (identical order as in panels C and

D), as determined by calculating the difference in average chloride currents in the presence or absence of

calcium (Figure S1). For +calcium: n = 6 cells for WT, 12 cells for R141H/A195V ARB, and 5 cells for

R218C adBD; for no calcium: n = 8 cells for WT, 12 cells for R141H/A195V ARB, and 8 cells for

R218C adBD (data combined from at least two replicates).

Figure 2

Figure 2 | Mutation-dependent rescue of Best disease phenotypes by gene augmentation (GA). (A)

Construct used for BEST1 gene augmentation. **(B)** Presence or absence of GFP fluorescence in a single

dissociated iPSC-RPE cell (*left*) or iPSC-RPE monolayers (*right*) before (*top*) or after (*bottom*) gene

augmentation. Scale bar = 10 µm (*left*); 50 µm (*right*). **(C)** Western blot-based quantification of BEST1

protein levels (normalized to ACTIN) in WT iPSC-RPE, ARB iPSC-RPE, and ARB iPSC-RPE after

BEST1 augmentation. **(D)** CaCC current density-voltage plots after gene augmentation of ARB iPSC-

RPE. n = 7 cells for +calcium and 5 cells for no calcium (data combined from two replicates (Figure S2).

(E) CaCC conductance for individual ARB iPSC-RPE cells at 75 mV before or after gene augmentation.

The number of cells is the same as for panels 1E and 2D. **(F)** Western blot-based quantification of

rhodopsin levels 120 hr after photoreceptor outer segment (POS) feeding in WT iPSC-RPE, ARB iPSC-

RPE, and ARB iPSC-RPE after *BEST1* augmentation. **(G)** Western blot-based quantification of BEST1

protein levels (normalized to ACTIN) in adBD iPSC-RPE before and after *BEST1* augmentation. **(H)**

CaCC current density-voltage plots after gene augmentation of adBD iPSC-RPE. For +calcium: n = 11

cells for R218C, 7 cells for N296H, and 5 cells for A146K; for no calcium: n = 9 cells for R218C, 6 cells

for N296H, and 8 cells for A146K (data combined from two replicates). **(I)** CaCC conductance for

individual adBD iPSC-RPE cells at 75 mV before and after gene augmentation. The number of cells is the

same as for panels 1E and 2H. **(J)** Mean CaCC conductance at 75 mV before or after gene augmentation

for all iPSC-RPE tested. **(K)** Rhodopsin levels 48 hours after feeding POS to adBD iPSC-RPE with or

without gene augmentation. **(L)** Model to illustrate gene augmentation findings in ARB and adBD iPSC-

RPE. Error bars in 2E and 2I represent mean ± SEM; ns = p ≥0.05, * for p <0.05, ** for p <0.01. Western

blots used for quantification are shown in Figure S2.

Figure 3

Figure 3 | Gene editing (GE) specifically and efficiently introduces frameshifts within the mutant

allele in adBD iPSC-RPE. (A) Lentiviral genome editing construct expressing *sp*Cas9 and mutant allele-

targeted sgRNAs. **(B)** Diagram showing the heterozygous base pair substitution in R218C adBD and the

design of the R218C sgRNA. **(C)** Percent of edited alleles after treatment of R218C>WT isogenic control

iPSC-RPE and R218C adBD iPSC-RPE with R218C sgRNA lentiviral genome editor (single replicate at

0, 5, 50, or 150 µl dose). **(D)** Frequency of edited alleles at on-target and top nine ranked off-target loci in

iPSC-RPE treated with R218C sgRNA lentiviral genome editor (n=3 for control and n=5 for +GE, except

n=3 at *chr 7* locus). **(E, G, I)** Representative deep sequencing reads after treatment of R218C, A146K, or

N296H iPSC-RPE with R218C sgRNA, A146K sgRNA, or N296H sgRNA lentiviral genome editor,

respectively; and corresponding average indel frameshift frequency for iPSC-RPE (two replicates per line;

data shown in Table S1). **(F, H, J)** Percentage of WT, unedited mutant, or edited mutant allele sequencing

reads in R218C, A146K or N296H iPSC-RPE treated with R218C sgRNA, A146K sgRNA, or N296H

sgRNA lentiviral genome editor, respectively. Replicates: n = 5 (R218C iPSC-RPE); n = 2 (A146K IPSC-

RPE and N296H RPE). Error bars represent mean ± SD; ns = p ≥0.05, * for p <0.05, ** for p <0.01, ***

for p <0.001, **** for p <0.0001.

Figure 4

Figure 4 | Gene editing (GE) rescues CaCC activity in adBD iPSC-RPE without disrupting RPE transcriptional identity. (A) CaCC current density-voltage plots from single-cell patch clamp experiments of iPSC-RPE treated with control (*AAVS1*) or mutant allele-targeted sgRNA lentiviral genome editor. For +calcium: n = 6 cells for *AAVS1*, 11 cells for A146K, 10 cells for R218C, 9 cells for N296H; for no calcium: n = 9 cells for *AAVS1*, 10 cells for A146K, 7 cells for R218C, 9 cells for N296H (data combined from two replicates). **(B)** CaCC conductance for individual iPSC-RPE cells, and **(C)** mean CaCC conductance at 75 mV. The number of cells is the same as for panel A. **(D)** Model depicting postulated effects of mutant allele-targeted gene editing in adBD iPSC-RPE. **(E)** t-SNE plot of single iPSC-RPE cells across all 8 samples with relative expression of *BEST1* (*left*) and *spCas9-T2A-GFP* (*right*) depicted via increasing shades of *blue*. Total number of cells analyzed (n) is shown. **(F)** *Top*, t-SNE plot of single cells (*black* dots) from each treated sample. Number of cells analyzed (n) for each sample is shown. *Bottom*, Volcano plots of transcriptome-wide differences in expression of individual genes (*red* or *green* dots) between iPSC-RPE of the same genotype treated with mutant allele-targeted sgRNA (*green*) versus control (*AAVS1*, *red*) sgRNA lentiviral genome editor. $p < 0.01$ was the threshold for determining significant versus non-significant changes in gene expression. Error bars in 4B represent mean ± SEM. * for $p < 0.05$, and ** for $p < 0.01$.

Figure S1. Related to Figure 1

A Karyotype

B R141H mutation*

A195V mutation

*Complementary DNA sequence

C Transepithelial Electrical Resistance

D

E Normal

F R141H/A195V ARB

G N296H adBD

H A146K adBD

I R218C adBD

J R218C>WT Isogenic control

Figure S1 | Characterization of iPSC-RPE. (A) Karyotype analysis for ARB iPSCs. **(B)** DNA

sequencing confirming R141H and A195V encoding mutations in ARB iPSCs. **(C)** Net transepithelial

electrical resistance (TER) ($\Omega \cdot cm^2$) for iPSC-RPE from all six lines. The dashed line demarcates the

minimum expected TER ($150 \ \Omega \cdot cm^2$). Replicates: n=12 for each line (4 transwells from 3 replicates

each), error bars represent mean ± SD. **(D)** Gene expression analysis (RT-PCR) of selected RPE-specific

markers in all six lines. **(E-J)** Chloride current traces, measured in the presence (*black*) or absence (*gray*)

of calcium over a voltage ramp (-100 to +100 mV), that were used to generate CaCC current density plots

in Figure 1E. 4.5 µM calcium was used for +calcium conditions. The number (n) of individual cells patch

clamped in the presence or absence of calcium in order to calculate CaCC current densities is shown in

the top left corner of each graph. Data were obtained from at least two replicates.

Figure S2. Related to Figure 2

Figure S2 | Gene augmentation (GA) restores CaCC function in ARB iPSC-RPE and R218C and

N296H adBD iPSC-RPE, but not in A146K adBD iPSC-RPE. (**A**) GFP fluorescence in R141H/A195V

ARB iPSC-RPE transduced with lentivirus expressing BEST1. Scale bar = 100 µm. (**B**) ICC analysis of

BEST1 and ZO-1 expression in R141H/A195V iPSC-RPE transduced with lentivirus expressing BEST1.

Increased BEST1 expression is observed in R141H/A195V iPSC-RPE cells following gene augmentation.

Scale bar = 50 µm (applies to both images). (**C**) Representative western blot showing levels of BEST1 in

iPSC-RPE. Protein samples from the rhodopsin degradation assays (see below) were used to assess

BEST1 levels. (**D**) GFP fluorescence in adBD iPSC-RPE transduced with lentivirus expressing hBEST1.

Scale bar = 100 µm (applies to all three images). (**E**) Chloride current traces of R141H/A195V iPSC-RPE

after gene augmentation measured in the presence (*black*) or absence (*gray*) of calcium. (**F-H**) Chloride

current traces for adBD iPSC-RPE after gene augmentation, measured in the presence (*black*) or absence

(*gray*) of calcium over a voltage ramp (-100 to +100 mV), that were used to obtain CaCC current density

plots shown in Figure 2. 4.5 µM calcium was used for +calcium conditions. Cells with green fluorescence

were used for all patch clamp measurements after gene augmentation. The number (n) of individual cells

patch clamped in the presence or absence of calcium (in order to calculate CaCC current densities) is

shown in the top left corner of each graph. Data were obtained from at least two replicates. (**I-K**) *left*,

Western blots used for the rhodopsin degradation assay, *right*, and corresponding grayscale images of

western blots used to quantify levels of rhodopsin shown in Figure 2 (boxes represent areas used for

quantification). For each lane, the boxed area was selected to include bands corresponding to fully

denatured rhodopsin and its aggregated forms.

Figure S3. Related to Figure 3

Figure S3 | Quantification of DNA and RNA sequencing reads in gene-edited (GE) iPSC-RPE. (A)

Percent of *AAVS1* alleles edited (% Edited) in R218C adBD iPSC-RPE and R218C>WT isogenic control

iPSC-RPE transduced with *AAVS1* sgRNA lentiviral genome editor at 0, 5, 50, or 150 µl dose. **(B)** Percent

of WT, unedited R218C, or edited R218C RNA reads corresponding to Figure 3F. **(C)** Ratio of WT to

total mutant (MT) allele (unedited + edited) DNA (*left*) and mRNA transcript reads (*right*) from R218C

iPSC-RPE cultures treated with R218C sgRNA lentiviral genome editor (n=5) or control (n=3 for *AAVS1*

lentiviral genome editor or no lentiviral genome editor). Error bars represent mean $\pm$ SD; ns = p $\geq$0.05, *

for p <0.05, ** for p <0.01, *** for p <0.001, **** for p <0.0001.

Figure S4. Related to Figure 4

Figure S4 | Gene editing (GE) restores CaCC activity in iPSC-RPE from all tested adBD lines. (A-

D) Chloride current traces, measured in the presence (*black*) or absence (*gray*) of calcium over a voltage

ramp (-100 to +100 mV), that were used to calculate CaCC current density plots after gene editing of

adBD iPSC-RPE. iPSC-RPE was edited using lentiviral genome editors encoding sgRNA targeting **(A)**

AAVS1 site in A146K adBD iPSC-RPE, **(B)** A146K mutation in A146K adBD iPSC-RPE, **(C)** N296H

mutation in N296H adBD iPSC-RPE, or **(D)** R218C mutation in R218C adBD iPSC-RPE. Cells with GFP

fluorescence were used for whole cell patch clamp measurements and 4.5 µM calcium was used for

+calcium conditions. The number (n) of individual cells patch clamped with or without calcium is shown

at the top left corner of each graph. Data were obtained from two replicates. **(E)** Percent of analyzed cells

per sample for which *spCas9-T2A-GFP* transcripts were captured using scRNA-seq. **(F)** Dendrogram tree

depicting relative similarity between samples. Non-negative matrix factorization comparison across

samples indicates that greater transcriptional variability exists between iPSC-RPE lines than in the same

iPSC-RPE line treated with lentiviral genome editors (*AAVS1* lentiviral genome editor versus *BEST1*

mutant allele-targeted lentiviral genome editor). The dendrogram shows the similarity of the

transcriptomes from each sample, derived from the average Jaccard coefficient between gene clusters

from one sample and those from another sample. The y-axis denotes 1-average Jaccard coefficient and

indicates the distance between different samples (tree tips) as well as between groups of samples (internal

nodes). **(G)** Differential gene expression in 5 curated gene sets associated with cell cycle regulation

(*circles*), apoptosis (*triangles*), DNA damage response (*diamonds*), innate immune response (*asterisks*),

or RPE-identity (*squares*) in control (*AAVS1*) lentiviral genome editor versus mutant allele-targeted

lentiviral genome editor treated samples. For one sample pair (N296H iPSC-RPE), genes associated with

a potential adverse treatment effect were upregulated in control lentiviral genome editor-treated sample

compared to the mutant allele-targeted lentiviral genome editor sgRNA-treated sample.

METHODS

CONTACT FOR REAGENT AND RESOURCE SHARING

Further information and requests for resources and reagents should be directed to and will be fulfilled by the Lead Contact, David Gamm (dgamm@wisc.edu).

EXPERIMENTAL MODEL AND SUBJECT DETAILS

iPSC lines

A total of 6 iPSC lines, 2 control and 4 patient-specific, were used in this study. In addition to one control iPSC line (normal) and two adBD patient-specific iPSC lines (A146K adBD and N296H adBD) previously used by our group for Best disease modeling (Singh et al., 2013b), we used three new iPSC lines. Two of the new iPSC lines harbored patient specific mutations: R218C for adBD and R141H/A195V for ARB. One isogenic control iPSC line was obtained by CRISPR/Cas9-based gene correction of the patient-specific R218C adBD iPSC line (Steyer et al., 2018). All iPSC lines were cultured either on mouse embryonic fibroblasts (MEFs) or on Matrigel. Lines cultured on MEFs were maintained using iPS media (Dulbecco's Modified Eagle's Medium (DMEM)/F12 (1:1), 20% Knockout Serum Replacement (KOSR), 1% MEM non-essential amino acids, 1% L-glutamine, 0.2 mM β-mercaptoethanol, 100 ng/ml FGF-2), and iPSCs cultured on Matrigel were cultured with either mTeSR1 or StemFlex media. MEFs, FGF-2, and Matrigel were purchased from WiCell (Madison, WI). All other cell culture reagents were purchased from ThermoFisher Scientific. Karyotype analysis was performed as a quality control. The manuscript does not contain human subject or animal studies, and all work with iPSC lines was carried out in accordance with institutional, national, and international guidelines and approved by the Stem Cell Research Oversight Committee at the University of Wisconsin-Madison.

METHOD DETAILS

Differentiation of iPSC lines to RPE

Differentiation of iPSCs to RPE was performed as previously described (Singh et al., 2013a; Singh et al., 2013b). Briefly, iPSCs were enzymatically lifted (1 mg/ml dispase for cells cultured on MEFs; 2 mg/ml dispase or 1 ml ReLeSR for cells cultured on Matrigel) to form aggregates, also referred to as embryoid bodies (EBs). EBs were maintained in suspension culture either in EB media (iPS media without FGF-2) and then switched to neural induction media (NIM) on day 4, or gradually weaned off mTeSR1/StemFlex and transitioned to NIM by day 4. NIM is composed of 500 ml DMEM/F12 (1:1), 1% N2 supplement, 1% MEM non-essential amino acids, 1% L-glutamine, 2 µg/ml heparin. EBs were plated on laminin (Cat# 23017015) coated 6-well plates (Nunc; Thermo Fisher Scientific) on day 7. On day 16, neural rosettes were mechanically lifted, leaving adherent cells behind that were maintained in retinal differentiation media (RDM; DMEM:F12 (3:1), 2% B27 without retinoic acid, 1% antibiotic-antimycotic solution). For the first four media changes, RDM was supplemented with 10 µM SU5402 and 3 µM CHIR99021.

After 60 days of differentiation, pigmented patches of RPE were micro-dissected, dissociated using Trypsin-EDTA (0.25%), and plated on laminin coated surfaces in RDM with 10% FBS and Rho kinase inhibitor (ROCKi; Y-27632). After 2 days, the media was changed to RDM with 2% FBS, and eventually to RDM once the cells were fully confluent. There were no differences observed between RPE differentiated from iPSCs cultured on MEFs and Matrigel. Mutant and wildtype genotypes of iPSC-RPE were verified by Sanger sequencing periodically. Heparin (Cat# H-3149) and SU5402 (Cat# SML0443-25MG) were from Sigma-Aldrich, CHIR99021 (Cat# 4423) was from Tocris Bioscience, and ReLeSR

was purchased from STEMCELL Technologies. All other differentiation reagents were purchased from

ThermoFisher Scientific.

Gene expression analysis

Reverse transcriptase-PCR was used to assess RPE-specific gene expression in RPE derived from

different iPSC lines as described previously (Singh et al., 2013b). Primers used are listed in Key

Resources Table.

Generation of lentiviral vectors

Lentiviral plasmid with the human *VMD2* promoter driving expression of *hBEST1-T2A-GFP* was

provided by Alfred S. Lewin (University of Florida). LentiCRISPR v2 (LCv2) plasmid was purchased

from Addgene (Cat# 52961), and molecular cloning was used to insert specific sgRNA sequences (Table

S4) as described (Steyer et al., 2018). Lentiviral gene editing plasmids containing specific sgRNA

sequences and the human *VMD2* promoter driving expression of *spCas9-T2A-GFP* were then generated

as described hereafter (all primers and sgRNA sequences are listed in the Key Resources Table). To

begin, the '*T2A-GFP-WPRE*' sequence was amplified from the *hVMD2-hBEST1-T2A-GFP* plasmid using

LCv2-GFP.Gib.F and .R primers and Q5 2X MM (NEB, Cat# M0492L). The '*2A-Puro-WPRE*' sequence

was then removed from the LCv2 plasmid via restriction digestion with PmeI (NEB, Cat# R0560S) and

BamHI (NEB, Cat# R3136S). The digestion product was resolved on a 0.7% agarose gel and the plasmid

backbone was purified using the Monarch gel purification kit (NEB, Cat# T1020S). The '*T2A-GFP-*

WPRE' sequence was inserted into the digested backbone using the Gibson Assembly kit (SGI, Cat#

GA1100) per the manufacturer's instructions. The completed Gibson Assembly reaction was then

amplified using chemically competent *E. coli* (NEB, Cat# C3040H) and Sanger sequenced to confirm

insertion of '*T2A-GFP-WPRE*' using LCv2-GFP.seq.L and LCv2-GFP.seq.R primers. This intermediate

plasmid product (*pLCv2-GFP*) was digested with AfeI (NEB, Cat# R0652S) and EcoRI-HF (NEB, Cat

R310S) to remove the constitutive EF-1 alpha core promoter. The desired digestion product was purified

as described above. The *hVMD2* promoter was then PCR amplified from *hVMD2-hBEST1-T2A-GFP*

using Q5 2X MM and VMD2.LCv2.GFP.Gib.F and .R primers, followed by insertion into the digested

LCv2-GFP backbone via Gibson Assembly. Next, the completed Gibson reaction was transformed into

chemically competent *E. coli* and the sequence of the final product *hVMD2-spCas9-T2A-GFP* was

confirmed via Sanger sequencing using VMD2.LCv2.GFP.seq.L and .R primers. Subsequently, specific

sgRNAs were cloned into *hVMD2-spCas9-T2A-GFP* using the same restriction digest and Gibson

Assembly protocol described for generation of the LCv2 gene editing vectors.

Lentivirus production and cell transduction

Lentivirus stocks were generated by the Cell Culture Core of the UW Department of Dermatology

Skin Disease Research Center (Madison, WI). Briefly, HEK293 cells cultured on 10-cm dishes were

transfected with lentiviral plasmids—10 µg of sgRNA encoding lentiviral plasmid (*hVMD2-hBEST1-*

T2A-GFP, hVMD2-spCas9-T2A-GFP or LCv2); 5 µg of psPax2 (Addgene, Cat# 12260), and 2 µg of

pMD2.G (Addgene, Cat# 12259)—using Lipofectamine (ThermoFisher; Cat# 11668019). After 15 hours,

culture medium (DMEM with 10% FBS) was replaced with fresh media containing 1% Penicillin-

Streptomycin. Media containing lentiviruses was collected the next day and viral titers were calculated

using QuickTiter Lentivirus Titer Kit (Cell Biolabs, Cat# VPK-107). Titers for lentiviral stock were:

Lentivirus	Titer (Transduction units/ml)
hVMD2-hBEST1-T2A-GFP	$22 \times 10^{6-7}$
hVMD2-spCas9-T2A-GFP R218C sgRNA	$74.16 \times 10^{6-7}$
hVMD2-spCas9-T2A-GFP A146K sgRNA	$74.26 \times 10^{6-7}$

hVMD2-spCas9-T2A-GFP N296H sgRNA	68.91 x10$^{6-7}$
hVMD2-spCas9-T2A-GFP AAVS1 sgRNA	74.01 x10$^{6-7}$

579   For iPSC-RPE transduction, monolayers of iPSC-RPE on transwells were treated with 0, 5, 50, or

580 150 µl (Figure 3C) or 150 µl alone of specified lentivirus preparation for all other experiments. Media

581 was changed on day 2 to RDM, and cells were maintained in culture with media changes every 3 days

582 until used for sequencing or other analyses.

584 **Transepithelial electrical resistance (TER) measurements**

585   Monolayers of RPE cultured on transwell inserts (Corning, #3470) were used for all TER

586 measurements. To perform the measurements, we employed an epithelial voltohmmeter (EVOM2) with

587 chopstick electrodes (STX2) from World Precision Instruments (Sarasota, USA) according to

588 manufacturer's instructions. Electrodes were sterilized with ethanol, and then rinsed in sterile Milli-Q

589 water followed by HBSS before measuring electrical resistance of RPE monolayers. Differences between

590 TER values of transwells with cultured RPE monolayers versus background measurements of cell-free

591 transwell inserts were multiplied by the surface area of the transwell membrane to obtain net TER values

592 in $\Omega \cdot cm^2$.

594 **Calcium-activated chloride channel current density measurements**

595   All iPSC-RPE cells used for chloride current measurements were cultured as a monolayer on

596 transwells. To singularize cells prior to measurement, transwells were washed twice with 0 Na-CMF

597 solution (135 mM N-Methyl-D-glucamine (NMDG)-Cl, 5 mM KCl, 10 mM HEPES, 10 mM glucose, 2

598 mM EDTA-KOH, pH adjusted to 7.4) and then incubated with papain enzyme solution (0 Na-CMF

599 solution containing 2.5 µl/ml papain (46 mg/ml, MP Biomedicals LLC, Cat#100921), 0.375 mg/ml

adenosine, 0.3mg/ml L-cysteine, 0.25 mg/ml L- glutathione, and 0.05mg/ ml taurine) for 30 minutes at

$37^{\circ}C$/5% CO_2. To stop the reaction, 0.01% BSA was added to the enzymatic solution. After washing

twice with 0 Na-CMF solution, cells were dispersed in extracellular solution containing 140 mM NaCl, 10

mM HEPES, 3 mM KCl, 2 mM $CaCl_2$, 2 mM $MgCl_2$, and 5.5 mM glucose adjusted to pH 7.4 with NaOH

by gentle pipetting.

Cells with polarized RPE morphology post-dissociation (Figure 2B, *left*) were used to measure

chloride currents. To test effects of gene augmentation or gene editing on *BEST1* mutant iPSC-RPE by

single-cell patch clamp analysis, only cells with GFP fluorescence (from transduction with *hVMD2-*

hBEST1-T2A-GFP for gene augmentation or *hVMD2-spCas9-T2A-GFP* encoding *AAVS1* sgRNA or

mutant allele-targeted sgRNAs for gene editing) were used. Current recordings on these cells were

performed using the conventional whole-cell patch clamp technique with an Axopatch 200A amplifier

controlled by Clampex software program via the digidata 1550 data acquisition system (Axon

Instruments, CA). Fire-polished borosilicate glass pipettes with 3-5 MΩ resistance were filled with pipette

solution containing 4.5 µM calcium or no calcium.

Recordings were carried out at room temperature and current-voltage tracings were established

using ramps from -100 to +100 mV for 1000 ms. The pipette solution with calcium was comprised of (in

mM) 146 CsCl, 5 (Ca^{2+})-EGTA-NMDG, 2 $MgCl_2$, 8 HEPES, and 10 sucrose at pH 7.3, adjusted with

NMDG. Another pipette solution devoid of calcium was comprised of (in mM) 146 CsCl, 5 EGTA-

NMDG, 2 $MgCl_2$, 8 HEPES, and 10 Sucrose at pH 7.3, adjusted with NMDG. Both of these pipette

solutions were mixed to make the solution containing 4.5 µM free calcium as described

previously(Kuruma and Hartzell, 2000), which was then used for patch clamping.

Current density values were obtained by dividing current amplitude with cell capacitance

measurements. CaCC current densities for iPSC-RPE are represented as differences between mean 4.5

μM calcium response and mean no calcium response from a total of at least five cells for each condition.

At least two differentiations were used as replicates to obtain data for each line.

Immunocytochemistry

iPSC-RPE cultured on transwell inserts were washed with PBS and fixed with 4%

paraformaldehyde for 10 minutes at room temperature (RT). After washing fixed cells three times with

PBS, transwell membranes were placed in blocking solution (10% normal donkey serum with 5% BSA,

1% fish gelatin and 0.5% Triton-X100 in PBS) for one hour at RT, and then incubated overnight at 4 $^{\circ}$C

in primary antibody (1:100 mouse anti-Bestrophin (Millipore, Cat# MAB5466); 1:100 rabbit anti-ZO-1

(ThermoFisher Scientific, Cat# 61-7300)) prepared in blocking solution. Cells were then washed three

times in PBS and incubated for 30 minutes at RT in appropriate secondary antibody (ThermoFisher

Scientific; 1:500 Donkey anti-Mouse IgG (Cat# A31571); 1:500 Donkey anti-Rabbit IgG (Cat# A10040))

prepared in blocking solution. Cells were again washed three times in PBS, incubated in DAPI (1:500;

ThermoFisher; Cat# D1306) for 30 minutes, mounted using prolong gold with DAPI (ThermoFisher; Cat#

P36931), and imaged using Nikon A1R confocal microscope with NIS Elements AR 5.0 software.

Rhodopsin degradation assay

Photoreceptor outer segment (POS) feeding of iPSC-RPE was performed as described previously (Singh

et al., 2013b). Briefly, bovine POS (InVision BioResources (Seattle, WA)) were gently resuspended in

DMEM. 100 µl media was then removed from each transwell insert, 6.25×10^6 POS were added, and cells

were incubated at 37 $^{\circ}$C and 5% CO_2 for 2 hours. Afterward, POS containing RDM was removed and

each transwell was washed thoroughly three times using DPBS. Following the washes, cells were

harvested (0 time point) or further incubated in fresh RDM for prescribed periods of time. At each time

point, transwells were washed, 100 µl RIPA buffer (ThermoFisher; Cat# 89900) containing protease

inhibitor cocktail (Sigma-Aldrich; Cat# P8340) was added, and cells were incubated on ice for 30 minutes

to extract total cell protein. Protein quantification was performed using the DC Protein assay kit II (Bio-

Rad, Cat# 5000112).

Western blots were then performed to monitor rhodopsin degradation as described (Singh et al.,

2015; Singh et al., 2013b). Briefly, protein lysates were denatured in 1X Laemmli buffer (reducing) and

kept on ice for 10 minutes. Protein samples were then separated on 4-20% mini-Protean TGX gels (Bio-

Rad; Cat# 4568095) and electroblotted onto PVDF membranes (Millipore; IPFL10100). After blotting,

membranes were dried at RT for 15 minutes, re-activated in methanol for 1 minute, and then incubated in

blocking buffer (1:1 Odyssey blocking buffer (LI-COR Biosciences; Cat# 927-40000):PBS) for 1 hour.

Post-blocking, blots were incubated in primary antibodies (1:500 mouse anti-rhodopsin (Millipore, Cat#

MABN15); 0.1 µg/ml rabbit anti-beta actin (Abcam, Cat# ab8227)) in blocking buffer with 0.1% Tween-

20 overnight, washed three times for 5 minutes each in PBS with 0.1% Tween-20, incubated for 1.5 hours

at RT in appropriate secondary antibody (LI-COR Biosciences; 1:20,000 Donkey anti-Rabbit IgG (Cat#

926-32213); 1:20,000 Donkey anti-Mouse IgG (Cat# 926-68022)) in blocking buffer with 0.1% Tween-

20 and 0.01% SDS, and then washed three times for 5 minutes each in PBS with 0.1% Tween-20. An

Odyssey infrared Imager (LI-COR Biosciences) was used to image blots using Image Studio software.

ImageJ was used for quantification of relevant protein bands. Samples from rhodopsin degradation assays

were also used to assess levels of BEST1 protein before and after gene augmentation. Western blots were

performed as described above, using 1:1000 rabbit anti-Bestrophin1 antibody (LAgen Laboratories; Cat#

016-Best1-01) and 1:1000 mouse anti-Actin antibody (Millipore; Cat# MAB1501) as primary antibodies.

Deep sequencing analysis of DNA and RNA read frequency

Cells were singularized with TrypLE Express (Gibco, Cat# 12605010) per manufacturer's

instructions. Total DNA and/or RNA was extracted using QuickExtract DNA (Epicentre, Cat# QE09050)

or QuickExtract RNA (Epicentre, Cat# QER090150), respectively. Both DNA and RNA extractions were

performed per manufacturer's instructions with the following minor modifications: 1) a ratio of 10,000-

25,000 cells per 50 µl of QuickExtract solution was routinely used, and 2) an optional DNase 1 treatment

was omitted from the RNA extraction protocol. All samples were stored at -80 ℃ until use.

RNA was reverse transcribed to cDNA using the ProtoScript II First Strand synthesis kit (NEB, Cat#

E6560S) and synthesis was performed with the "random primer" option included within the kit. 4 µl of

crude RNA extract was added to each cDNA reaction.

In preparation for targeted deep sequencing, Illumina adapter sequences and sample-specific

barcodes were appended to genomic or cDNA amplicons via overhang PCR as described (Steyer et al.,

2018). Purified amplicon libraries were assembled into 2 nM total DNA in DNAse/RNAse free H_2O and

sequenced using 150 nucleotide paired end reads using MiSeq (6M or 15M total reads) at the UW Biotech

Center (Madison, WI) with the following loading condition: 8 pmol total DNA and 15% PhiX DNA.

Raw FASTQ files were read and aligned to expected amplicons using a command line implementation of

CRISPResso (v1.0.8) (Pinello et al., 2016). Full commands used for analysis are available upon request.

'Percent allele identity' or 'percent edited' were determined using the software's standard output table of

individual read identities. Sequencing reads with counts <100 were not included in the analysis. All

FASTQ files are available upon request.

Single-cell RNA sequencing (scRNA-seq)

iPSC-RPE cultures derived from the A146K, N296H, and R218C adBD patient lines, and from an

isogenic gene-corrected control line derived from the R218C line (R218C>WT) were transduced with 150

µl of *hVMD2-spCas9-T2A-GFP* encoding specific sgRNAs as described in the 'Lentivirus production

and cell transduction' section. For each sample, sgRNAs were either targeted to mutant *BEST1* or to the

AAVS1 locus (control). On day 14, cells were dissociated from transwells with a papain dissociation kit

(Worthington Biochemical, Cat# LK003150) and filtered using a Flowmi cell strainer (Bel-Art SP

Scienceware, Cat# H13680-0040) to obtain single-cell suspension. Cells were then prepared for scRNA-

seq with the droplet-based 10X Genomics GemCode platform according to the manufacturer's

instructions. In brief, singularized cells were encapsulated in oil beads containing a unique molecular

identifier (UMI) barcode. The cells were then lysed and cDNA libraries were created featuring cell and

transcript-specific molecular identifiers. Libraries were sequenced using an Illumina HiSeq2500 Rapid

Run and reads were aligned to a custom reference genome consisting of the human hg19 GRCh38

genome and an added gene for the *spCas9-T2A-GFP* transcript.

scRNA-seq data analysis

Gene edited iPSC-RPE were clustered based on their genome-wide transcriptome using the t-

Distributed Stochastic Neighbor Embedding (t-SNE) algorithm with the 10X Genomics Loupe Cell

Browser software (v2.0.0). Reads for each pair of samples (*BEST1* mutant allele-targeted sgRNA vs

AAVS1 sgRNA control) were aligned, analyzed, clustered with Cell Ranger v2.1.1, and compared to

detect significant differences in gene expression, with p values adjusted using the Benjamini-Hochberg

correction for multiple tests. $P < 0.01$ was used as the significance threshold for all analyses. Cell Ranger

using the aggregate feature was run to concatenate each pair of samples with the same genotype, and

differential gene expression within each pair (with gene editing at either the *AAVS1* or *BEST1* locus) was then

analyzed. Potential adverse events were probed using gene lists curated from gene ontology terms

associated with the cell cycle, apoptosis, DNA damage response, and the innate immune response, as well

as a list of 149 validated marker genes associated with human RPE (Strunnikova et al., 2010) (Table S2;

gene ontology sets are available on the Molecular Signatures Database

<http://software.broadinstitute.org/gsea/msigdb>). Differentially-expressed genes with p <0.01 were

deemed to be significant. All significantly differentially-expressed genes per cluster are reported, with the

exception of genes identified by Cell Ranger as having low average UMI counts. Volcano plots were generated

in RStudio (v.1.1.456) using the ggplot2 package.

Non-negative matrix factorization-based comparison of scRNA-seq datasets

Non-negative matrix factorization (NMF) followed by clustering of genes using the NMF factors was

used for Figure S4 to project each dataset into a gene group. The input data for this analysis were a set of gene

barcode matrices generated using the Cell Ranger 2.1.1 algorithm. The matrices were filtered to remove

background barcodes in order to include only detected cellular barcodes, and then further filtered to exclude

cells expressing fewer than 2000 total counts, followed by depth normalization.

To enable comparison of transcriptional signatures from each sample, NMF (Lee and Seung,

2000) was applied to each scRNA-seq dataset. NMF is a popular dimensionality reduction and clustering

approach that is used to project data into low dimensional non-negative factors, and thus can be used to

derive a clustering of cells and genes. NMF with k=10 factors was applied with a total of five NMF runs.

Next, the similarity of NMF results was compared between two samples using the average best Jaccard

coefficient between clusters of one versus another sample. 1-average Jaccard coefficient was then used as

the distance to apply hierarchical clustering on the samples. This procedure was repeated five times and

the tree that appeared most often was used. The trees learned in different iterations were largely similar

and always grouped the patient-specific lines first before grouping different lines together.

QUANTIFICATION AND STATISTICAL ANALYSIS

Unless otherwise specified, all analyses were performed using GraphPad Prism (v.8.0.1) and error

bars represent mean $\pm$ SD; ns = p $\geq$0.05, * for p <0.05, ** for p <0.01, *** for p <0.001, **** for p

<0.0001. Further detail for each analysis is provided here. Statistical analyses for Figures 2E, 2I and 4B

were performed using Origin 2018b. Student's *t*-test was performed to measure the significance between

the groups. P values <0.05 were considered statistically significant. Statistical significance for Figure 4D

and S3C was determined using the Holm-Sidak method with alpha = 0.05. Each row was analyzed

individually, without assuming a consistent SD (number of *t* tests = 10 and 2 for Figure 4D, and S3C,

respectively). Statistical significance for differential gene expression in Figures 4F and Figure S4G was

determined using the Cell Ranger 2.1.1 algorithm. Sample pairs with each genotype were analyzed and

clustered with individual Cell Ranger runs for each pair and analyzed using the Loupe Cell Browser (v.2.0.0).

Differential expression was calculated using a negative binomial exact test, and p values were adjusted using

the Benjamini-Hochberg correction for multiple tests. P <0.01 was used as the threshold for assigning

significant versus non-significant changes in gene expression. Volcano plots were generated in RStudio (v

1.1.456) using the ggplot2 package. For Figures 3K, L, M, and S3B, discovery was determined using the two-

stage linear step-up procedure of Benjamini, Krieger, and Yekutieli with Q = 1%. Each row was analyzed

individually, without assuming a consistent SD (number of *t* tests = 3).

DATA AND SOFTWARE AVAILABILITY

757   Upon acceptance, scRNA-seq data will be posted to an accession database. Raw targeted

758   sequencing files for DNA and RNA sequencing data will be deposited to the NCBI Trace and Short-Read

759   Archive. Raw patch clamp data are available upon request. Other experimental data are provided in

760   Supplemental files and all source data are available upon request.

 KEY RESOURCES TABLE

REAGENT or RESOURCE	SOURCE	IDENTIFIER
Antibodies		
Mouse anti-Bestrophin	Millipore	Cat# MAB5466
Rabbit anti-Bestrophin	LAgen Laboratories	Cat# 016-Best1-01
Rabbit anti-ZO-1	Thermo Fisher Scientific	Cat# 61-7300
Donkey anti-mouse IgG	Thermo Fisher Scientific	Cat# A31571
Donkey anti-Rabbit IgG	Thermo Fisher Scientific	Cat# A10040
Mouse anti-rhodopsin	Millipore	Cat# MABN15
Rabbit anti-beta actin	Abcam	Cat# ab8227
Mouse anti-Actin	Millipore	Cat# MAB1501
Donkey anti-rabbit IgG	LI-COR Biosciences	Cat# 926-32213
Donkey anti-mouse IgG	LI-COR Biosciences	Cat# 926-68022
Bacterial and Virus Strains		
LV-hVMD2-hBEST1-T2A-GFP (Lentivirus)	Alfred S. Lewin, University of Florida Manufactured by Cell culture Core, UW Department of Dermatology Skin Disease Research Center (SDRC)	N/A
LV-spCas9-sgRNA-T2A-GFP with allele-specifc gRNA	This paper Manufactured by SDRC	N/A
Biological Samples		
N/A	N/A	N/A
Chemicals, Peptides, and Recombinant Proteins		
N-methyl-D-glucamine (NMDG)	Sigma- Aldrich	Cat# M2004
Sodium Chloride (NaCl)	Sigma- Aldrich	Cat# 746398
Potassium Chloride (KCl)	Sigma- Aldrich	Cat# P3911
Calcium Chloride ($CaCl_2$)	Sigma- Aldrich	Cat# C1016
HEPES	Sigma- Aldrich	Cat# H3375
Glucose	Sigma- Aldrich	Cat# G8270
EDTA	Sigma- Aldrich	Cat# EDS
L-Cysteine	Sigma- Aldrich	Cat# C7352
L-Glutathione	Sigma- Aldrich	Cat# G4251
Taurine	Sigma- Aldrich	Cat# T0625
Adenosine	Sigma- Aldrich	Cat# A9251
Bovine Serum Albumin (BSA)	Sigma- Aldrich	Cat# A7906
Papain	MP Biomedicals LLC	Cat# 100921
Cesium Chloride (CsCl)	MP Biomedicals LLC	Cat# 101321
Magnesium Chloride ($MgCl_2$)	Sigma- Aldrich	Cat# M8266
Sucrose	Sigma- Aldrich	Cat# S7903
EGTA	Fisher Chemicals	Cat# 02783
Sodium Hydroxide (NaOH)	Fisher Chemicals	Cat# S318
FGF-2	WiCell (Madison, WI)	N/A
Matrigel	WiCell (Madison, WI)	N/A
Dulbecco's Modified Eagle's Medium (DMEM/F12)	Gibco	Cat# 11320082
Knockout Serum Replacement (KOSR)	WiCell (Madison, WI)	N/A
MEM non-essential amino acids	Gibco	Cat# 11140050

L-glutamine	Gibco	Cat# 25030081
mTESR1	WiCell (Madison, WI)	N/A
StemFlex Medium	Gibco	Cat# A3349401
ß-Mercaptoethanol	Sigma-Aldritch	Cat# M3148
Dispase	Gibco	Cat# 17105041
ReLeSR	Stemcell Technologies	Cat# 05872
N2 supplement	Gibco	Cat# 17502001
Heparin	Sigma-Aldritch	Cat# H-3149
Laminin	Thermo Fisher Scientific	Cat# 23017015
B27 without retinoic acid	Gibco	Cat# 12587010
Antibiotic-antimycotic solution	Gibco	Cat# 15240062
SU5402	Sigma-Aldritch	Cat# SML0443-25MG
CHIR99021	Tocris Bioscience	Cat# 4423
Trypsin-EDTA	Gibco	Cat# 25300054
Rho kinase inhibitor (ROCKi)	SelleckChem	Cat# Y-27632
Q5 2X Master Mix	New England Biolabs	Cat# M0492L
PmeI	New England Biolabs	Cat# R0560S
BamHI	New England Biolabs	Cat# R3136S
AfeI	New England Biolabs	Cat# R0652S
EcoRI-HF	New England Biolabs	Cat# R310S
Lipofectamine 2000	Thermo Fisher	Cat# 11668019
DMEM	Gibco	Cat# 11965092
FBS	WiCell (Madison, WI)	N/A
Penicillin-streptomycin	Gibco	Cat# 15140122
Phosphate Buffered Saline (PBS)	Gibco	Cat# 14190144
Formaldehyde	Sigma- Aldrich	Cat# 47608
Normal Donkey Serum	Sigma- Aldrich	Cat# D9663-10ML
Fish Gelatin	Sigma- Aldrich	Cat# G7041
Triton-X100	Sigma- Aldrich	Cat# T8787
DAPI	Thermo Fisher Scientific	Cat# D1306
Prolong gold with DAPI	Thermo Fisher Scientific	Cat# P36931
Bovine Photoreceptor Outer Segments (POS)	InVision BioResources	Cat# 98740
RIPA Buffer	Thermo Fisher Scientific	Cas# 89900
Protease inhibitor cocktail	Sigma-Aldrich	Cat# P8340
Odyssey blocking buffer	LI-COR Bioscienes	Cat# 927-40000
Tween-20	Sigma- Aldrich	Cat# P7949
SDS	Sigma- Aldrich	Cat# L3771
TrypLE Express	Gibco	Cat# 12605010
QuickExtract DNA	Epicentre	Cat# QE09050
QuickExtract RNA	Epicentre	Cat# QER090150
DNase 1	Invitrogen	Cat# 18047019
Critical Commercial Assays		
Monarch Gel Purification Kit	New England Biolabs	Cat# T1020S
Gibson Assembly Kit	SGI	Cat# GA1100
QuickTiter Lentivirus Titer Kit	Cell Biolabs	Cat# VPK-107

DC Protein Assay Kit II	BioRad	Cat# 5000112
4-20% mini-Protean TGX gel	BioRad	Cat# 4568095
PVDF membrane	Millipore	Cat# IPFL10100
ProtoScript II First Strand Synthesis Kit	New England Biolabs	Cat# E6560S
Papain dissociation kit	Worthington Biochemical	Cat# LK003150
Chromium single cell 3' library and gel bead kit (V2 chemistry)	10X Genomics	Cat# 1000092
Deposited Data		
scRNA-seq data.	Will post to accession database upon acceptance.	Pending
Raw targeted sequencing files for DNA and RNA sequencing data and raw patch clamp data	Available upon request.	N/A
All other experimental data are provided in the source data files or in supplement.	N/A	N/A
Experimental Models: Cell Lines		
Cell line: iPSC – $Best1^{WT/WT}$ Normal	Singh et al., 2013b	N/A
Cell line: iPSC – $Best1^{WT/WT}$ isogenic to $Best1^{R218C/WT}$	Steyer et al. 2018	N/A
Cell line: iPSC – $Best1^{R218C/WT}$	Steyer et al. 2018	N/A
Cell line: iPSC – $Best1^{N296H/WT}$	Singh et al. 2013b	N/A
Cell line: iPSC – $Best1^{A146K/WT}$	Singh et al. 2013b	N/A
Cell line: iPSC – $Best1^{R141H/A195V}$	This paper; from Budd Tucker and Ed Stone, University of Iowa	N/A
Mouse Embryonic Fibroblasts	WiCell (Madison, WI)	N/A
Human Embryonic Kidney Cells (HEK293)	SDRC (Madison, WI)	N/A
Oligonucleotides		
BEST1 RT-PCR FWD primer: ATTTATAGGCTGGCCCTCACGGAA	Singh et al. 2013b	N/A
BEST1 RT-PCR REV primer: TGTTCTGCCGGAGTCATAAAGCCT	Singh et al. 2013b	N/A
MITF RT-PCR FWD primer: TTCACGAGCGTCCTGTATGCAGAT	Singh et al. 2013b	N/A
MITF RT-PCR REV primer: TTGCAAAGCAGGATCCATCAAGCC	Singh et al. 2013b	N/A
PEDF RT-PCR FWD primer: AATCCATCATTCACCGGGCTCTCT	Singh et al. 2013b	N/A
PEDF RT-PCR REV primer: TGCACCCAGTTGTTGATCTCTTGC	Singh et al. 2013b	N/A
RPE65 RT-PCR FWD primer: GCCCTCCTGCACAAGTTTGACTTT	Singh et al. 2013b	N/A
RPE65 RT-PCR REV primer: AGTTGGTCTCTGTGCAAGCGTAGT	Singh et al. 2013b	N/A
OCCLUDIN RT-PCR FWD primer: TCATTGCCGCGTTGGTGATCTTTG	Singh et al. 2013b	N/A
OCCLUDIN RT-PCR REV primer: ATGATGCCCAGGATAGCACTCACT	Singh et al. 2013b	N/A
CRALBP RT-PCR FWD primer: TTCCGCATGGTACCTGAAGAGGAA	Singh et al. 2013b	N/A

CRALBP RT-PCR REV primer: ACTGCAGCCGGAAATTCACATAGC	Singh et al. 2013b	N/A
GAPDH RT-PCR FWD primer: CAACGGATTTGGTCGTATTGG	Singh et al. 2013b	N/A
GAPDH RT-PCR REV primer: GCAACAATATCCACTTTACCACAGTTAA	Singh et al. 2013b	N/A
Cloning primer: LCv2-GFP.Gib.F GATTACAAAGACGATGACGATAAGGGATCC GGTGAGGGCAGAGGAAGTC	This paper	N/A
Cloning primer: LCv2-GFP.Gib.R ACAGTCGAGGCTGATCAGCGGGTTTAAACC TACTACTGCTAGAGATTTTCCACAC	This paper	N/A
Cloning primer: LCv2-GFP.seq.L ACCGGCCTGTACGAGACACG	This paper	N/A
Cloning primer: LCv2-GFP.seq.R GAAAGGACAGTGGGAGTGGCACC	This paper	N/A
Cloning primer: VMD2.LCv2.GFP.Gib.F GTGGCACCGAGTCGGTGCTTTTTTGAATTCC AATTCTGTCATTTTACTAGGGTGATGAAATT C	This paper	N/A
Cloning primer: VMD2.LCv2.GFP.Gib.R TGTACTTCTTGTCCATGGTGGCAGCGCTCTA TCGGCCGCGGGTACA	This paper	N/A
Cloning primer: VMD2.LCv2.GFP.seq.L GAATGAATACCGGGCTGCAGTCAAC	This paper	N/A
Cloning primer: VMD2.LCv2.GFP.seq.R GTCGGTGATCACGGCCCAG	This paper	N/A
Deep Sequencing Primer: MT.C.OT.5v2.HTS.F GTTGGTTCCTGAAGATGGGCAG	This paper	N/A
Deep Sequencing Primer: MT.C.OT.5v2.HTS.R CTGTCAAGGCCAAGTTCTGCTG	This paper	N/A
Deep Sequencing Primer: MT.C.OT.2.HTS.F GCTAAATTCTGCTATAAAAGGAAGG	This paper	N/A
Deep Sequencing Primer: MT.C.OT.2.HTS.R GCATTGCTTTAGAAAACTCAGAAGT	This paper	N/A
Deep Sequencing Primer: MT.C.OT.3.HTS.F AGTGAGACCAAGTTCTGACAGCA	This paper	N/A
Deep Sequencing Primer: MT.C.OT.3.HTS.R GGCCTCTTCATACATACACATGCAC	This paper	N/A
Deep Sequencing Primer: MT.C.OT.4.HTS.F CCTCCACATCTGCAGAAAAGTGT	This paper	N/A
Deep Sequencing Primer: MT.C.OT.4.HTS.R GGCAGGGTTTGGTCTCCTACTT	This paper	N/A
Deep Sequencing Primer: MT.C.OT.5.HTS.F GGATGGCTCTGGGTGGGTTT	This paper	N/A
Deep Sequencing Primer: MT.C.OT.5.HTS.R CTTCCAACTCTTCCTCCCACCC	This paper	N/A
Deep Sequencing Primer: MT.C.OT.6.HTS.F TGAGGTTCAGAATAGCTCAGCA	This paper	N/A

Deep Sequencing Primer: MT.C.OT.6.HTS.R TGTTTCTGTGAAGCAAATCAAAGCT	This paper	N/A
Deep Sequencing Primer: MT.C.OT.7.HTS.F TGTTTCTGTGAAGCAAATCAAAGCT	This paper	N/A
Deep Sequencing Primer: MT.C.OT.7.HTS.R TGAGGTTCAGAATAGCTCAGCA	This paper	N/A
Deep Sequencing Primer: MT.C.OT.8.HTS.F AAAGCATGGCGGGAGTGCTAA	This paper	N/A
Deep Sequencing Primer: MT.C.OT.8.HTS.R TGACTAAATCCCTGGCATCGCT	This paper	N/A
Deep Sequencing Primer: MT.C.OT.9.HTS.F GCCAGTAATTTTCCAAGGCTTCT	This paper	N/A
Deep Sequencing Primer: MT.C.OT.9.HTS.R TTCCTACTAGAACCTCCTTGAG	This paper	N/A
Deep Sequencing Primer: MT.C.OT.10.HTS.F GTGACCTGACTTTGCTGAAAGGT	This paper	N/A
Deep Sequencing Primer: MT.C.OT.10.HTS.R ACCTGAATTATCTCAAGCTCACT	This paper	N/A
Deep Sequencing Primer: AAVS1T2.HTS.F ATGTGGCTCTGGTTCTGGGTAC	This paper	N/A
Deep Sequencing Primer: AAVS1T2.HTS.R GAGACTAGGAAGGAGGAGGCCT	This paper	N/A
Deep Sequencing Primer: R218C.HTSv2.F GTGTTCAGAACCCCATCCCC	This paper	N/A
Deep Sequencing Primer: R218C.HTSv2.R AGCCTAGTCCTCACCTGTGT	This paper	N/A
Deep Sequencing Primer: BEST.cDNA.HTSv2.F GGTCGAATCCGGGACCCTATC	This paper	N/A
Deep Sequencing Primer: BEST.cDNA.HTSv2.R GCCACAGTCACCACCTGTGTAT	This paper	N/A
Deep Sequencing Primer: AAVS1T2.HTS.F ATGTGGCTCTGGTTCTGGGTAC	This paper	N/A
Deep Sequencing Primer: AAVS1T2.HTS.R GAGACTAGGAAGGAGGAGGCCT	This paper	N/A
Recombinant DNA		
Plasmid: LCv2.*AAVS1* sgRNA: GGGGCCACTAGGGACAGGAT	This paper; backbone is LentiCRISPR v2. Sanjana et al. 2014	N/A
Plasmid: LCv2.R218C sgRNA: GTGTCCACACTGAGTACACA	This paper; backbone is LentiCRISPR v2. Sanjana et al. 2014	N/A
Plasmid: LCv2.WT sgRNA: GTGTCCACACTGAGTACGCA	This paper; backbone is LentiCRISPR v2. Sanjana et al. 2014	N/A
Plasmid: VMD2.*AAVS1* sgRNA: GGGGCCACTAGGGACAGGAT	This paper; backbone is hVMD2-spCas9-T2A-GFP (Alfred Lewin, University of Florida)	N/A

Plasmid: VMD2.R218C sgRNA: GTGTCCACACTGAGTACACA	This paper; backbone is hVMD2-spCas9-T2A-GFP (Alfred Lewin, University of Florida)	N/A
Plasmid: VMD2.WT sgRNA: GTGTCCACACTGAGTACGCA	This paper; backbone is hVMD2-spCas9-T2A-GFP (Alfred Lewin, University of Florida)	N/A
Plasmid: VMD2.N296H sgRNA: CATCATCCTCTCCAAAGGGG	This paper; backbone is hVMD2-spCas9-T2A-GFP (Alfred Lewin, University of Florida)	N/A
Plasmid: VMD2.A146K sgRNA: CTTTGGTGCTGACGCTGCGC	This paper; backbone is hVMD2-spCas9-T2A-GFP (Alfred Lewin, University of Florida)	N/A
psPax2	Addgene	Cat # 12260
pMD2.G	Addgene	Cat# 12259
LentiCRISPR v2	Addgene	Cat# 52961
Software and Algorithms		
Clampex 10.7	Molecular Devices, LLC	https://www.molecular devices.com/
Clampfit 10.7	Molecular Devices, LLC	https://www.molecular devices.com/
Origin 2018b	OriginLab Corporation	www.OriginLab.com
NIS Elements AR v4.5, NIS Elements AR v5.0, NIS Elements D v3.26, NIS Elements D v5.0	Nikon Instruments	https://www.nikoninstr uments.com/Products/ Software
ImageStudio 5.2	LI-COR Biosciences	https://www.licor.com/ bio/image-studio/
Ca-EGTA calculator v1.3	Theo Schoenmakers' Chelator	http://web.stanford.edu /~cpatton/CaEGTA-TS.htm
ImageJ	Schneider et al., 2012	https://imagej.nih.gov/i j/
CRISPResso v1.0.8	Pinello et al. 2016	http://crispresso.rocks/ help
Cell Ranger v2.1.1	10X Genomics	https://support.10xgen omics.com
Loupe Cell Browser v2.0.0	10X Genomics	https://support.10xgen omics.com
RStudio v1.1.465	Foundation for Open Access Statistics	https://github.com/rstu dio
ggplot2	Wickham et al. 2010	https://github.com/tidy verse/ggplot2
GraphPad Prism	GraphPad	https://www.graphpad. com/scientific-software/prism/
Other		
Borosilicate Glass with Filament	Sutter Instruments	Cat# BF 150-117-10
Transwell Inserts	Corning	Cat# 3470

| Flowmi cell strainer | Bel-Art SP Scienceware | Cat# H13680-0040 |

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SUPPLEMENTAL DATA

Supplemental Figures:

Figure S1. Characterization of iPSC-RPE.

Figure S2. Gene augmentation (GA) restores CaCC function in ARB iPSC-RPE and R218C and N296H

adBD iPSC-RPE, but not in A146K adBD iPSC-RPE.

Figure S3. Quantification of DNA and RNA sequencing reads in gene-edited (GE) iPSC-RPE.

Figure S4. Gene editing (GE) restores CaCC activity in iPSC-RPE from all tested adBD lines.

Supplemental Tables:

Table S1. Frameshift analysis of iPSC-RPE+GE.

Table S2: Curated gene sets used to assess differences in gene expression between control (*AAVS1*) and

MT *BEST1* allele-targeted sgRNA in Figure S4.

Table S3. Ranked off-target sites for sgRNAs used in this study

Table S4. Analysis of additional adBD mutations for amenability to allele specific editing or scarless base

editing.