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Supplemental Data

Mutation-specific pathophysiological mechanisms

define different neurodevelopmental disorders

associated with SATB1 dysfunction

Joery den Hoed, Elke de Boer, Norine Voisin, Alexander J.M. Dingemans, Nicolas Guex, Laurens Wiel, Christoffer Nellaker, Shivarajan M. Amudhavalli, Siddharth Banka, Frederique S. Bena, Bruria Ben-Zeev, Vincent R. Bonagura, Ange-Line Bruel, Theresa Brunet, Han G. Brunner, Hui B. Chew, Jacqueline Chrast, Loreta Cimbalistiene, Hilary Coon, The DDD Study, Emmanuelle C. Délot, Florence Démurger, Anne-Sophie Denommé-Pichon, Christel Depienne, Dian Donnai, David A. Dyment, Orly Elpeleg, Laurence Faivre, Christian Gilissen, Leslie Granger, Benjamin Haber, Yasuo Hachiya, Yasmin Hamzavi Abedi, Jennifer Hanebeck, Jayne Y. Hehir-Kwa, Brooke Horist, Toshiyuki Itai, Adam Jackson, Rosalyn Jewell, Kelly L. Jones, Shelagh Joss, Hirofumi Kashii, Mitsuhiro Kato, Anja A. Kattentidt-Mouravieva, Fernando Kok, Urania Kotzaeridou, Vidya Krishnamurthy, Vaidutis Pengfei Kučinskas, Alma Kuechler, Alinoë Lavillaureix, Liu. Linda Manwaring, Naomichi Matsumoto, Benoît Mazel, Kirsty McWalter, Vardiella Meiner, Mohamad A. Mikati, Satoko Miyatake, Takeshi Mizuguchi, Lip H. Moey, Shehla Mohammed, Hagar Mor-Shaked, Hayley Mountford, Ruth Newbury-Ecob, Sylvie Odent, Laura Orec, Matthew Osmond, Timothy B. Palculict, Michael Parker, Andrea K. Petersen, Rolph Pfundt, Egle Preikšaitiene, Kelly Radtke, Emmanuelle Ranza, Jill A. Rosenfeld, Teresa Santiago-Sim, Caitlin Schwager, Margje Sinnema, Lot Snijders Blok, Rebecca C. Spillmann, Alexander P.A. Stegmann, Isabelle Thiffault, Linh Tran, Adi Vaknin-Dembinsky, Juliana H. Vedovato-dos-Santos, Samantha A. Schrier Vergano, Eric Vilain, Antonio Vitobello, Matias Wagner, Androu Waheeb, Marcia Willing, Britton Zuccarelli, Usha Kini, Dianne F. Newbury, Tjitske Kleefstra, Alexandre Reymond, Simon E. Fisher, and Lisenka E.L.M. Vissers

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| | |

- Supplemental Acknowledgements
- Supplemental Materials and Methods

- Detailed descriptions of 3D protein modeling of (*de novo*) SATB1 variants (at the end of the Supplemental information)

- Clinical phenotypic data of individuals with (*de novo*) SATB1 variants in standardized HPO format (as separate zipped .JSON file)



Figure S1. Pedigrees of (suspected) mosaic families with *SATB1* **variants. A)** Pedigree of family with proband and siblings carrying a heterozygous SATB1 p.E407G variant. The mother presents the variant in 1 of 69 reads in whole exome sequencing data, so the estimated percentage is 1.4% in the peripheral blood. Karyotyping was normal. B) Pedigree of family with proband and sibling carrying a heterozygous SATB1 p.Q525R variant. Suspected mosaicism in one of the parents could not be confirmed with Sanger sequencing of DNA derived from peripheral blood. **A-B**) In both families, none of the pregnancies resulted in healthy offspring.



Figure S2. Amino acid sequence alignments of the CUT1, CUT2 and Homeobox domain of SATB1. Amino acid sequences of the CUT1, CUT2 and Homeobox domain of human SATB1 (Q01826, UniProt) aligned to the mouse (Q60611), rat (Q5U2Y2), chicken (A0A1D5PV61) and Xenopus tropicalis (F6W9B5) sequences, and the sequences of the homolog domains in human SATB2 (Q9UPW6). Alignment was performed with Clustal Omega (1.2.4) with default settings using UnitProt alignment tool. Missense variants described in this study and identified in these functional domains are shaded in red.





55Kb deletion - chr3:18376866-18432504



Figure S3. Heterozygous (partial) gene deletions of the SATB1 gene. Genome overviews of two reported heterozygous deletions that include the SATB1 gene, generated in the UCSC Genome Browser (assembly Feb. 2009 GRCh37/hg19). The deleted regions are shaded in red in the chromosome ideogram, and in light blue in the genome overview.

Individual 14 - p.P181L

Individual 27 - p.Q525R



Figure S4. Clinical evaluation of individuals with SATB1 variants. A) Side view photographs, depicting prominent ears (individuals 4, 8, 14, 17, 19, 34, 35), with thickened helices (individuals 8, 14, 17, 19, 33, 34, 35), and retrognathia (individuals 8, 14, 17, 19, 27, 34). B) Additional photograph of teeth. No evident enamel or dental positioning problems in individuals 8 and 14, although missing molars (individual 8) and malformed teeth (individual 14) are reported. Lower teeth of individual 28: discoloration, malpositioning and teeth decay. C) Photographs of hands and feet. Features include contractures resulting from spasticity (individual 17), tapered fingers (individuals 13, 14, 23, 35), short broad fingers (individuals 13, 14, 23), clinodactyly of 5th finger (individual 9), overlapping 2nd toe (individual 35) or 4th toe (individual 9) and broad feet with short toes and small toe nails (individuals 13, 14, 23).



В

Α

| Identifier | Variant type | 2_cluster | 2_correct | 3_cluster | 3_correct | Identifier | Variant | 2_cluster | 2_correct | 3_cluster | 3_correct |
|--------------|-------------------|-----------|-----------|-------------------|-----------|--------------|----------|-----------|-----------|-------------------|-----------|
| | | _prea | | _pred | | | туре | _pred | | _pred | |
| Individual1 | PTV_non_last_exon | PTV | CORRECT | PTV_last_exon | INCORRECT | Individual13 | Missense | PTV | INCORRECT | PTV_last_exon | INCORRECT |
| Individual2 | PTV_non_last_exon | PTV | CORRECT | PTV_non_last_exon | CORRECT | Individual14 | Missense | PTV | INCORRECT | PTV_last_exon | INCORRECT |
| Individual3 | PTV_non_last_exon | PTV | CORRECT | PTV_last_exon | INCORRECT | Individual15 | Missense | PTV | INCORRECT | PTV_last_exon | INCORRECT |
| Individual4 | PTV_non_last_exon | PTV | CORRECT | PTV_last_exon | INCORRECT | Individual17 | Missense | Missense | CORRECT | Missense | CORRECT |
| Individual5 | PTV_non_last_exon | Missense | INCORRECT | Missense | INCORRECT | Individual18 | Missense | PTV | INCORRECT | PTV_last_exon | INCORRECT |
| Individual6 | PTV_non_last_exon | PTV | CORRECT | PTV_last_exon | INCORRECT | Individual19 | Missense | Missense | CORRECT | Missense | CORRECT |
| Individual7 | PTV_non_last_exon | Missense | INCORRECT | PTV_last_exon | INCORRECT | Individual20 | Missense | Missense | CORRECT | Missense | CORRECT |
| Individual8 | PTV_last_exon | PTV | CORRECT | PTV_last_exon | CORRECT | Individual21 | Missense | Missense | CORRECT | Missense | CORRECT |
| Individual9 | PTV_last_exon | PTV | CORRECT | PTV_last_exon | CORRECT | Individual23 | Missense | PTV | INCORRECT | PTV_last_exon | INCORRECT |
| Individual10 | PTV_last_exon | PTV | CORRECT | PTV_last_exon | CORRECT | Individual24 | Missense | Missense | CORRECT | Missense | CORRECT |
| Individual11 | PTV_last_exon | PTV | CORRECT | PTV_non_last_exon | INCORRECT | Individual25 | Missense | Missense | CORRECT | PTV_non_last_exon | INCORRECT |
| Individual12 | PTV_last_exon | PTV | CORRECT | PTV_last_exon | CORRECT | Individual26 | Missense | Missense | CORRECT | Missense | CORRECT |
| | 1 | 1 | | 1 | | Individual27 | Missense | Missense | CORRECT | Missense | CORRECT |
| | | | | | | Individual28 | Missense | Missense | CORRECT | Missense | CORRECT |
| | | | | | | Individual29 | Missense | Missense | CORRECT | Missense | CORRECT |
| | | | | | | Individual30 | Missense | Missense | CORRECT | Missense | CORRECT |
| | | | | | | Individual31 | Missense | Missense | CORRECT | PTV_non_last_exon | INCORRECT |
| | | | | | | Individual33 | Missense | Missense | CORRECT | PTV_non_last_exon | INCORRECT |
| | | | | | | Individual34 | Missense | Missense | CORRECT | PTV_non_last_exon | INCORRECT |
| | | | | | | Individual35 | Missense | PTV | INCORRECT | PTV_last_exon | INCORRECT |
| | | | | | | Individual36 | Missense | PTV | INCORRECT | PTV_last_exon | INCORRECT |
| | | | | | | Individual37 | Missense | Missense | CORRECT | Missense | CORRECT |
| | | | | | | Individual38 | Missense | Missense | CORRECT | Missense | CORRECT |
| | | | | | | Individual39 | Missense | Missense | CORRECT | PTV_non_last_exon | INCORRECT |

Figure S5. Grouped HPO features based on semantic similarity and clustering results per individual. A) The semantic similarity between all the HPO terms used in this cohort (356 features) was calculated using the Wang algorithm in the HPOsim package in R. HPO terms with at least a 0.5 similarity score were grouped and a new feature was created as a replacement, which was the sum of the grouped features. **B**) Individual HPO-based phenotypic clustering results for both analyses with two and three clusters.

Individual40

Individual42

PTV

PTV

Missense

Missense Correctly predicted individuals INCORRECT

INCORRECT

27

PTV last exon

PTV_last_exon

INCORRECT

INCORRECT

17





Figure S6. Overexpression of SATB1 missense variants as YFP-fusion proteins. A) Immunoblot of whole-cell lysates expressing YFP-tagged SATB1 variants probed with anti-EGFP antibody. Expected molecular weight for all variants is ~115 kDa. The blot was probed for ACTB to ensure equal protein loading. B) Direct fluorescence micrographs of HEK293T/17 cells expressing YFP-SATB1 fusion proteins (green). Nuclei were stained with Hoechst 33342 (white). Scale bar = 10 μ m.



С

| Gene name | gDNA | cDNA | Residue change | Туре | gnomAD allele frequency |
|-----------|--------------------|--------------------------|----------------|------------|----------------------------|
| HMX3 | chr10:124896963C>G | NM_001105574.1:c.790C>G | p.(Leu264Val) | missense | 0.000004 |
| HOXC10 | chr12:54383114A>G | NM_017409.3:c.913A>G | p.(lle305Val) | missense | 0.000004 |
| HOXC11 | chr12:54369087C>G | NM_014212.3:c.805C>G | p.(Leu269Val) | missense | 0.000004 |
| ISX | chr22:35478636A>G | NM_001303508.1:c.355A>G | p.(lle119Val) | missense | 0.000004 |
| NANOGNB | chr12:7922891T>G | NM_001145465.1:c.415T>G | p.(Phe139Val) | missense | 0.000023 |
| NKX1-2 | chr10:126136333G>C | NM_001146340.2:c.598C>G | p.(Leu200Val) | missense | 0.000009 |
| NKX2-2 | chr20:21492890T>C | NM_002509.3:c.493A>G | p.(lle165Val) | missense | 0.000004 |
| NOBOX | chr7:144097323C>T | NM_001080413.3:c.927G>A | p.(Val309=) | synonymous | 0.000004 |
| OTP | chr5:76932672T>C | NM_032109.2:c.421A>G | p.(lle141Val) | missense | 0.00007 |
| PAX3 | chr2:223096822G>A | NM_181459.3:c.767C>T | p.(Ala256Val) | missense | 0.000004 |
| POU2F2 | chr19:42599569G>C | NM_001207025.2:c.1000C>G | p.(Leu334Val) | missense | 0.000004 |
| POU6F1 | chr12:51584125G>C | NM_001330422.1:c.1741C>G | p.(Leu581Val) | missense | 0.000004 |
| ZFHX3 | chr16:72828547C>T | NM_006885.3:c.8034G>A | p.(Val2678=) | synonymous | 0.000004 |
| ZFHX4 | chr8:77767083C>A | NM_024721.4:c.7926C>A | p.(Val2642=) | synonymous | 0.000096 |
| ZFHX4 | chr8:77767083C>T | NM_024721.4:c.7926C>T | p.(Val2642=) | synonymous | 0.00008 |

Figure S7. MetaDome analysis of the SATB1 missense variants. A) Overview of the SATB1 protein (transcript NM_001131010.2) tolerance landscape. All missense variants identified in affected individuals are indicated. **B**) Detailed overview of the SATB1 homeobox domain tolerance landscape, with the p.L682V variant indicated. **C**) Table listing all residue changes at positions equivalent to the SATB1 p.L682 position in homolog homeobox domain proteins that change to a valine. The gnomAD allele frequency is indicated.



Figure S8. Functional characterization of the SATB1 p.R410* variant. A) Schematic representation of SATB1 with the p.R410* variant labeled in cyan. **B**) Sanger sequencing traces of patient-derived EBV transformed lymphoblastoid cell lines treated with or without cycloheximide (CHX) to test for NMD. The mutated nucleotides are shaded in red. **C**) Immunoblot of whole-cell lysates expressing YFP-tagged SATB1 and p.R410* probed with anti-EGFP antibody. Expected molecular weight is SATB1: ~115 kDa, p.R410*: ~75kDa. The blot was probed for ACTB to ensure equal protein loading. **D**) Direct fluorescence micrographs of HEK293T/17 cells expressing YFP-SATB1 p.R410* fusion proteins (green). Nuclei were stained with Hoechst 33342 (white). Scale bar = 10 µm. **E**) Luciferase reporter assays using reporter constructs containing the IL2 promoter region and the IgH matrix associated region (MAR) binding site. Values are expressed relative to the control (pYFP; black) and represent the mean ± S.E.M. (*n* = 4 for IL2-promoter, *n* = 3 for IgH-MAR binding site, *p*-values compared to wildtype (WT) SATB1 (white), one-way ANOVA and *post-hoc* Bonferroni test). **F**) BRET assays for SATB1 dimerization in live cells. The plot shows the mean BRET saturation curves ± 95% C.1. fitted using a non-linear regression equation assuming a single binding site (*y* = BRETmax * *x* / (BRET50 / *x*); GraphPad). The corrected BRET ratio is plotted against the ratio of fluorescence/luminescence (AU) to correct for expression level differences between conditions (*n* = 3).



Figure S9. Overexpression of SATB1 NMD-escaping PTVs as YFP-fusion proteins. A) Immunoblot of whole-cell lysates expressing YFP-tagged SATB1 variants probed with anti-EGFP antibody. Expected molecular weight: WT SATB1 = ~115 kDa, p.P626Hfs*81 = ~109 kDa, p.Q694* = ~107 kDa, p.N736Ifs*8 = ~113 kDa. The blot was probed for ACTB to ensure equal protein loading. **B**) Direct fluorescence imaging of HEK293T/17 cells expressing YFP-SATB1 fusion proteins (green). Nuclei were stained with Hoechst 33342 (white). Scale bar = 10 µm. **C**) Results of assay for protein stability of SATB1 NMD-escaping PTVs, using cycloheximide (CHX) to arrest protein synthesis, and MG132 to block protein degradation by the 26S proteasome complex. Values represent the mean protein expression levels of YFP-tagged SATB1 variants ± S.E.M. in live cells as measured by YFP fluorescence and expressed relative to the 0 h time point (*n* = 3, two-way ANOVA for repeated measures with Geisser-Greenhouse correction, followed by a *post-hoc* Bonferroni test). Although p.P626Hfs*81 showed a slight but significant decrease in relative expression level after treatment with CHX, and p.Q694* showed a significant increase in relative expression level after CHX treatment and an increase after MG132 treatment, which would be indicative of reduced protein stability.



Figure S10. SUMOylation of SATB1 protein truncating variants escaping NMD. A) Schematic representation of the UBC9-SATB1 fusion protein with an N-terminal V5 epitope tag. **B**) Prediction of putative SATB1 (Uniprot Q01826) SUMOylation sites using Joined Advanced SUMOylation Site and SIM Analyser (JASSA, www.jassa.fr/). JASSA uses a scoring system based on a Position Frequency Matrix derived from the alignment of experimental SUMOylation sites. K175 corresponds to a direct consensus site ([Ψ]-[K]-[x]-[α], with $\Psi = A,F,I,L,M,P,V$ or W; $\alpha = D$ or E) with a high prediction score (PS), and K744 to a negatively charged amino acid-dependent SUMOylation site (NDSM, [Ψ]-[K]-[α]-[α], with $\Psi = A,F,I,L,M,P,V$ or W; 2 out of 6 α must be D or E) with a high PS. **C**) Gel shift assay for SATB1 SUMOylation. UBC9-SATB1 and a p.K175R or p.K744R mutant were expressed in HEK293T/17 cells together with a YFP-fusion of SUMO1. Top panel: western blot probed with anti-V5 antibody to detect UBC9-SATB1. The 110 kDa species is unmodified UBC9-SATB1. The 130 kDa species is UBC9-SATB1 modified with endogenous SUMO1. The 170 kDa species is UBC9-SATB1 modified with YFP-SUMO1. Middle panel: western blot probed with anti-YFP antibody, with unconjugated YFP-SUMO1 indicated with an arrow head. Higher molecular weight species are cellular proteins modified with YFP-SUMO1. Bottom panel: western blot probed with anti-YFP antibody, with unconjugated YFP-SUMO1 indicated with anti-ACTB to confirm equal protein loading. **D**) Gel-shift assay for SUMOylation of a SATB1 p.K175R/p.K744R double-mutant. **E**) Gel-shift assay for SUMOylation of SATB1 NMD escaping protein truncating variants.

A Protein truncating variants / (partial) gene deletions / splice site variants B Protein truncating variants predicted to escape NMD p.<u>S203Ffs*49_</u>p.<u>R335Tf</u>s*20 p.R410* c.<u>1576G</u>>A, p.?



p.P626Hfs*81 p.L678Vfs*42 p.Q694* p.N736lfs*8



C Missense variants p.P181L p.P181L p.<u>Q4</u>02R p.E407G p.E407Q p.E407Q p.E407G p.E407G 17 20 13 14 19 21 23 24 p.E530K p.Q420R p.Q525R p.Q525R p.E530K p.E530K p.E530K p.E530K . 28 . 31 33 34 . 37



Figure S11. Clinical evaluation of individuals with SATB1 variants in three subcohorts. A-C) Facial photographs of individuals with (partial) gene deletions and truncations predicted to result in haploinsufficiency (A), of individuals with truncations predicted to escape from NMD and resulting in transcriptionally active proteins (B) and of individuals with missense variants (C). All depicted individuals show facial dysmorphisms and although overlapping features are seen, no consistent facial phenotype can be observed for the group as a whole. Overlapping facial dysmorphisms include facial asymmetry, high forehead, prominent ears, straight and/or full eyebrows, puffy eyelids, downslant of palpebral fissures, low nasal bridge, full nasal tip and full nasal alae, full lips with absent cupid's bow, prominent cupid's bow or thin upper lip vermilion (Table S1B). Individuals with missense variants are more alike than individuals in the truncating cohorts, and we observed recognizable overlap between several individuals in the missense cohort (individuals 17, 27, 31, 37, the siblings 19, 20 and 21, and to a lesser extent individuals 24 and 35). A recognizable facial overlap between individuals with the other two variant types could not be observed. Related individuals are marked with a blue box. D) Mosaic plot presenting a selection of clinical features. Individuals with no or very limited clinical data were omitted (for details, see Supplemental Materials and Methods). E) The Partitioning Around Medoids analysis of clustered HPO-standardized clinical data from 38 individuals with truncating (triangle) and missense variants (circle) shows a significant distinction between the clusters of individuals with missense variants (blue) and individuals with PTVs (red). Applying Bonferroni correction, a p-value smaller than 0.025 was considered significant. F) Plot of Partitioning Around Medoids clustering analysis on clustered clinical data (HPO) showing no significant distinctions between individuals with missense variants, individuals with truncating variants and deletions, and individuals with NMD-escaping truncating variants



Figure S12. The SATB2 p.E396Q missense variant has comparable effects on protein functions as the p.E407G and p.E530K/Q SATB1 variants affecting equivalent positions. A) SATB1 and SATB2 are highly conserved paralogs. B) In SATB1 more missense variants (71%) than truncations/deletions (29%) are observed, while for SATB2 the reverse is reported (31% versus 69% respectively). C) Schematic representation of SATB1 and SATB2 CUT DNA binding domains, with variants on equivalent positions indicated. D) Immunoblot of whole-cell lysates expressing YFP-tagged SATB2 and p.E396Q probed with anti-EGFP antibody. Expected molecular weight is ~112 kDa. The blot was probed for ACTB to ensure equal protein loading. E) Direct fluorescence super-resolution imaging of nuclei of HEK293T/17 cells expressing YFP-SATB2 fusion proteins. Scale bar = 5 μ m. F) Direct fluorescence imaging of HEK293T/17 cells expressing YFP-SATB2 chromatin binding in live cells. Left, mean recovery curves ± 95% C.I. recorded in HEK293T/17 cells expressing YFP-SATB2 fusion proteins. Right, violin plots with median of the halftime and maximum recovery values based on single-term exponential curve fitting of individual recordings (*n* = 60 nuclei from three independent experiments, *p*-values compared to WT SATB2, unpaired t-test).

| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | MERRSESPCLRDSPDRRSGSPDVKGPPPVKVARLEQNGSPMGARGRPNGA MDHLNEATQGKEHSEMSNNVSDP-KGPPAKIARLEQNGSPLGRGRLGSTGAKMQGVPLKH *:: .*: :: : * **.***************** | 50 59 |
|------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | VAKAVGGLMIP <mark>V</mark> FCVVEQLDGSLEYDNREEHAEFV <mark>L</mark> VRKDVLFSQ <mark>L</mark> VETALLALG SGHLMKTNLRKGTMLPVFCVVEHYENAIEYDCKEEHAEFVLVRKDMLFNQLIEMALLSLG :: * *:******* ::.::*** :************** | 105 119 |
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | YSHSSAAQAQQGIIKLGRWNPLPLSYWTDAPDATVADMLQDVYHVVTLKIQLQSCSKLEDL YSHSSAAQAKGLIQVGKWNPVPLSYVTDAPDATVADMLQDVYHVVTLKIQLHSCPKLEDL ********::::::::::::::::::::::::::::: | 165 179 |
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | PAEQWNHATVRNALKELLKEMNQSTLAKECPLSQSMISSIVNSTYYANVSATKCQEFGRW PEQWSHTTVRNALKDLLKDMNQSSLAKECPLSQSMISSIVNSTYYANVSAAKCQEFGRW * ***.*:****** | 225 239 |
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | YKKYKKIKVERVERENLSDYCVLGQRPM <mark>H</mark> LPNMNQLASLGKTNEQSPHSQIHHSTPIRNQ YKHFKKTKDMMVEMDSLSELSQQGANHVNFGQQPVPGNTAEQPPSPA-QLSHGSQPS **::** * ** :.**: * :: :.* *:* ** * : * | 285 295 |
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | VPALQPIMSPGLLSPQLSPQLVRQQIAMAHLINQQIAVSRLL <mark>A</mark> HQHPQAINQQFLNHPPI VRTPLPNLHPGLVSTPISPQLVNQQLV <mark>M</mark> AQLLNQQYAVNRLLAQQSLNQQYLNHPPP * : * : ***:* :*****.**:.**:*********** | 345 352 |
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | PRAVKPEPTNSSVEVSPDIYQQ <mark>W</mark> RDELKRASVSQAWFARVAFNRTQGLLSEILRKE VSRSMNKPLEQQVSTNTEVSSEIYQWVRDELKRAGISQAVFARVAFNRTQGLLSEILRKE :*:*** :*** ******** | 401 412 |
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | DPRTASQSLLVNLRAMQNFLNLPEVERDRIYQDERERSMNPNVSMVSSASSSPSSSRTP DPKTASQSLLVNLRAMQNFLQLPEAERDRIYQDERERSLNAASAMGPAPLISTPPSRPP ***:******************************** | 461 472 |
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | QAKTSTPTTDLPIKVDGANINITAAIYDEIQQEMKRAKVSQALFAKVAANKS <mark>OG</mark> WL <mark>G</mark> ELL QVKTATIATERNGKPENNTMNINASIYDEIQQEMKRAKVSQALFAKVAATKS <mark>Q</mark> GWLC <mark>E</mark> LL *.**:* :*: * ::**.*:**************** | 521 532 |
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | RWKENPSPENRTLWENLCTIRRFLNLPQHERDVIYEEESRHHHS <mark>R</mark> RMQHVVQLPPEPV RWKEDPSPENRTLW <mark>E</mark> NLSMIRRFLSLPQPERDAIYEQESNAVHH <mark>H</mark> GDRPPHIIHVPAEQI ****:******************************** | 579 592 |
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | QVLHRQQSQPAKESSPPREEAPPPPPPTEDSCAKKPRSRTKIS QQQQQQQQQQQQQQQQQQQAPPPPQPQQQPQTGPRLPPRQPTVASPAESDEENRQKTRPRTKIS * ::**.* ::. * ::. * * ***** | 622 652 |
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | LEALGILQSFIH <mark>D</mark> VGLYPDQEAIHTLSAQLDL <mark>P</mark> KHTIIKFFQNQRYHVKHHGKLKEHLGS VEALGILQSFIQDVGLYPDEEAIQTLSAQ <mark>L</mark> DLPKYTIIKFFQNQRYYLKHHGKLKDNSGL :********** | 682 712 |
| SP Q9UPW6 SATB2_HUMAN SP Q01826 SATB1_HUMAN | AVDVAEYKDEELLTESEENDSEEGSEEMYKVEAEEENADKSKAA-PAEIDQR 733 EVDVAEYKEEELLKDLEESVQDKNTNTLFSVKLEEELSVEGNTDINTDLKD- 763 *******:****.: **::::::::::::::::::: | |

Figure S13. Missense variants identified in individuals with NDD displayed in an amino acid sequence alignment of SATB2 and SATB1. SATB2 (Q9UPW6, UniProt) sequence is aligned to SATB1 (Q01826) sequence. Alignment was performed with Clustal Omega (1.2.4) with default settings using UnitProt alignment tool. Previously reported missense variants in SATB2 (PMID: 31021519) are shaded in green, SATB1 missense variants (this study) are shaded in magenta. Only two missense variants occur at equivalent positions (marked with a red box): SATB2 p.E396Q is equivalent to SATB1 p.E407G/Q, and SATB2 p.E402K is equivalent to SATB1 p.E413K. We functionally characterized SATB2 p.E396Q (Figure S12).

Table S2. Splice-Al predictions for missense variants at intron-exon or exon-intron junctions.

| g.DNA-position | c.DNA | Protein effect | spliceAI-G delta score§ - acceptor gain (position*) | spliceAI-G delta score§ - acceptor loss (position*) | spliceAI-G delta score§ -donor gain (position*) | spliceAI-G delta score§ -donor loss (position*) |
|--------------------|-----------|-------------------|-----------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------------|
| Chr3:g.18435955T>C | c.1205A>G | p.Q402R¥ | 0 (-1) | 0 (45) | 0.0099 (32) | 0.2482 (-1) |
| Chr3:g.18419663T>C | c.1574A>G | p.Q525R£ | 0 (-1) | 0 (19) | 0 (20) | 0 (-1) |
| Chr3:g.18393687C>T | c.1576G>A | p.G526R# | 0.6666 (-2) | 0.0937 (0) | 0 (-2) | 0 (-17) |

*a negative nucleotide position represents positions upstream of the variant, a positive nucleotide position represents positions downstream of the variant.

§cut offs for splice-AI delta score: 0.2 (high recall), 0.5 (recommended), and 0.8 (high precision)

¥p.Q402R:

Although the variant affects the last amino acid of exon 7, none of the Splice-Al delta scores exceeds the recommended cut-off of >0.5, specifically not the scores for loss or gain of splice donor sites.

£p.Q525R

Although the variant affects the last amino acid of exon 9, none of the Splice-Al delta scores exceeds the recommended cut-off of >0.5, specifically not the scores for loss or gain of splice donor sites.

#p.G526R:

The variant affects the first amino acid of exon 10. Splice-AI predicts splice acceptor site gain 2 nucleotides upstream of the variant, resulting in a frameshift.

Table S3. Phenotypic information of individuals from the UK10K cohort with rare SATB1 missense variants. Wechsler Intelligence Scale for Children (WISC) test scores for individuals from the UK10K cohort, carrying rare SATB1 missense variants. Standard deviation scores (std score) were calculated by comparing individual scores of carriers to the mean test scores from UK10K non-carriers. Test scores that were lower compared to mean non-carrier scores are shaded in red, while test score that were higher compared to mean non-carrier scores are shaded in green. All carrier test scores were within 2.5 standard deviations compared to the mean non-carrier scores, and thus within normal range.

| UK10K non-carriers UK10K carriers (n=1732, ±Std) (n=9, ±Std) | | | | UK10K carriers | | | | | | | |
|-----------------------------------------------------------------|-----------------|-----------------|-------------|----------------|------------------|-------------|-------------|--------------|-------------|--------------|-------------|
| Variant | - | - | rs148337599 | rs148337599 | rs148337599 | rs148337599 | rs148337599 | rs760272331 | rs760272331 | rs185604711 | rs185604711 |
| Residue change (SATB1 NM_001131010.4) | - | - | p.S366L | p.S366L | p.S366L | p.S366L | p.S366L | p.V519L | p.V519L | p.A573T | p.A573T |
| gnomAD v2.1.1 frequency | | | | 6.6 | 1e-4 (allele 282 | 2848) | | 8.67e-6 (all | ele 230660) | 1.17e-4 (all | ele 282890) |
| WISC - Verbal IQ: F@8 | 111.92 (±16.57) | 116.89 (±16.07) | 103 | 133 | 139 | 103 | 111 | 133 | 128 | 99 | 103 |
| VIQ std score | - | 0.30 (±0.97) | -0.54 | 1.27 | 1.63 | -0.54 | -0.06 | 1.27 | 0.97 | -0.78 | -0.54 |
| WISC - Performance IQ: F@8 | 103.49 (±16.79) | 109.00 (±15.33) | 104 | 125 | 115 | 119 | 109 | 115 | 90 | 80 | 124 |
| PIQ std score | - | 0.33 (±0.91) | 0.03 | 1.28 | 0.69 | 0.92 | 0.33 | 0.69 | -0.80 | -1.40 | 1.22 |
| WISC - Total IQ: F@8 | 109.12 (±16.00) | 114.89 (±14.73) | 104 | 133 | 132 | 111 | 111 | 130 | 111 | 88 | 114 |
| IQ std score | - | 0.36 (±0.92) | -0.32 | 1.49 | 1.43 | 0.12 | 0.12 | 1.30 | 0.12 | -1.32 | 0.31 |
| WISC - Verbal Comprehension Index: F@8 | 48.47 (±11.10) | 51.79 (±12.51) | 38 | 63 | 72 | 44 | 47 | 58 | 63 | 37 | 44 |
| VCI std score | - | 0.30 (±1.13) | -0.94 | 1.31 | 2.12 | -0.40 | -0.13 | 0.86 | 1.31 | -1.03 | -0.40 |
| WISC - Perceptual Organisation Index: F@8 | 41.51 (±10.50) | 43.80 (±8.37) | 41 | 49 | 50 | 53 | 44 | 50 | 30 | 31 | 47 |
| POI std score | - | 0.23 (±0.80) | -0.05 | 0.71 | 0.81 | 1.09 | 0.24 | 0.81 | -1.10 | -1.00 | 0.52 |
| WISC - Freedom from Distractability Index: F@8 | 22.17 (±5.96) | 24.11 (±5.42) | 27 | 26 | 22 | 22 | 28 | 35 | 19 | 20 | 18 |
| FDI std score | - | 0.33 (±0.91) | 0.81 | 0.64 | -0.03 | -0.03 | 0.98 | 2.15 | -0.53 | -0.36 | -0.70 |



≦-1.0 Std score compared to UK10K non-carriers

≦-0.0 Std score compared to UK10K non-carriers

≧1.0 Std score compared to UK10K non-carriers

≧0.0 Std score compared to UK10K non-carriers

Table S4. NMD efficacy predictions for SATB1 truncating variants.

| (Hg19/GRCh37)g.DNA-position | g.DNA-position of introduced (downstream) stopcodon | c.DNA-position (NM_001131010.4) | Protein effect** | NMDetective A¥ (1) | NMDetective A¥ (2) | NMDetective B¥ (1) | NMDetective B¥ (2) | Conclusion based on predictions with NMDetectiveA/B | Prediction based on canonical# and non- canonical§ NMD rules |
|-------------------------------|--------------------------------------------------------------|------------------------------------|---------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| Chr3:g.18456634_18456635delCT | Chr3:g.18436407 | c.607_608delAG | p.S203Ffs*49 | 0.63 | 0.45 | 0.65 | 0.41 | Conflicting; NMDetectiveA/B (1): triggers NMD, NMDetectiveA/B (2): intermediate NMD efficacy. | Triggers NMD, none of (non)-canonical NMD rules applicable |
| Chr3:g.18436155_18436156deITC | Chr3:g.18436098 | c.1004_1005delGA | p.R335Tfs*20 | 0.51 | 0.52 | 0.41 | 0.41 | Intermediate NMD efficacy | Might escape from NMD. None of canonical NMD rules applicable, non- canonical long-exon rule applicable (exon 7; 454 nucleotides). |
| Chr3:g.18428082G>A | Chr3:g.18428082 | c.1228C>T | p.R410* | 0.6 | | 0.65 | | Triggers NMD | Triggers NMD, none of (non)-canonical NMD rules applicable |
| Chr3:g.18419777delG | Chr3:g.18419762 | c.1460delC | p.P487Qfs*6 | 0.62 | 0.62 | 0.65 | 0.65 | Triggers NMD | Triggers NMD, none of (non)-canonical NMD rules applicable |
| Chr3:g.18393687C>T | Chr3:g.18393611 | c.1576G>A | p.(?) | 0.57 | 0.6 | 0.65 | 0.65 | Triggers NMD | Triggers NMD, none of (non)-canonical NMD rules applicable |
| Chr3:g.18391077delG | Chr3:g.18390837 | c.1877delC | p.P626Hfs*81 | 0.08 | 0.26 | 0 | 0 | Conflicting; NMDetectiveA/B (1) and NMDetectiveB (2): escapes NMD; NMDetectiveA (2): intermediate NMD efficacy, | Escapes NMD based on canonical last exon rule |
| Chr3:g.18390921_18390922delCA | Chr3:g.18390797 | c.2032_2033delCT | p.L678Vfs*42 | 0.18 | 0.17 | 0 | 0 | Escapes NMD | Escapes NMD based on canonical last exon rule |
| Chr3:g.18390874G>A | Chr3:g.18390874 | c.2080C>T | p.Q694* | 0.2 | | 0 | | Escapes NMD | Escapes NMD based on canonical last exon rule |
| Chr3:g.18390747delT | Chr3:g.18390726 | c.2207delA | p.N736lfs*8 | 0.16 | 0.16 | 0 | 0 | Escapes NMD | Escapes NMD based on canonical last exon rule |

**For frameshift mutations, scores for NMDetectiveA and NMDetectiveB were assigned both based on the genomic location of the indel (1) and based on the genomic location of the first downstream stopcodon in the new reading frame (2; first nucleotide of introduced stopcodon) (PMID: 31659324). For splice site mutations, NMDetectiveA and NMDetectiveB were assigned based on the effect predicted by spliceAI (PMID: 30661751).

¥NMDetectiveA and NMDetectiveB cut-off scores (v2): <0.25 predicted to escape NMD ≥0.25 - ≤0.52 predicted intermediate NDM efficacy

>0.52 predicted to trigger NMD (PMID: 31659324)

#Canonical rules of NMD (PMID: 27618451):

NMD is typically not triggered when the location of the protein truncating variant is

1. less than 50 nucleotides upstream of last exon-exon junction; or

2. in the last exon.

§Non-canonical rules of NMD (PMID: 27618451):

NMD is not triggered when the location of the protein truncating variant is

1. in a very long exon (> ±400 nucleotides); or

2. within 150 nucleotides from the start codon.

\$ - predicted amino acid sequences of NMD-escaping truncating variants in SATB1

Amino acid sequence of SATB1 (NM_002971.4/NM_001131010.4) in the normal situation

MDHLNEATQGKEHSEMSNNVSDPKGPPAKIARLEQNGSPLGRGRLGSTGAKMQGVPLKHSGHLMKTNLRKGTMLPVFCVVEH YENAIEYDCKEEHAEFVLVRKDMLFNQLIEMALLSLGYSHSSAAQAKGLIQVGKWNPVPLSYVTDAPDATVADMLQDVYHVVTLK IQLHSCPKLEDLPPEQWSHTTVRNALKDLLKDMNQSSLAKECPLSQSMISSIVNSTYYANVSAAKCQEFGRWYKHFKKTKDMMV EMDSLSELSQQGANHVNFGQQPVPGNTAEQPPSPAQLSHGSQPSVRTPLPNLHPGLVSTPISPQLVNQQLVMAQLLNQQYAVN RLLAQQSLNQQYLNHPPPVSRSMNKPLEQQVSTNTEVSSEIYQWVRDELKRAGISQAVFARVAFNRTQGLLSEILRKEEDPKTAS QSLLVNLRAMQNFLQLPEAERDRIYQDERERSLNAASAMGPAPLISTPPSRPPQVKTATIATERNGKPENNTMNINASIYDEIQQE MKRAKVSQALFAKVAATKSQGWLCELLRWKEDPSPENRTLWENLSMIRRFLSLPQPERDAIYEQESNAVHHHGDRPHIIHVPA EQIQQQQQQQQQQAPPPPQPQQQPGRPLPPRQPTVASPAESDEENRQKTRPRTKISVEALGILQSFIQDVGLYPDE EAIQTLSAQLDLPKYTIIKFFQNQRYYLKHHGKLKDNSGLEVDVAEYKEEELLKDLEESVQDKNTNTLFSVKLEEELSVEGNTDINT DLKD

Aminoacid sequence of SATB1 (NM_002971.4/NM_001131010.4) in patient 5

Chr3:g.18428082G>A; c.1228C>T; p.R410*

MDHLNEATQGKEHSEMSNNVSDPKGPPAKIARLEQNGSPLGRGRLGSTGAKMQGVPLKHSGHLMKTNLRKGTMLPVFCVVEH YENAIEYDCKEEHAEFVLVRKDMLFNQLIEMALLSLGYSHSSAAQAKGLIQVGKWNPVPLSYVTDAPDATVADMLQDVYHVVTLK IQLHSCPKLEDLPPEQWSHTTVRNALKDLLKDMNQSSLAKECPLSQSMISSIVNSTYYANVSAAKCQEFGRWYKHFKKTKDMMV EMDSLSELSQQGANHVNFGQQPVPGNTAEQPPSPAQLSHGSQPSVRTPLPNLHPGLVSTPISPQLVNQQLVMAQLLNQQYAVN RLLAQQSLNQQYLNHPPPVSRSMNKPLEQQVSTNTEVSSEIYQWVRDELKRAGISQAVFARVAFNRTQGLLSEIL*

Aminoacid sequence of SATB1 (NM_002971.4/NM_001131010.4) in patient 8

Chr3:g.18391077del; c.1877del; p.P626Hfs*81

MDHLNEATQGKEHSEMSNNVSDPKGPPAKIARLEQNGSPLGRGRLGSTGAKMQGVPLKHSGHLMKTNLRKGTMLPVFCVVEH YENAIEYDCKEEHAEFVLVRKDMLFNQLIEMALLSLGYSHSSAAQAKGLIQVGKWNPVPLSYVTDAPDATVADMLQDVYHVVTLK IQLHSCPKLEDLPPEQWSHTTVRNALKDLLKDMNQSSLAKECPLSQSMISSIVNSTYYANVSAAKCQEFGRWYKHFKKTKDMMV EMDSLSELSQQGANHVNFGQQPVPGNTAEQPPSPAQLSHGSQPSVRTPLPNLHPGLVSTPISPQLVNQQLVMAQLLNQQYAVN RLLAQQSLNQQYLNHPPPVSRSMNKPLEQQVSTNTEVSSEIYQWVRDELKRAGISQAVFARVAFNRTQGLLSEILRKEEDPKTAS QSLLVNLRAMQNFLQLPEAERDRIYQDERERSLNAASAMGPAPLISTPPSRPQVKTATIATERNGKPENNTMNINASIYDEIQQE MKRAKVSQALFAKVAATKSQGWLCELLRWKEDPSPENRTLWENLSMIRRFLSLPQPERDAIYEQESNAVHHHGDRPPHIIHVPA EQIQQQQQQQQQQQQQQQQQPPPPQQQQPGFRLPHGNPRWPLQQSQMRKTDRRPGHEQKFQWKPWESSRVSYKTWA CTLTKRPSRLCLPSSTFPSTPSSSSFRTSGTISSTTAN*

Aminoacid sequence of SATB1 (NM_002971.4/NM_001131010.4) in patient 9 and 10 Chr3:g. 18390921_18390922del; c.2032_2033del; p.L678Vfs*42

MDHLNEATQGKEHSEMSNNVSDPKGPPAKIARLEQNGSPLGRGRLGSTGAKMQGVPLKHSGHLMKTNLRKGTMLPVFCVVEH YENAIEYDCKEEHAEFVLVRKDMLFNQLIEMALLSLGYSHSSAAQAKGLIQVGKWNPVPLSYVTDAPDATVADMLQDVYHVVTLK IQLHSCPKLEDLPPEQWSHTTVRNALKDLLKDMNQSSLAKECPLSQSMISSIVNSTYYANVSAAKCQEFGRWYKHFKKTKDMMV EMDSLSELSQQGANHVNFGQQPVPGNTAEQPPSPAQLSHGSQPSVRTPLPNLHPGLVSTPISPQLVNQQLVMAQLLNQQYAVN RLLAQQSLNQQYLNHPPPVSRSMNKPLEQQVSTNTEVSSEIYQWVRDELKRAGISQAVFARVAFNRTQGLLSEILRKEEDPKTAS QSLLVNLRAMQNFLQLPEAERDRIYQDERERSLNAASAMGPAPLISTPPSRPPQVKTATIATERNGKPENNTMNINASIYDEIQQE MKRAKVSQALFAKVAATKSQGWLCELLRWKEDPSPENRTLWENLSMIRRFLSLPQPERDAIYEQESNAVHHHGDRPHIIHVPA EQIQQQQQQQQQQQQQQQQQQAPPPPQQQQPGFRLPPRQPTVASPAESDEENRQKTRPRTKISVEALGILQSFIQDVGLYPDE EAIQTVCPARPSQVHHHQVLSEPAVLSQAPRQTEGQFRFRGRCGRI*

Aminoacid sequence of SATB1 (NM_002971.4/NM_001131010.4) in patient 11

Chr3:g. 18390874G>A; c.2080C>T; p.Q694*

MDHLNEATQGKEHSEMSNNVSDPKGPPAKIARLEQNGSPLGRGRLGSTGAKMQGVPLKHSGHLMKTNLRKGTMLPVFCVVEH YENAIEYDCKEEHAEFVLVRKDMLFNQLIEMALLSLGYSHSSAAQAKGLIQVGKWNPVPLSYVTDAPDATVADMLQDVYHVVTLK IQLHSCPKLEDLPPEQWSHTTVRNALKDLLKDMNQSSLAKECPLSQSMISSIVNSTYYANVSAAKCQEFGRWYKHFKKTKDMMV EMDSLSELSQQGANHVNFGQQPVPGNTAEQPPSPAQLSHGSQPSVRTPLPNLHPGLVSTPISPQLVNQQLVMAQLLNQQYAVN RLLAQQSLNQQYLNHPPPVSRSMNKPLEQQVSTNTEVSSEIYQWVRDELKRAGISQAVFARVAFNRTQGLLSEILRKEEDPKTAS QSLLVNLRAMQNFLQLPEAERDRIYQDERERSLNAASAMGPAPLISTPPSRPQVKTATIATERNGKPENNTMNINASIYDEIQQE MKRAKVSQALFAKVAATKSQGWLCELLRWKEDPSPENRTLWENLSMIRRFLSLPQPERDAIYEQESNAVHHHGDRPPHIIHVPA EQIQQQQQQQQQQQQQQQQAPPPPQQQQPGFPRLPPRQPTVASPAESDEENRQKTRPRTKISVEALGILQSFIQDVGLYPDE EAIQTLSAQLDLPKYTIIKFF*

Aminoacid sequence of SATB1 (NM_002971.4/NM_001131010.4) in patient 12

Chr3:g.18390747del; c.2207del; p.N736lfs*8

MDHLNEATQGKEHSEMSNNVSDPKGPPAKIARLEQNGSPLGRGRLGSTGAKMQGVPLKHSGHLMKTNLRKGTMLPVFCVVEH YENAIEYDCKEEHAEFVLVRKDMLFNQLIEMALLSLGYSHSSAAQAKGLIQVGKWNPVPLSYVTDAPDATVADMLQDVYHVVTLK IQLHSCPKLEDLPPEQWSHTTVRNALKDLLKDMNQSSLAKECPLSQSMISSIVNSTYYANVSAAKCQEFGRWYKHFKKTKDMMV EMDSLSELSQQGANHVNFGQQPVPGNTAEQPPSPAQLSHGSQPSVRTPLPNLHPGLVSTPISPQLVNQQLVMAQLLNQQYAVN RLLAQQSLNQQYLNHPPPVSRSMNKPLEQQVSTNTEVSSEIYQWVRDELKRAGISQAVFARVAFNRTQGLLSEILRKEEDPKTAS QSLLVNLRAMQNFLQLPEAERDRIYQDERERSLNAASAMGPAPLISTPPSRPPQVKTATIATERNGKPENNTMNINASIYDEIQQE MKRAKVSQALFAKVAATKSQGWLCELLRWKEDPSPENRTLWENLSMIRRFLSLPQPERDAIYEQESNAVHHHGDRPHIIHVPA EQIQQQQQQQQQQQQQQQQQAPPPPQQQQPGFRLPPRQPTVASPAESDEENRQKTRPRTKISVEALGILQSFIQDVGLYPDE EAIQTLSAQLDLPKYTIIKFFQNQRYYLKHHGKLKDNSGLEVDVAEYKEEELLKDLEESVQDKILTPFFQ* Table S5. Summary of clinical characteristics associated with (de novo) SATB1 PTVs and (partial) gene deletions predicted to result in haploinsufficiency and PTVs in the last exon.

| % Present / total assessed % Present / total assessed Intellicicual disability 86 6/7 67 2/3 Normal 14 1/7 33 1/3 Bordefine 0 0/7 0 0/3 Midid 71 5/7 33 1/3 Moderatu 14 1/7 0 0/3 Bervice 0 0/7 0 0/3 Developmental delay 100 0/7 33 1/3 Developmental delay 100 0/7 100 5/5 Speech delay 86 6/7 100 2/5 Speech delay 86 6/7 80 4/5 Dysatrinia 14 1/7 0 0/4 2/5 Speech delay 14 1/7 20 1/6 4/3 Speech delay 14 1/7 0 0/5 5/5 Speech delay 14 1/7 0 0/5 5/5 | | Individuals with PTVs and (partial) gene deletions predicted to result in haploinsufficiency | | | Individuals with PTVs in the last exon | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|--------------------------|-----|----------------------------------------|--|--|
| Neurologic Image: Control of the second | | % | Present / total assessed | % | Present / total assessed | | |
| Intellectual disability 86 67 67 273 Normal 14 1/17 33 1/3 Briderine 0 077 0 0/3 Midd 71 577 33 1/3 Moderato 14 1/7 0 0/3 Severa 0 0/7 0 0/3 Inspecified 0 0/7 33 1/3 Developmental delay 100 0/7 100 565 Spech delay 86 6/7 100 55 Spech delay 86 6/7 80 4/5 Dysathria 14 1/7 0 0/4 2/5 Specificity 0 0/6 40 2/5 3/5 Specificity 0 0/7 0 0/5 3/5 Specificity 0 0/7 0 0/5 3/5 Specificity 14 1/7 0 0/5 3/5 | Neurologic | | | | | | |
| Normal 14 1/7 33 (*)3 Borderline 0 0.77 0 0.33 Mild 71 57 33 1/3 Moderate 14 1/7 0 0.33 Severe 0 0/7 0 0.33 Protound 0 0/7 10 0.33 Unspectified 0 0/7 100 5/5 Moderate 66 6/7 100 5/5 Speech delay 166 6/7 100 5/5 Speech delay 0 0.44 67 2/3 Phystorina 14 1/7 0 0.45 Speech delay 0 0.47 0 0.55 Speech and isturbances 50 3/6 0 0/5 Speech and isturbances 50 3/6 0 0/5 Speech and isturbances 50 3/6 20 1/5 Anormalite isturbances 50 3/7< | Intellectual disability | 86 | 6/7 | 67 | 2/3 | | |
| Bordenine 0 0/7 0 0 3 Mild 71 577 33 1/3 Moderate 14 1/7 0 0/3 Severe 0 0/7 0 0/3 Inspacifiad 0 0/7 33 1/3 Developmental delay 100 0/7 33 1/3 Developmental delay 100 0/7 100 5/6 Speech delay 86 6/7 80 4/5 Dysatrina 14 1/7 0 0/4 EG abnomalities 0 0/6 40 2/5 Spesticity 0 0/6 40 2/5 Spesticity 0 0/7 0 0/5 Atoxia 14 1/7 20 1/5 Anomal tain inaging 33 1/3 60 2/4 Regression 14 1/7 0 0/5 Anomal tain inaging 33 2/6 80 | Normal | 14 | 1/7 | 33 | 1/3 | | |
| Mid 71 57 33 1/3 Moderate 14 1/7 0 0.8 Severe 0 0/7 0 0.8 Profound 0 0/7 0 0.8 Unspecified 0 0/7 33 1/3 Devatopmantal delay 00 0/7 33 1/3 Devatopmantal delay 86 6/7 100 5/5 Speach daiay 86 6/7 80 4/5 Dysathina 14 1/7 0 0/4 EG abnormalities 0 0/6 40 2/5 Spasticity 0 0/7 0 0/5 Atxia 14 1/7 20 1/5 Shend distubances 100 7/7 0 0/5 Abnormalities during pregnancy 33 1/3 50 2/4 Regression 14 1/7 0 0/5 0 Abnormalities during pregnancy <td< td=""><td>Borderline</td><td>0</td><td>0/7</td><td>0</td><td>0/3</td></td<> | Borderline | 0 | 0/7 | 0 | 0/3 | | |
| Moderate 14 177 0 03 Severa 0 077 0 03 Profound 0 077 0 03 Unspacified 0 077 100 55 Motor delay 100 777 100 55 Motor delay 86 677 100 55 Speach delay 86 677 100 55 Dysentria 14 177 0 04 Dysentria 43 377 40 25 Spasitoly 0 077 0 05 Ataxia 14 177 20 1/5 Behavioral disturbances 50 36 0 06 Aboramalities during prepnacy 33 1/3 50 2/4 Regression 14 1/7 0 05 20 1/5 Aboramalities during prepnacy 33 2/6 80 4/6 Aboramalities during delivery < | Mild | 71 | 5/7 | 33 | 1/3 | | |
| Severe 0 0/7 0 0/3 Profound 0 0/7 33 1/8 Developmental delay 100 7/7 100 55 Motor delay 66 6/7 100 55 Spesch delay 66 6/7 80 4/5 Spesch delay 68 6/7 80 4/6 Disarbrina 14 1/17 0 0/4 EG abnormalities 0 0/6 40 2/3 Hypotonia 43 3/7 40 2/6 Speschidy 0 0/7 0 0/6 Ataxia 14 1/7 20 0/6 Abavioral disturbances 50 3/6 0 0/6 Abnormalities during preparact 14 1/17 0 0/6 Abnormalities during preparact 33 2/6 20 1/16 Abnormalities during preparact 33 2/6 20 1/16 Proteum (>37 | Moderate | 14 | 1/7 | 0 | 0/3 | | |
| Protound 0 0/7 0 0/3 Unspecified 0 0/7 100 5/5 Motor delay 100 7/7 100 5/5 Speech delay 86 6/7 100 5/5 Speech delay 86 6/7 80 4/5 Dysantha 14 1/7 0 0/4 Dysantha 14 1/7 0 0/4 EEG abnormalities 0 0/6 4/0 2/5 Spasitoly 0 0/7 0 0/5 Spasitoly 0 0/7 0 0/5 Ataxia 14 1/7 20 1/5 Ataxia 14 1/7 0 0/5 Anomal tain imaging 33 2/6 20 1/5 Anomal tain inding delivery 33 2/6 80 4/5 Anomal tain inding delivery 33 2/6 20 1/5 Anoramal tain of delivery 33 | Severe | 0 | 0/7 | 0 | 0/3 | | |
| Unspecified 0 0/7 33 1/3 Deviopmental delay 100 777 100 55 Motor delay 86 6/7 80 445 Dysarthía 14 1/7 0 0.44 Epilepsy 0 0/6 40 2.5 EG abnormalities 0 0/4 67 2.3 Hypotonia 43 3/7 40 2.5 Spastidy 0 0/7 0 0.05 Atxia 14 1/7 20 1/5 Behavioral disturbances 100 7/7 0 0.5 Steep disturbances 100 7/7 0 0.5 Abnormalities during pregnancy 33 1/3 50 2.4 Abnormalities during pregnancy 33 2/6 80 4/5 Abnormalities during pregnancy 33 2/6 80 4/5 Abnormalities during pregnancy 33 2/6 80 4/5 <t< td=""><td>Profound</td><td>0</td><td>0/7</td><td>0</td><td>0/3</td></t<> | Profound | 0 | 0/7 | 0 | 0/3 | | |
| Developmental delay 100 777 100 555 Motor delay 86 677 100 56 Speech delay 86 677 80 445 Dysarthia 14 177 0 044 Elepapy 0 066 40 2.5 EEG abnormalities 0 0/4 67 2.3 Phyotonia 433 377 40 2.5 Statisty 0 0.77 0 0.5 Ataxia 14 177 20 1/5 Behavioral disturbances 50 3.6 0 0.5 Abnormalities during pregnancy 33 1/3 50 2.4 Abnormalities during delevery 33 2/6 80 4/5 Abnormalities during delevery 0 0/5 20 1/5 Pretarm (-37 weaks) 0 0/5 0 0.6 Abnormalities during delevery 0 0/5 0 0.4 L | Unspecified | 0 | 0/7 | 33 | 1/3 | | |
| Mater 86 677 100 555 Speech delay 86 677 80 445 Dysanthia 14 1/7 0 0.04 Eplapay 0 0.06 40 2.5 ES abnormalities 0 0.064 67 2.3 Hypotonia 43 3.7 40 2.5 Spasticity 0 0.07 0 0.65 Atxia 14 1.17 2.0 1.15 Behavioral disturbances 50 3.46 0 0.05 Abnormalities during pregnancy 33 1.13 50 2.44 Abnormalities during pregnancy 33 2.16 80 4.15 Abnormalities during pregnancy 33 2.16 2.0 </td <td>Developmental delay</td> <td>100</td> <td>7/7</td> <td>100</td> <td>5/5</td> | Developmental delay | 100 | 7/7 | 100 | 5/5 | | |
| Speech olday 86 6/7 80 445 Dysarthia 14 177 0 0/4 ElG abnormalities 0 0/6 40 2/5 EEG abnormalities 0 0/4 67 2/3 Hypotonia 43 3/7 40 2/5 Statisty 0 0/7 0 0/5 Abnormalities Admonases 100 7/7 0 0/5 Sheep disturbances 50 3/6 0 0/5 Abnormalities during pregnancy 33 1/3 50 2/4 Abnormalities during pregnancy 33 2/6 80 4/5 Abnormalities during pregnancy 33 2/6 80 4/5 Abnormalities during pregnancy 0 0/5 20 1/5 Abnormalities during delynery 0 0/5 20 1/5 Abnormalities during delynery 0 0/5 20 1/5 Abnormalities during delynery 0 0/5 | Motor delay | 86 | 6/7 | 100 | 5/5 | | |
| Dysathria 14 1/7 0 0/4 Eplepsy 0 0/6 40 2/5 EEG anormalities 0 0/4 67 2/3 Hypotonia 43 3/7 40 2/5 Spasitity 0 0/7 0 0/5 Ataxia 14 1/7 20 1/5 Behavioral disturbances 50 3/6 0 0/5 Abnormalities during pregnancy 33 1/3 50 2/4 Regression 14 1/7 0 0/5 20 1/5 Abnormalities during pregnancy 33 2/6 80 4/6 20 1/5 Abnormalities during delivery 33 2/6 80 4/5 20 1/5 20 1/5 20 1/5 20 1/5 20 1/5 20 1/5 20 1/5 20 1/5 20 1/5 20 1/4 20 1/5 20 1/5 | Speech delay | 86 | 6/7 | 80 | 4/5 | | |
| Epilepsy 0 0/6 40 2/5 EEG abnormalities 0 0/4 67 2/3 Hypotonia 43 3/7 40 2/5 Spasticity 0 0/7 0 0/5 Ataxia 14 1/7 20 1/5 Behavioral disturbances 100 7/7 0 0/5 Step disturbances 50 3/6 0 0/5 Abnormalities during pregnancy 33 2/6 20 1/5 Abnormalities during delivery 33 2/6 80 4/5 Abnormalities during delivery 33 2/6 80 4/5 Abnormalities during delivery 0 0/5 20 1/5 Postem (-3/2 weeks) 0 0/5 20 1/5 Postem (-3/2 weeks) 0 0/5 25 1/4 Small for gestational age (>p00) 0 0/5 25 1/4 Abnormal head circumference at birth 25 1/4 | Dysarthria | 14 | 1/7 | 0 | 0/4 | | |
| EEG anomalities 0 0/4 67 2/3 Spasicity 0 0/7 0 0/5 Spasicity 0 0/7 0 0/5 Behavioral disturbances 100 7/7 0 0/5 Sheep disturbances 50 3/6 0 0/5 Abnormalities during pregnancy 33 1/3 50 2/4 Regression 14 1/7 0 0/5 Abnormalities during pregnancy 33 2/6 20 1/5 Abnormalities during delivery 33 2/6 80 4/5 Abnormalities during delivery 33 2/6 80 4/5 Abnormalities during delivery 0 0/5 20 1/5 Postem (-57) weeks) 0 0/5 20 1/5 Abnormalities during pregnancy 20 1/5 25 1/4 Abnormalities during pregnancy 33 2/6 80 4/5 Abnormalities during pregnancy 0 | Epilepsy | 0 | 0/6 | 40 | 2/5 | | |
| Hypotonia 43 37 40 2/5 Spasticity 0 0/7 0 0/5 Atxia 14 1/7 20 1/5 Behavioral disturbances 100 7/7 0 0/5 Steep disturbances 50 3/6 0 0/5 Abnomalities during pregnancy 33 1/3 50 2/4 Regression 14 1/7 0 0/5 Abnomalities during pregnancy 33 2/6 80 4/5 Abnomalities during delivery 33 2/6 80 4/5 Abnomalities during delivery 0 0/5 20 1/5 Preterm (-37 weeks) 0 0/5 0 0/5 Prostem (-32 weeks) 0 0/5 25 1/4 Abnormal weight at birth 20 1/5 25 1/4 Abnormal iead circumferance at birth 25 1/4 0 0/2 Abnormal height 14 1/7 0 | EEG abnormalities | 0 | 0/4 | 67 | 2/3 | | |
| Spasibility 0 0/7 0 0/5 Ataxia 14 1/7 20 1/5 Behavloral disturbances 100 7/7 0 0/5 Sheep disturbances 50 3/6 0 0/5 Abnormal brain imaging 33 1/3 50 2/4 Regression 14 1/7 0 0/5 Abnormalities during pregnancy 33 2/6 80 4/5 Abnormalities during delivery 33 2/6 80 4/5 Abnormalities during delivery 0 0/5 20 1/5 Preterm (-42 weeks) 0 0/5 20 1/6 Abnormal inegring ta birth 20 1/5 25 1/4 Shand infor gestational age (cp10) 20 1/5 25 1/4 Abnormal inegring ta birth 25 1/4 0 0/2 Abnormal inegring ta birth 25 1/4 0 0/2 Abnormal head circumference at birth 25 | Hypotonia | 43 | 3/7 | 40 | 2/5 | | |
| Ataxia 14 177 20 1/5 Behavioral disturbances 100 777 0 0/5 Sheep disturbances 50 3/6 0 0/5 Abnormal brain imaging 33 11/3 50 2/4 Regression 114 1/7 0 0/5 Growth | Spasticity | 0 | 0/7 | 0 | 0/5 | | |
| Behavoral disturbances 100 77 0 0/5 Sleep disturbances 50 3/6 0 0/5 Abnormal brain imaging 33 1/3 50 2/4 Regression 14 1/7 0 0/5 Growth Abnormalities during pregnancy 33 2/6 80 4/5 Abnormalities during delivery 0 0/5 20 1/5 Abnormal timo delivery 0 0/5 20 1/5 Postem (>37 weeks) 0 0/5 0 0/6 Abnormal timo delivery 0 0/5 25 1/4 Small for gestational age (<p10)< td=""> 20 1/5 0 0/4 Large for gestational age (<p90)< td=""> 0 0/5 25 1/4 Abnormal height 14 1/7 0 0/4 Macrocephaly (>p3) 0 0/7 0 0/4 Macrocephaly (>p3) 0 0/5 25</p90)<></p10)<> | Ataxia | 14 | 1/7 | 20 | 1/5 | | |
| Sleep disturbances 50 3/6 0 0/5 Abnormal brain imaging 33 1/3 50 2/4 Regression 14 1/7 0 0/5 Growth | Behavioral disturbances | 100 | 7/7 | 0 | 0/5 | | |
| Abnormal brain imaging 33 1/3 50 2/4 Regression 14 1/7 0 0/6 Growth Abnormalities during pregnancy 33 2/6 20 1/5 Abnormalities during delivery 0 0/5 20 1/5 Abnormalities during delivery 0 0/5 20 1/5 Posterm (-37 weeks) 0 0/5 20 1/5 Posterm (-37 weeks) 0 0/5 25 1/4 Shormal weight at birth 20 1/5 25 1/4 Abnormal eight of gestational age (>p90) 0 0/5 25 1/4 Abnormal head circumference at birth 25 1/4 0 0/2 Macrocephaly (>p3) 0 0/7 0 0/4 0 0/2 Abnormal head circumference 0 0/5 25 1/4 0 0/2 Abnormal head circumference 0 0/7 0 0/4< | Sleep disturbances | 50 | 3/6 | 0 | 0/5 | | |
| Regression 14 1/7 0 0/6 Growth Abnomalities during pregnancy 33 2/6 80 4/5 Abnomalities during delivery 0 0/5 20 1/5 Posterm (-37 weeks) 0 0/5 20 1/5 D 1/5 D 0/5 Abnomal weight at birth 20 1/15 0 0/4 D 0/2 I/4 D D 0/2 D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D D <t< td=""><td>Abnormal brain imaging</td><td>33</td><td>1/3</td><td>50</td><td>2/4</td></t<> | Abnormal brain imaging | 33 | 1/3 | 50 | 2/4 | | |
| Growth n n n Abnormalities during pregnancy 33 2/6 20 1/5 Abnormalities during delivery 33 2/6 80 4/5 Abnormalities during delivery 0 0/5 20 1/5 Preterm (<37 weeks) | Regression | 14 | 1/7 | 0 | 0/5 | | |
| Abnormalities during delivery 33 2/6 20 1/5 Abnormalities during delivery 33 2/6 80 4/5 Abnormalities during delivery 0 0/5 20 1/5 Preterm (<37 weeks) | Growth | | | | | | |
| Abnormalities during delivery 33 2/6 80 4/5 Abnormal term of delivery 0 0/5 20 1/5 Preterm (-37 weeks) 0 0/5 20 1/5 Postterm (-42 weeks) 0 0/5 0 0/5 Abnormal weight at birth 20 1/5 0 0/4 Small for gestational age (<p10)< td=""> 20 1/5 0 0/4 Large for gestational age (<p10)< td=""> 20 1/4 0 0/2 Microcephaly (<p3)< td=""> 0 0/4 0 0/2 Macrocephaly (<p597)< td=""> 25 1/4 0 0/2 Macrocephaly (<p597)< td=""> 25 1/4 0 0/2 Macrocephaly (<p97)< td=""> 0 0/7 0 0/4 Tall stature (<p97)< td=""> 14 1/7 0 0/4 Microcephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p3)< td=""> 0 0/5<!--</td--><td>Abnormalities during pregnancy</td><td>33</td><td>2/6</td><td>20</td><td>1/5</td></p3)<></p3)<></p3)<></p97)<></p97)<></p597)<></p597)<></p3)<></p10)<></p10)<> | Abnormalities during pregnancy | 33 | 2/6 | 20 | 1/5 | | |
| Abnormal term of delivery 0 0/5 20 1/5 Preterm (<37 weeks) | Abnormalities during delivery | 33 | 2/6 | 80 | 4/5 | | |
| Preterm (<37 weeks) 0 0/5 20 1/5 Postterm (<42 weeks) | Abnormal term of delivery | 0 | 0/5 | 20 | 1/5 | | |
| Postterm (>42 weeks) 0 0/5 0 0/5 Abnormal weight at birth 20 1/5 25 1/4 Small for gestational age (>p10) 20 1/5 0 0/4 Large for gestational age (>p90) 0 0/5 25 1/4 Abnormal head circumference at birth 25 1/4 0 0/2 Microcephaly (<p3)< td=""> 0 0/4 0 0/2 Abnormal head circumference at birth 25 1/4 0 0/2 Abnormal height 14 1/7 0 0/4 Abnormal height 14 1/7 0 0/4 Abnormal (<p97)< td=""> 14 1/7 0 0/4 Abnormal weight (<p3)< td=""> 0 0/5 25 1/4 Microcephaly (>p97) 0 0/5 25 1/4 Microcephaly (>p97) 0 0/5 25 1/4 Microcephaly (>p97) 0 0/5 25 1/4 Underweight (>p97) 0</p3)<></p97)<></p3)<> | Preterm (<37 weeks) | 0 | 0/5 | 20 | 1/5 | | |
| Abnormal weight at birth 20 1/5 25 1/4 Small for gestational age (<p10)< td=""> 20 1/5 0 0/4 Large for gestational age (<p10)< td=""> 20 1/5 0 0/4 Abnormal head circumference at birth 25 1/4 0 0/2 Microcephaly (<p3)< td=""> 0 0/4 0 0/2 Abnormal head circumference at birth 14 1/7 0 0/4 Abnormal height 14 1/7 0 0/4 Short stature (<p3)< td=""> 0 0/7 0 0/4 Abnormal height 14 1/7 0 0/4 Abnormal height 14 1/7 0 0/4 Abnormal height 0 0/5 25 1/4 Microcephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p97)< td=""> 0 0/5 25 1/4 Underweight (<p97)< td=""> 0 0/5 25 1/4 Other phenotypic features 7 <t< td=""><td>Postterm (>42 weeks)</td><td>0</td><td>0/5</td><td>0</td><td>0/5</td></t<></p97)<></p97)<></p3)<></p3)<></p3)<></p10)<></p10)<> | Postterm (>42 weeks) | 0 | 0/5 | 0 | 0/5 | | |
| Small for gestational age (<p10)< th=""> 20 1/5 0 0/4 Large for gestational age (<p90)< td=""> 0 0/5 25 1/4 Abnormal head circumference at birth 25 1/4 0 0/2 Microcephaly (<p3)< td=""> 0 0/4 0 0/2 Macrocephaly (<p97)< td=""> 25 1/4 0 0/2 Abnormal height 14 1/7 0 0/4 Short stature (<p93)< td=""> 0 0/7 0 0/4 Abnormal head circumference 0 0/5 25 1/4 Microcephaly (<p93)< td=""> 0 0/5 25 1/4 Macrocephaly (<p93)< td=""> 0 0/5 25 1/4 Macrocephaly (<p93)< td=""> 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Overweight (<p97)< td=""> 0 0/5 0 0/4 Abnormal weight 0 0/5 0 0/4 Other phenotypic features </p97)<></p3)<></p93)<></p93)<></p93)<></p93)<></p97)<></p3)<></p90)<></p10)<> | Abnormal weight at birth | 20 | 1/5 | 25 | 1/4 | | |
| Large for gestational age (>p90) 0 0/5 25 1/4 Abnormal head circumference at birth 25 1/4 0 0/2 Microcephaly (<p3)< td=""> 0 0/4 0 0/2 Macrocephaly (>p97) 25 1/4 0 0/2 Abnormal height 14 1/7 0 0/4 Short stature (<p3)< td=""> 0 0/7 0 0/4 Abnormal height 14 1/7 0 0/4 Abnormal head circumference 0 0/5 25 1/4 Macrocephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p97)< td=""> 0 0/5 25 1/4 Macrocephaly (<p97)< td=""> 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Overweight (<p97)< td=""> 0 0/5 25</p97)<></p3)<></p97)<></p97)<></p3)<></p3)<></p3)<></p3)<></p3)<> | Small for gestational age (<p10)< td=""><td>20</td><td>1/5</td><td>0</td><td>0/4</td></p10)<> | 20 | 1/5 | 0 | 0/4 | | |
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| Microcephaly (<p3)< th=""> 0 0/4 0 0/2 Macrocephaly (>p97) 25 1/4 0 0/2 Abnormal height 14 1/7 0 0/4 Short stature (<p3)< td=""> 0 0/7 0 0/4 Tall stature (<p97)< td=""> 14 1/7 0 0/4 Abnormal head circumference 0 0/5 25 1/4 Microcephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p3)< td=""> 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Overweight (<p97)< td=""> 0 0/5 0 0/4 Other phenotypic features </p97)<></p3)<></p3)<></p3)<></p3)<></p3)<></p3)<></p97)<></p3)<></p3)<> | Abnormal head circumference at birth | 25 | 1/4 | 0 | 0/2 | | |
| Macrocephaly (>p97) 25 1/4 0 0/2 Abnomal height 14 1/7 0 0/4 Short stature (<p3)< td=""> 0 0/7 0 0/4 Tall stature (>p97) 14 1/7 0 0/4 Abnormal head circumference 0 0/5 25 1/4 Microcephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p97)< td=""> 0 0/5 0 0/4 Overweight (<p3)< td=""> 0 0/5 0 0/4 Other phenotypic features </p3)<></p97)<></p3)<></p3)<></p3)<></p3)<></p3)<> | Microcephaly (<p3)< td=""><td>0</td><td>0/4</td><td>0</td><td>0/2</td></p3)<> | 0 | 0/4 | 0 | 0/2 | | |
| Abnormal height 14 1/7 0 0/4 Short stature (<p3)< td=""> 0 0/7 0 0/4 Tall stature (<p3)< td=""> 14 1/7 0 0/4 Abnormal head circumference 0 0/5 25 1/4 Microcephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p3)< td=""> 0 0/5 0 0/4 Abnormal weight 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Overweight (<p3)< td=""> 0 0/5 25 1/4 Overweight (<p3)< td=""> 0 0/5 0 0/4 Detral/oral abnormalities 50 3/6 60 3/5 Drooling/dysphagia 29 2/7 20 1/5</p3)<></p3)<></p3)<></p3)<></p3)<></p3)<></p3)<></p3)<></p3)<></p3)<> | Macrocephaly (>p97) | 25 | 1/4 | 0 | 0/2 | | |
| Short stature (<p3)< th=""> 0 0/7 0 0/4 Tall stature (<p97)< td=""> 14 1/7 0 0/4 Abnormal head circumference 0 0/5 25 1/4 Microcephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p37)< td=""> 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Overweight (<p3)< td=""> 0 0/5 0 0/4 Other phenotypic features </p3)<></p3)<></p3)<></p37)<></p3)<></p3)<></p97)<></p3)<> | Abnormal height | 14 | 1/7 | 0 | 0/4 | | |
| Tall stature (>p97) 14 1/7 0 0/4 Abnormal head circumference 0 0/5 25 1/4 Microcephaly (<p3)< td=""> 0 0/5 25 1/4 Microcephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p3)< td=""> 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Overweight (<p3)< td=""> 0 0/5 0 0/4 Other phenotypic features </p3)<></p3)<></p3)<></p3)<></p3)<></p3)<> | Short stature (<p3)< td=""><td>0</td><td>0/7</td><td>0</td><td>0/4</td></p3)<> | 0 | 0/7 | 0 | 0/4 | | |
| Abnormal head circumference 0 0/5 25 1/4 Microcephaly (<p3)< td=""> 0 0/5 25 1/4 Macrocephaly (<p97)< td=""> 0 0/5 0 0/4 Abnormal weight 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Overweight (>p97) 0 0/5 0 0/4 Other phenotypic features </p3)<></p3)<></p97)<></p3)<> | Tall stature (>p97) | 14 | 1/7 | 0 | 0/4 | | |
| Microcephaly (<p3)< th=""> 0 0/5 25 1/4 Macrocephaly (>p97) 0 0/5 0 0/4 Abnormal weight 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Overweight (>p97) 0 0/5 0 0/4 Other phenotypic features </p3)<></p3)<></p3)<> | Abnormal head circumference | 0 | 0/5 | 25 | 1/4 | | |
| Macrocephaly (>p97) 0 0/5 0 0/4 Abnormal weight 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Overweight (>p97) 0 0/5 0 0/4 Other phenotypic features </p3)<> | Microcephaly (<p3)< td=""><td>0</td><td>0/5</td><td>25</td><td>1/4</td></p3)<> | 0 | 0/5 | 25 | 1/4 | | |
| Abnormal weight 0 0/5 25 1/4 Underweight (<p3)< td=""> 0 0/5 25 1/4 Overweight (>p97) 0 0/5 0 0/4 Other phenotypic features Facial dysmorphisms 67 4/6 60 3/5 Dental/oral abnormalities 50 3/6 60 3/5 Drooling/dysphagia 29 2/7 20 1/5 Hearing abnormalities 17 1/6 20 1/5 Vision abnormalities 67 4/6 80 4/5 Cardiac abnormalities 17 1/6 40 2/5 Skeleton/limb abnormalities 33 2/6 0 0/5 Hypermobility of joints 33 2/6 20 1/5 Urogenital abnormalities 0 0/6 0 0/5 Immunological abnormalities 0 0/6 0 0/5 Immunological abnormalities 0 0/6</p3)<> | Macrocephaly (>p97) | 0 | 0/5 | 0 | 0/4 | | |
| Underweight (<p3)< th=""> 0 0/5 25 1/4 Overweight (<p97)< td=""> 0 0/5 0 0/4 Other phenotypic features </p97)<></p3)<> | Abnormal weight | 0 | 0/5 | 25 | 1/4 | | |
| Overweight (>p97) 0 0/5 0 0/4 Other phenotypic features | Underweight (<p3)< td=""><td>0</td><td>0/5</td><td>25</td><td>1/4</td></p3)<> | 0 | 0/5 | 25 | 1/4 | | |
| Other phenotypic features Image: Constraint of the system Constraint of the system <th< td=""><td>Overweight (>p97)</td><td>0</td><td>0/5</td><td>0</td><td>0/4</td></th<> | Overweight (>p97) | 0 | 0/5 | 0 | 0/4 | | |
| Facial dysmorphisms 67 4/6 60 3/5 Dental/oral abnormalities 50 3/6 60 3/5 Drooling/dysphagia 29 2/7 20 1/5 Hearing abnormalities 17 1/6 20 1/5 Vision abnormalities 67 4/6 80 4/5 Cardiac abnormalities 17 1/6 40 2/5 Skeleton/limb abnormalities 33 2/6 0 0/5 Hypermobility of joints 33 2/6 20 1/5 Urogenital abnormalities 0 0/6 0 0/5 Endocrine/metabolic abnormalities 0 0/6 0 0/5 Immunological abnormalities 0 0/6 0 0/5 Immunological abnormalities 0 0/6 0 1/2 Skin/hair/nail abnormalities 0 0/6 0 0/5 | Other phenotypic features | | | | | | |
| Dental/oral abnormalities 50 3/6 60 3/5 Drooling/dysphagia 29 2/7 20 1/5 Hearing abnormalities 17 1/6 20 1/5 Vision abnormalities 67 4/6 80 4/5 Cardiac abnormalities 17 1/6 40 2/5 Skeleton/limb abnormalities 33 2/6 0 0/5 Hypermobility of joints 33 2/6 20 1/5 Urogenital abnormalities 0 0/6 0 0/5 Endocrine/metabolic abnormalities 0 0/6 0 0/5 Immunological abnormalities 17 1/6 50 1/2 Skin/hair/nail abnormalities 0 0/6 0 0/5 Immunological abnormalities 0 0/6 20 1/2 Neoplasms in medical history 0 0/6 0 0/5 | Facial dysmorphisms | 67 | 4/6 | 60 | 3/5 | | |
| Drooling/dysphagia 29 2/7 20 1/5 Hearing abnormalities 17 1/6 20 1/5 Vision abnormalities 67 4/6 80 4/5 Cardiac abnormalities 17 1/6 40 2/5 Skeleton/limb abnormalities 33 2/6 0 0/5 Hypermobility of joints 33 2/6 20 1/5 Urogenital abnormalities 0 0/6 0 0/5 Endocrine/metabolic abnormalities 0 0/6 0 0/5 Immunological abnormalities 17 1/6 50 1/2 Skin/hair/nail abnormalities 0 0/6 0 0/5 Immunological abnormalities 0 0/6 0 1/2 Skin/hair/nail abnormalities 0 0/6 20 1/5 | Dental/oral abnormalities | 50 | 3/6 | 60 | 3/5 | | |
| Hearing abnormalities 17 1/6 20 1/5 Vision abnormalities 67 4/6 80 4/5 Cardiac abnormalities 17 1/6 40 2/5 Skeleton/limb abnormalities 33 2/6 0 0/5 Hypermobility of joints 33 2/6 25 1/4 Gastrointestinal abnormalities 33 2/6 20 1/5 Urogenital abnormalities 0 0/6 0 0/5 Endocrine/metabolic abnormalities 0 0/6 0 0/5 Immunological abnormalities 17 1/6 50 1/2 Skin/hair/nail abnormalities 0 0/6 0 0/5 Neoplasms in medical history 0 0/6 0 0/5 | Drooling/dysphagia | 29 | 2/7 | 20 | 1/5 | | |
| Vision abnormalities 67 4/6 80 4/5 Cardiac abnormalities 17 1/6 40 2/5 Skeleton/limb abnormalities 33 2/6 0 0/5 Hypermobility of joints 33 2/6 25 1/4 Gastrointestinal abnormalities 33 2/6 20 1/5 Urogenital abnormalities 0 0/6 0 0/5 Endocrine/metabolic abnormalities 0 0/6 0 0/5 Immunological abnormalities 17 1/6 50 1/2 Skin/hair/nail abnormalities 0 0/6 0 0/5 Neoplasms in medical history 0 0/6 0 0/5 | Hearing abnormalities | 17 | 1/6 | 20 | 1/5 | | |
| Cardiac abnormalities 17 1/6 40 2/5 Skeleton/limb abnormalities 33 2/6 0 0/5 Hypermobility of joints 33 2/6 25 1/4 Gastrointestinal abnormalities 33 2/6 20 1/5 Urogenital abnormalities 0 0/6 0 0/5 Endocrine/metabolic abnormalities 0 0/6 0 0/5 Immunological abnormalities 17 1/6 50 1/2 Skin/hair/nail abnormalities 0 0/6 0 0/5 Neoplasms in medical history 0 0/6 0 0/5 | Vision abnormalities | 67 | 4/6 | 80 | 4/5 | | |
| Skeleton/limb abnormalities 33 2/6 0 0/5 Hypermobility of joints 33 2/6 25 1/4 Gastrointestinal abnormalities 33 2/6 20 1/5 Urogenital abnormalities 0 0/6 0 0/5 Endocrine/metabolic abnormalities 0 0/6 0 0/5 Immunological abnormalities 17 1/6 50 1/2 Skin/hair/nail abnormalities 0 0/6 0 0/5 Neoplasms in medical history 0 0/6 0 0/5 | Cardiac abnormalities | 17 | 1/6 | 40 | 2/5 | | |
| Hypermobility of joints 33 2/6 25 1/4 Gastrointestinal abnormalities 33 2/6 20 1/5 Urogenital abnormalities 0 0/6 0 0/5 Endocrine/metabolic abnormalities 0 0/6 0 0/5 Immunological abnormalities 17 1/6 50 1/2 Skin/hair/nail abnormalities 0 0/6 0 0/5 Neoplasms in medical history 0 0/6 0 0/5 | Skeleton/limb abnormalities | 33 | 2/6 | 0 | 0/5 | | |
| Gastrointestinal abnormalities332/6201/5Urogenital abnormalities00/600/5Endocrine/metabolic abnormalities00/600/5Immunological abnormalities171/6501/2Skin/hair/nail abnormalities00/6201/5Neoplasms in medical history00/600/5 | Hypermobility of joints | 33 | 2/6 | 25 | 1/4 | | |
| Urogenital abnormalities00/600/5Endocrine/metabolic abnormalities00/600/5Immunological abnormalities171/6501/2Skin/hair/nail abnormalities00/6201/5Neoplasms in medical history00/600/5 | Gastrointestinal abnormalities | 33 | 2/6 | 20 | 1/5 | | |
| Endocrine/metabolic abnormalities00/600/5Immunological abnormalities171/6501/2Skin/hair/nail abnormalities00/6201/5Neoplasms in medical history00/600/5 | Urogenital abnormalities | 0 | 0/6 | 0 | 0/5 | | |
| Immunological abnormalities171/6501/2Skin/hair/nail abnormalities00/6201/5Neoplasms in medical history00/600/5 | Endocrine/metabolic abnormalities | 0 | 0/6 | 0 | 0/5 | | |
| Skin/hair/nail abnormalities 0 0/6 20 1/5 Neoplasms in medical history 0 0/6 0 0/5 | Immunological abnormalities | 17 | 1/6 | 50 | 1/2 | | |
| Neoplasms in medical history 0 0/6 0 0/5 | Skin/hair/nail abnormalities | 0 | 0/6 | 20 | 1/5 | | |
| | Neoplasms in medical history | 0 | 0/6 | 0 | 0/5 | | |

Table S8. Primers for site-directed mutagenesis

| SATB1-K175R-F | GGAGGCAAGTCTTCTAGTCGGGGGGCAACTGTGTAACTG |
|--------------------|------------------------------------------------|
| SATB1-K175R-R | CAGTTACACAGTTGCCCCCGACTAGAAGACTTGCCTCC |
| SATB1-S366L-F | TCTGTGTTGGTCAAAACCTGTTGCTCCAAAGGCT |
| SATB1-S366L-R | AGCCTTTGGAGCAACAGGTTTTGACCAACACAGA |
| SATB1-E407G-F | CTTCCTTTCGGAGGATTCCTGAAAGCAAGCCCTGA |
| SATB1-E407G-R | TCAGGGCTTGCTTTCAGGAATCCTCCGAAAGGAAG |
| SATB1-R410* | GGGGTCCTCTTCCTTTCAGAGGATTTCTGAAAGCA |
| SATB1-R410* | TGCTTTCAGAAATCCTCTGAAAGGAAGAGGACCCC |
| SATB1-Q420R-F | GTTTACCAGCAAAGACCGGGATGCAGTCTTGGG |
| SATB1-Q420R-R | CCCAAGACTGCATCCCGGTCTTTGCTGGTAAAC |
| SATB1-E530K-F | TCCAGCGTAACAGCTTGCACAACCATCCCTG |
| SATB1-E530K-R | CAGGGATGGTTGTGCAAGCTGTTACGCTGGA |
| SATB1-E530Q-F | CCAGCGTAACAGCTGGCACAACCATCCCT |
| SATB1-E530Q-R | AGGGATGGTTGTGCCAGCTGTTACGCTGG |
| SATB1-E547K-F | GATCATGGAGAGGTTCTTCCACAGGGTTCTGTTTT |
| SATB1-E547K-R | AAAACAGAACCCTGTGGAAGAACCTCTCCATGATC |
| SATB1-V519L-F | GCTTTTGGTTGCTGCAAGCTTTGCAAACAGTGCTT |
| SATB1-V519L-R | AAGCACTGTTTGCAAAGCTTGCAGCAACCAAAAGC |
| SATB1-A573T-F | CATGGTGATGCACCGTGTTGCTCTCCTGTTC |
| SATB1-A573T-R | GAACAGGAGAGCAACACGGTGCATCACCATG |
| SATB1-P626Hfs*81-F | GTGGGTTGCCGTGGGGGGGGCCGAG |
| SATB1-P626Hfs*81-R | CTCGGCTCCCCCACGGCAACCCAC |
| SATB1-L682V-F | CTTGGGAAGGTCGACCTGGGCAGACAGAG |
| SATB1-L682V-R | CTCTGTCTGCCCAGGTCGACCTTCCCAAG |
| SATB1-Q694*-F | TACCGCTGGTTCTAAAAGAACTTGATGATGGTGTACTTG |
| SATB1-Q694*-R | CAAGTACACCATCATCAAGTTCTTTTAGAACCAGCGGTA |
| SATB1-N736I*8-F | AAAAAGGGTGTTAGTATTTTATCTTGGACACTCTCTTCCAAATCCT |
| SATB1-N736I*8-R | AGGATTTGGAAGAGAGTGTCCAAGATAAAATACTAACACCCTTTTT |
| SATB1-K744R-F | CACTGACAGCTCTTCTTCTAGTCGCACTGAAAAAAGGGTGTTAGTA |
| SATB1-K744R-R | TACTAACACCCTTTTTTCAGTGCGACTAGAAGAAGAGCTGTCAGTG |
| SATB2-E396Q-F | TACGCAGAATCTGAGACAACAATCCCTGTGTGCGG |
| SATB2-E396Q-R | CCGCACACAGGGATTGTTGTCTCAGATTCTGCGTA |

Table S9. Primers for amplifying and subcloning human UBC9 (NM_194260.2) and SATB1 (NM_001131010.4). Sequences of restriction sites are shown in bold, and sequences that were added to extend the linker region between UBC9 and SATB1 are underscored.

| UBC9- <i>BamHI</i> -F | GAGGGA GGATCC TGCTGTCGGGGATCGCCCTCAG |
|-----------------------|----------------------------------------------------------|
| UBC9-Xmal-R | TCTAGA CCCGGG<u>CAGCGCAAG</u>TGAGGGCGCAAACTTCTTGG |
| SATB1-HindIII-F | CGGTACAAGCTTTTGGCTGTACTGGATCATTTGAACGAGGC |
| SATB1-Xhol-R | CAGTTA CTCGAG TCAGTCTTTCAAATCAGTATTAATGTCTG |

 Table S10. Primers to amplify regions that include the SATB1 NMD-escaping truncating variants used for testing for NMD. The last exon primer set was used for SATB1 p.P626Hfs*81, p.Q694* and p.N736lfs*8.

| SATB1-NMD-R410*-F | CCTGGGCTCGTATCAACACC |
|-----------------------|-----------------------------|
| SATB1-NMD-R410*-R | CATCCCTGGCTTTTGGTTGC |
| SATB1-NMD-last_exon-F | GCCATTTATGAACAGGAGAGCA |
| SATB1-NMD-last exon-R | CAGTATTAATGTCTGTGTTTCCTTCCA |

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Supplemental Materials and Methods

Individuals and consent

For all individuals reported in this study, informed consent was obtained to publish unidentifiable data. When applicable, specific consent was obtained for publication of clinical photographs and inclusion of photographs in facial analysis. All consent procedures are in accordance with both the local ethical guidelines of the participating centers, and the Declaration of Helsinki. Individuals with possible (likely) pathogenic *SATB1* variants were identified through international collaborations facilitated by MatchMakerExchange¹, GPAP of RD-connect², the Solve-RD consortium, the Decipher Database³, and through searching literature for cohort-studies for NDD^{4; 5}. Clinical characterization was performed by reviewing the medical files and/or revising the phenotype of the individuals in the clinic. All (affected) individuals with a *SATB1* variant are included in Table S1. A summary of clinical characteristics is provided in Table 1, including 38 of 42 individuals: individual 16, 32 and 41 were excluded because no clinical data were available, individual 22 was excluded as she is (low) mosaic for the *SATB1* variant (~1%). In Figure 1G, 37 of 42 individuals were included: in addition to individuals 16, 22, 32, and 41, we also excluded individual 18, for whom only very limited clinical information was available.

Next generation sequencing

For all individuals except individual 1, 2, and 28, *SATB1* variants were identified by whole exome sequencing after variant filtering as previously described⁶⁻¹². Information on inheritance was obtained after parental confirmation, either from parental exome sequencing data or through targeted Sanger sequencing. For individual 1 the *SATB1* variant was identified by array-CGH and for individual 2 an Affymetrix Cytoscan HD array was performed in addition to whole exome sequencing. For individual 28 targeted Sanger sequencing was performed after identification of the variant in his similarly affected sister. To predict deleteriousness of variants, CADD-PHRED V1.4 scores and SpliceAI scores (VCFv4.2; dated 20191004) were obtained for all variants identified in affected individuals^{13; 14}. In addition, for all nonsense, frameshift and

splice site variants, NMDetective scores were obtained (v2)¹⁵. For all missense variants, we analyzed the mutation tolerance of the site of the affected residue using Metadome¹⁶.

UK10K controls for functional assays

Genome sequence data from 1,867 ALSPAC^{17; 18} individuals in the UK10K¹⁹ dataset were annotated in ANNOVAR²⁰ and filtered to identify individuals carrying rare coding variants (gnomAD genome_ALL frequency<0.1%) within *SATB1*. In total six rare variants were identified. These variants were carried by 13 individuals, all in a heterozygous state. Three variants (one in the CUT1 domain, one in the CUT2 domain and one outside of critical domains) were selected for functional studies. These variants were carried by nine individuals. Phenotypic data of carriers and non-carriers were available through the ALSPAC cohort, an epidemiological study of pregnant women who were resident in Avon, UK with expected dates of delivery 1st April 1991 to 31st December 1992. This dataset included 13,988 children who were alive at 1 year of age, 1,867 of whom underwent genome sequencing as part of the UK10K project. Of the UK10K individuals, 1,741 children had measures of IQ (WISC) collected at age 8 years providing an indication of cognitive development. The ALSPAC study website contains details of all the data that is available through a fully searchable data dictionary and variable search tool (http://www.bristol.ac.uk/alspac/researchers/our-data/)

Human Phenotype Ontology (HPO)-based phenotype clustering analysis

All clinical data were standardized using HPO terminology²¹. Thirty-eight of 42 individuals were included in analysis: individual 16, 32 and 41 were excluded because no clinical data were available, individual 22 was excluded as she is (low) mosaic for the SATB1 variant (~1%). The semantic similarity between all the HPO terms used in this cohort (356 features) was calculated using the Wang algorithm in the HPOSim package^{22; 23} in R. HPO terms with at least a 0.5 similarity score were grouped (Figure S5): a new feature was created as a replacement, which was the sum of the grouped features. For eleven terms, the HPO semantic similarity could not be calculated using HPOSim. Seven of those could be manually assigned to a group, since the feature clearly matched (for instance: nocturnal seizures with the seizure/epilepsy group). For a full list of the grouped features, see Table S7. HPO terms that could not be grouped were added as separate features, as was severity of intellectual disability. This led to 100 features for every individual, instead of the previous 356 separate HPO terms. To quantify the possible genotype/phenotype correlation in the cohort, we used Partitioning Around Medoids (PAM) clustering²⁴ dividing our cohort into two groups (missense variants versus truncating variants), followed by a permutations test (n=100,000) and relabeling based on variant types, while keeping the original distribution of variant types into account. The same clustering and permutations test was performed when dividing our cohort into three groups. For both analyses, Bonferroni correction for multiple testing was applied and a p-value smaller than 0.025 was considered significant.

Average face analysis

For 24 of 42 individuals facial 2D-photographs were available for facial analysis. As previously described, average faces were generated while allowing for asymmetry preservation and equal representation by individuals²⁵.

Three-dimensional protein modeling

The crystal structure of the CUT1 domain of SATB1 bound to Matrix Attachment Region DNA (PDB entry 204A²⁶) was used to contextualize the SATB1 CUT1 variants with respect to DNA using Swiss-PdbViewer²⁷. The solution structure of the CUT2 domain of human SATB2 (first NMR model of the PDB entry 2CSF²⁸) was used as a template to align the SATB1 residues T491 to H577 (Uniprot entry Q01826), and to build a model using Swiss-PdbViewer²⁷. The model of the CUT2 domain was superposed onto the SATB1 CUT1 domain bound to Matrix Attachment Region DNA (PDB entry 2O4A²⁶ using the "magic fit" option of Swiss-PdbViewer²⁷) to contextualize the SATB1 CUT2 variants with respect to DNA. The solution structure of the homeodomain of human SATB2 (second NMR model of the PDB entry 1WI3²⁹ was used as a

template to align SATB1 residues P647 to G704 (Uniprot entry Q01826), and to build a model using Swiss-PdbViewer²⁷. Chains A, C and D of the crystal structure of HNF-6alpha DNAbinding domain in complex with the TTR promoter (PDB entry 2D5V), which has a DNA binding domain similar to the CUT2 domain of SATB1 and a second DNA binding domain similar to the homeobox of SATB1, was used as a template to superpose the model of the SATB2 homeobox domain onto the HNF-6alpha structure using the "magic fit" option of Swiss-PdbViewer³⁰ to contextualize the SATB1 homeobox variant with respect to DNA.

Spatial clustering analysis of missense variants

Twenty-four of the observed 30 missense variants were included in the spatial clustering analysis. We excluded 6 variants, to correct for familial occurrence. The geometric mean was computed over the locations of observed (*de novo*) missense variants in the cDNA of *SATB1* (NM_001131010.4). This geometric mean was then compared to 1,000,000 permutations, by redistributing the (*de novo*) variant locations over the total size of the coding region of *SATB1* (2,388 bp) and calculating the resulting geometric mean from each of these permutations. The *p*-value was then computed by checking how often the observed geometric mean distance was smaller than the permutated geometric mean distance. This approach was previously used to identify cDNA clusters of variants^{7; 31}.

DNA expression constructs and site-directed mutagenesis

The cloning of SATB1 (NM_001131010.4), SATB2 (NM_001172509) and SUMO1 (NM_003352.4), has been described previously^{32; 33}. Variants in SATB1 and SATB2 were generated using the QuikChange Lightning Site-Directed Mutagenesis Kit (Agilent). The primers used for site-directed mutagenesis are listed in Table S8. cDNAs were subcloned using *BamHI/XbaI* (SATB1 and SUMO1) and *BcII/XbaI* (SATB2) restriction sites into pRluc and pYFP, created by modification of the pEGFP-C2 vector (Clontech) as described before³⁴. To generate a UBC9-SATB1 fusion, the UBC9 (NM_194260.2) and SATB1 coding sequences were amplified using primers listed in Table S9, and subcloned into the pHisV5 vector (a modified pEGFP-C2 vector adding an N-terminal His- and V5-tag) using *BamHI/SmaI* (UBC9) and *HindIII/XhoI* (SATB1) restriction sites. All constructs were verified by Sanger sequencing.

Cell culture

HEK293T/17 cells (CRL-11268, ATCC) were cultured in DMEM supplemented with 10% fetal bovine serum and 1x penicillin-streptomycin (all Invitrogen) at 37°C with 5% CO₂. Transfections for functional assays were performed using GeneJuice (Millipore) following the manufacturer's protocol. Lympoblastoid cell lines (LCLs) were established by Epstein-Barr virus transformation of peripheral lymphocytes from blood samples collected in heparin tubes, and maintained in RPMI medium (Sigma) supplemented with 15% fetal bovine serum and 5% HEPES (both Invitrogen).

Testing for nonsense mediated decay of truncating variants

Patient-derived LCLs were grown for 4 h with 100 μ g/ml cycloheximide (Sigma) to block NMD. After treatment, cell pellets (10*10⁶ cells) were collected and RNA was extracted using the RNeasy Mini Kit (Qiagen). RT-PCR was performed using SuperScriptIII Reverse Transcriptase (ThermoFisher) with random primers, and regions of interest were amplified from cDNA using primers listed in Table S10.

Fluorescence microscopy

HEK293T/17 cells were grown on coverslips coated with poly-D-lysine (Sigma). Cells were fixed with 4% paraformaldehyde (PFA, Electron Microscopy Sciences) 48 h after transfection with YFP-tagged SATB1 and SATB2 variants. Nuclei were stained with Hoechst 33342 (Invitrogen). Fluorescence images were acquired with a Zeiss LSM880 confocal microscope and ZEN Image Software (Zeiss). For images of single nuclei, the Airyscan unit (Zeiss) was used with a 4.5 zoom factor. All other images were acquired with a 2.0 zoom factor. Intensity profiles were plotted using the 'Plot Profile' tool in Fiji - ImageJ.

FRAP assays

HEK293T/17 cells were transfected in clear-bottomed black 96-well plates with YFP-tagged SATB1 and SATB2 variants. After 48 h, medium was replaced with phenol red-free DMEM supplemented with 10% fetal bovine serum (both Invitrogen), and cells were moved to a temperature-controlled incubation chamber at 37°C. Fluorescent recordings were acquired using a Zeiss LSM880 and Zen Black Image Software, with an alpha Plan-Apochromat 100x/1.46 Oil DIC M27 objective (Zeiss). FRAP experiments were performed by photobleaching an area of 0.98 μm x 0.98 μm within a single nucleus with 488-nm light at 100% laser power for 15 iterations with a pixel dwell time of 32.97 μs, followed by collection of times series of 150 images with a 2.5 zoom factor and an optical section thickness of 1.4 μm (2.0 Airy units). Individual recovery curves were background subtracted and normalized to the pre-bleach values, and mean recovery curves were calculated using EasyFRAP software³⁵. Curve fitting was done with the FrapBot application using direct normalization and a single-component exponential model, to calculate the half-time and maximum recovery³⁶.

Luciferase reporter assays

Luciferase reporter assays were performed with a pIL2-luc reporter construct containing the human *IL2*-promoter region, and a pGL3-basic firefly luciferase reporter plasmid carrying seven repeats of the -TCTTTAATTTCTAATATATTTAGAAttc- MAR sequence identified in an enhancer region 3' of the immunoglobulin heavy chain (IgH) genes (gift from Dr. Kathleen McGuire and Dr. Sanjeev Galande), as described previously³⁷⁻³⁹. HEK293T/17 cells were transfected with firefly luciferase reporter constructs and a Renilla luciferase (Rluc) normalization control (pGL4.74; Promega) in a ratio of 50:1, and with pYFP-SATB1 (WT or variant) or empty control vector (pYFP). After 48 h, firefly luciferase and Rluc activity was measured using the Dual-Luciferase Reporter Assay system (Promega) at the Infinite M Plex Microplate reader (Tecan).

BRET saturation assays

BRET assays were performed as previously described³⁴. HEK293T/17 cells were transfected in white clear-bottomed 96-well plates with increasing molar ratios of YFP-fusion proteins and constant amounts of Rluc-fusion proteins (donor/acceptor ratios of 1/0.5, 1/1, 1/2, 1/3, 1/6, 1/9). YFP and Rluc fused to a C-terminal nuclear localization signal were used as control proteins. After 48 h, medium was replaced with phenol red-free DMEM, supplemented with 10% fetal bovine serum (both Invitrogen), containing 60 µM EnduRen Live Cell Substrate (Promega). After incubation for 4 h at 37°C, measurements were taken in live cells with an Infinite M200PRO Microplate reader (Tecan) using the Blue1 and Green1 filters. Corrected the BRET ratios were calculated with following formula: [Green1(experimental condition)/Blue1(experimental condition)] - [Green1(control condition)/Blue1(control condition)], with only the Rluc control protein expressed in the control condition. YFP fluorescence was measured separately (Ex: 505 nm, Em: 545 nm) to quantify expression of the YFP-fusion proteins. Curve fitting was done with a non-linear regression equation assuming a single binding site using GraphPad Prism Software, after plotting the corrected BRET ratios against the ratio of total luminescence / total YFP fluorescence.

Immunoblotting and gel-shift assays

Whole-cell lysates were collected by treatment with lysis buffer 48 h post-transfection. For immunoblotting, cells were lysed in 1x RIPA buffer (Cell Signalling) with 1% PMSF and protease inhibitor cocktail (Roche). For gel-shift assays⁴⁰, cells were lysed in 1x RIPA buffer with 1% PMSF, protease inhibitor cocktail and 50 µM ubiquitin/ubiquitin-like isopeptidases inhibitor PR-619 (Sigma). Samples were incubated for 20 min at 4°C followed by centrifugation for 30 min at 12,000 rpm at 4°C. Proteins were resolved on 4–15% Mini-PROTEAN TGX Precast Gels (Bio-Rad) and transferred onto polyvinylidene fluoride membranes using a TransBlot Turbo Blotting system (Bio-Rad). Membranes were blocked in 5% milk for 1 h at room temperature and then probed with mouse-anti-EGFP (for pYFP constructs; 1:8000;

Clontech, 632380) or mouse-anti-V5 tag (1:2000; Genetex, GTX42525). Next, membranes were incubated with HRP-conjugated goat-anti-mouse IgG (1:2000; Bio-Rad) for 1 h at room temperature. Bands were visualized with Novex ECL Chemiluminescent Substrate Reagent (Invitrogen) using a ChemiDoc XRS + System (Bio-Rad). Equal protein loading was confirmed by probing with mouse-anti- β -actin antibody (1:10,000; Sigma, A5441).

Fluorescence-based quantification of protein stability

Cells were transfected in triplicate in clear-bottomed black 96-well plates with YFP-tagged SATB1 variants. After 24 h, MG132 (R&D Systems) was added at a final concentration of 10 μ M, and cycloheximide (Sigma) at 50 μ g/ml. Cells were incubated at 37°C with 5% CO₂ in the Infinite M200PRO microplate reader (Tecan), and the fluorescence intensity of YFP (Ex: 505 nm, Em: 545 nm) was measured over 24 h at 3 h intervals.

Statistical analyses of cell-based functional assays

Statistical analyses for cell-based functional assays were done using a one- or two-way ANOVA followed by a Bonferroni *post-hoc* test, with GraphPad Prism Software. Statistical analyses for FRAP and BRET data were performed on values derived from fitted curves of individual recordings or independent experiments respectively.

Data and Code Availability

Code used in the spatial clustering analysis is available at:

<u>https://github.com/laurensvdwiel/SpatialClustering</u>. Codes of HPO-based clustering analysis and computational facial averaging are available on request. All available phenotypic data in HPO is shared as a supplementary file (SATB1_supplementaryJSON.json).

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3D protein modeling

Method for modeling CUTL variants

PDB entry 4Q2J¹ was used to contextualize the p.P181L variant. PDB entry 2O49² was superposed onto PDB entry 4Q2J using Swiss-PdbViewer³ to highlight the relative orientation of DNA with respect to the SATB1 CUTL domain.

Method for modeling CUT1 variants

The crystal structure of the N-terminal CUT Domain of SATB1 Bound to Matrix Attachment Region DNA (PDB entry 2O4A²), and the ONECUT homeodomain of transcription factor HNF-6⁴ were used to contextualize the various mutations with respect to DNA, using Swiss-PdbViewer³.

Method for modeling CUT2 variants

The first NMR model of the PDB entry 2CSF [DOI:10.2210/pdb2CSF/pdb] was used as a template to align residues T491 to H577 of the SATB1 human protein (uniprot entry Q01826), and build a model using Swiss-PdbViewer³. The resulting model has been superposed onto the CUT1 domain of pdb entry 2O4A² using the "magic fit" option of Swiss-PdbViewer to highlight the position of the variants with respect to DNA.

Method for modeling homeobox domain variants

The Solution structure of the homeodomain of human SATB2 (second NMR model of the PDB entry 1WI3 [DOI:10.2210/pdb1wi3/pdb]) was used as a template to align residues P647 to G704 of the SATB1 human protein (uniprot entry Q01826), and build a model using Swiss-PdbViewer³. Chains A, C and D of the crystal structure of HNF-6alpha DNA-binding domain in complex with the TTR promoter (PDB entry 2D5V⁴), which has a DNA binding domain similar to the CUT2 domain of SATB1 and a second DNA binding domain similar to the homeobox of SATB1, was used as a template to superpose the model of the SATB1 homeobox domain onto the HNF-6alpha structure using the "magic fit" option of Swiss-PdbViewer.

Modeling

p.P181L



Figure 1. Highlight of the P181 position (green spacefill) with respect to the ubiquitin-like domain (ULD; grey) and the CUT repeat-like (CUTL) domain (dim green). The position of the C173-P174 cis peptide bond is highlighted in yellow. K175 and S185 which can be respectively acetylated and phosphorylated are shown in pink spacefill (top and bottom, respectively).



Figure 2. P181L sidechain (green spacefill) clashes into an alpha-helix (A230-K241) of the CUTL domain (dim green), in particular the backbone of residues G237 and R238, as well as in the sidechain of the latter.

The variant P181L variant sits in a linker region between the ubiquitin-like domain (ULD; grey) and a CUT repeat-like (CUTL) domain (dim green). P181 is preceded by another proline, which confers some rigidity and restricts the range of possible relative orientation of the CUTL domain with respect to the UBL domain. There is a third proline in the linker (Pro174), which is preceded by Cys173 and makes a cis peptide bond (highlighted in yellow in Figure 1). Cis-peptide bonds are quite rare (about 0.3% of peptide bonds, although they occur in about 6% of residues followed

by a Proline⁵, which shows the importance of the conformation of the linker region. Furthermore, Lys175 and Ser185 (in pink) can be respectively acetylated and phosphorylated and influence the DNA binding capability of SATB1¹. Sidechains of Glu 182 (from the linker bottom left) and Arg 238 (from the CUTL domain bottom right), positioned just below Pro181 further lock the linker region and the CUTL domain through electrostatic interaction. The relative orientation of these domains cannot be maintained with the P181L mutation, because a leucine sidechain at this position would severely clash into the CUTL domain (backbone of residues Gly237 and Arg238), forcing the linker to adopt a different conformation (Figure 2), which may also potentially affect the ability of K175 to be acetylated.

p.Q402R



Figure 3. Closeup of the Q402 – DNA interaction (pdb structure 204A) highlighting the native residue (Gln, left panel) which makes nice hydrogen bonds to the base (green dotted lines), whereas the longer Arg sidechain (right panel) might collide into the DNA (purple dotted lines) and be forced to adopt a conformation less favorable with respect to binding its cognate DNA.

Q402 is located in the CUT1 domain alpha-helix that binds the major groove of the DNA and is the equivalent of CUT2 domain Q525. Since its sidechain makes direct contact with a nucleotide, a mutation to an arginine, which has a longer sidechain, would need to adopt a conformation less favorable to DNA binding to avoid colliding into the DNA, hence affecting the DNA binding affinity at the cognate sites (Figure 3).





Figure 4. Closeup of the E407 - DNA binding interaction (pdb structure 2O4A) highlighting the native residue (Glu, spacefilled, left panel), which locks in place the sidechain of Arg410 through hydrogen bonds (green dotted lines) and the hole left by the mutation (Gly, spacefilled right panel).

E407 is located in the middle of the CUT1 domain alpha-helix that binds the major groove of the DNA and is the equivalent of CUT2 domain E530. Since its sidechain help maintain the sidechain of Arg410 in place via hydrogen bonds and that both residue make direct contact with the nucleotides, a mutation to a glycine, which bears no sidechain and is not favored in alpha-helices will likely disrupt the local conformation and alter the DNA binding affinity at the cognate sites (Figure 4).

p.E413K



Figure 5. Closeup of E413, solvent exposed in a loop, along Lys411 (left panel). E413 does not make direct DNA contact, and there is enough space to accommodate the E413K mutation (right panel).

E413 is located in a loop right after the end of the CUT1 domain alpha-helix that binds the major groove of the DNA. Although it does not directly bind to DNA, it is in relatively close proximity (within 10 angstroms) to the negatively charged DNA backbone, and in an extended conformation along Lys411. The mutation E413K would replace a negatively charged residue by a positively charged one and may potentially affect the DNA binding affinity of the CUT1 domain through long range electrostatic interactions (Figure 5).

p.Q420R



Figure 6. Highlight of the Q420R mutation after superposition of the SATB1 CUT1 domain (pdb entry 204A) onto the HNF6alpha DNA binding domain bound to DNA (pdb entry 2D5V) showing its close proximity to DNA backbone. Top: HNFa, middle: SATB1 WT, bottom: SATB1 mutant.

Q420 is located at the surface of the CUT1 domain, not in direct contact with DNA. An arginine at this position could easily be accommodated, but since it is bulkier and positively charged, it may affect the binding of CUT1 to other domains. Of note, the superposition of the CUT1 domain onto the DNA binding domain of rat HNF6 alpha bound to the TTR promoter (pdb entry 2D5V, chain A) reveals that Q420R would be roughly in the same position as HNF6alpha K53, which points in the minor groove of the DNA and makes indirect contact to the DNA backbone via structural water molecules (Figure 6). This mutation may likely affect the overall affinity of the structural complex.



Figure 7. Closeup of the Q525 – DNA interaction highlighting the native residue (GIn, left panel) which could make hydrogen bonds to the base (green dotted lines), whereas the longer Arg sidechain (right panel) might collide into the DNA (purple dotted lines) and be forced to adopt a conformation less favorable with respect to binding its cognate DNA.

Q525 is located in the CUT2 domain alpha-helix that binds the major groove of the DNA, and is the equivalent of CUT1 domain Q402. Since its sidechain makes direct contact with a nucleotide, a mutation to an arginine, which has a longer sidechain, would need to adopt a conformation less favorable to DNA binding to avoid colliding into the DNA, hence affecting the DNA binding affinity at the cognate sites (Figure 7).



Figure 8. Closeup of the E530 - DNA binding interaction (pdb structure 2O4A) highlighting the native residue (Glu, spacefilled, left panel), which locks in place the sidechain of Arg533 through hydrogen bonds (green dotted lines) and the hole left by the mutation (Gly, spacefilled right panel).

E530 is located in the middle of the CUT2 domain alpha-helix that binds the major groove of the DNA and is the equivalent of CUT1 domain E407. Since its sidechain help maintain the sidechain of Arg533 in place via hydrogen bonds and that both residues make direct contact with the nucleotides, a mutation to a glycine, which bears no sidechain and is not favored in alpha-helices will likely disrupt the local conformation and alter the DNA binding affinity at the cognate sites (Figure 8).

p.E530K

Figure 9. Closeup of the E530 – a conformation that could be adopted by a lysine at this position.

E530 is located in the middle of the CUT2 domain alpha-helix that binds the major groove of the DNA and is the equivalent of CUT1 domain E407. Since its sidechain help maintain the sidechain of Arg533 in place via hydrogen bonds and that both residues make direct contact with the nucleotides. A mutation to a Lysine, which is very flexible and can be accommodated from a steric point of view will likely induce a

rearrangement of these two positively charged sidechains, both in close proximity to DNA bases, and result in a change of affinity at the cognate sites (Figure 9).

Figure 10. Closeup of the E530 – a conformation that could be adopted by a glutamine at this position.

E530 is located in the middle of the CUT2 domain alpha-helix that binds the major groove of the DNA and is the equivalent of CUT1 domain E407. Since its sidechain help maintain the sidechain of Arg533 in place via hydrogen bonds and that both residues make direct contact with the nucleotides. A mutation to a Glutamine can probably be accommodated from a steric point of view but will induce a rearrangement of these two residues, both in close proximity to DNA bases, and probably result in a change of affinity at the cognate sites (Figure 10).

Figure 11. Highlight of the E547K mutation after superposition of the SATB1 CUT2 domain model onto the HNF6alpha DNA binding domain bound to DNA (pdb entry 2D5V) showing its close proximity to DNA backbone. Top: HNFa, middle: SATB1 WT, bottom: SATB1 mutant.

E547 is located at the surface of the CUT2 domain, not in direct contact with DNA. A lysine at this position could easily be accommodated, but since it substitutes a negative charge with a positive one, it may affect the binding of CUT2 to other domains. Of note, the superposition of the CUT2 domain onto the DNA binding domain of rat HNF6 alpha bound to the TTR promoter (pdb entry 2D5V, chain A⁴)

reveals that E547K would be roughly in the same position as HNF6alpha E57, which is solvent exposed. Interestingly, it is also in a position close to the CUT1 domain variant Q420R, just one turn of alpha-helix away. This mutation will likely affect the overall binding affinity of other domains to the CUT2 domain.

Figure 12. Closeup of the L682V mutation. Left: L682 sidechain (white) is tightly packed with A655 (pink) and L684 (strawberry). Right: V682 sidechain slightly bumps into A655 and L684.

L682 is not proximal to DNA. It is located at the end of the alpha-helix E672-L682, just before a loop, neither of which are either in contact with the DNA. It is buried and probably contributes to maintain the homeobox domain fold. The valine mutant will have a less optimal packing of this region, and its branched sidechain is predicted to moderately clash with Ala 655 and Leu 684 sidechains and is expected to induce a small conformational change in this region. This in turn might subtly affect the binding affinity of other protein domains of the whole complex.

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