

Supplementary Fig. 1 | sA β 42s are selectively toxic to human neurons. (A) sA β 42s were generated by resuspending lyophilized Aβ42 monomers in PBS and incubating monomers at 4C for 14, 24, 48, 72 hours then frozen. (B-D) Several lots of $A\beta$ 42 monomers oligomerized for 14, 24, 48, and 72 hours were assessed for dendrite toxicity (MAP2) (B), synapse loss (Synapsin 1/2) (C), and p-Tau induction (S396/S404) (D). (E-G) Several lots of $sA\beta42s$ oligomerized for 24 hours were characterized for oligomeric and fibril conformation using Aβ oligomer selective and Aβ fibril selective ELISA assays. 6E10-6E10 assay utilizing the same anti-Aβ42 (6E10) for capture and detection to selectively bind to oligomeric Aβ42 species (**E**), GT622-6E10 oligomer assay uses Aβ oligomer specificity antibody clone GT622 as capture and pan Aβ antibody clone (6E10) as detection (F), OC-6E10 assay uses Aβ fibril selective antibody clone OC as capture and pan A β antibody clone (6E10) as detection. All values were normalized to $\text{A} \beta$ monomer negative control, and $\text{A} \beta$ 42 fibrils were generated by oligomerization in 37 \degree C as a positive control to demonstrate the specificity of this assay. (H-J) Several lots of $A\beta42$ monomers and scramble control were tested at 0, 2.5, 5 μM for doseresponse toxicity in dendrites (MAP2) (H), synapse loss (Synapsin 1/2) (I), and p-Tau induction (S396/S404) (J). (K) Rat cortical neurons treated with 5μM sA β 42s for 7 days form many plaque-like, Methoxy-X04 positive structures (blue). A few of these plaque-like structures are surrounded by dystrophic neurite-like blebbings of NFL-H (green), and phospho-Tau (AT270, red). Neuritic plaques are indicated by dotted white boxes. (L-M) Zoomed in images of B showing axonal swelling (NFL-H; green) and p-Tau induction (S235; red) in axons around Aβplaque structures (Methoxy-X04; blue). Concurrently, (N-O) rat neurons fail to show Aβ42 oligomer toxicity in response to many lots of Aβ42 oligomer preparations in comparison to human neurons in terms of the dendrite (MAP2) loss (N) and severe synapse loss (Synapsin 1/2) (O). Data are presented as mean values $+/-$ SEM and $n=4$ wells. (B-D, H-J, N-O). Scale bars = $100 \mu m$ (K), $20 \mu m$ (L, M).

Supplementary Fig. 2 | Additional characterization of Tau pathologies. (A-D) $\text{SA}\beta42\text{s}$ treatment at 5 μM induces somatodendritic accumulation of Tau (overlap with MAP2, third panel) and phosphorylation at S202/T205 and as detected by AT8 antibody (green). (E-H) Staining of Tau phosphorylation site S217, (I-L) S235, (M-P) S400/T403/S404, and (Q-T) T181 (AT270) (U-Y) Quantification of induction of phosphorylated Tau increases in dose-response to sAβ42s treatment concentration; induction fold calculated by the ratio of p-Tau area to total Tau (HT7) area in $\rm{A}\beta_{\rm{treated}}$ induction over the ratio of p-Tau area to total Tau (HT7) in the untreated control. Data are presented as mean values $+/-$ SEM and $n=4$ wells. Scale bars 50 um. (Z) Western blot images showing soluble (right) and insoluble (left) fractions of protein lysates obtained from iPSC neurons and astrocytes treated with 0, 0.3, 0.6, or 1.25μM sAβ42s twice weekly for three weeks, then probed for 3R Tau protein, total Tau (HT7) and loading control histone H3. Upon treatment with soluble Aβ species, there is a dose-dependent increase in the insoluble 3R and total Tau and depletion of these proteins from the soluble fraction. In high concentrations of soluble Aβ species, there are lower molecular weight truncated Tau proteins (red asterisks) and larger molecular weight Tau aggregates (black asterisks).

sA β**42s**

Supplementary Fig. 3 | NSC-NAG Line 2 has similar sAβ42s-induced phenotypes. (A) NAG-NSC Line 2 and primary astrocytes treated with 5 μM sAβ42s for 7 days and stained for Aβ-plaque structures (Methoxy-X04; blue), axons (NFL-H; green), and p-Tau (AT270; red). Right, the zoomed in image showing neuritic plaque. Scale bar = 50um. (B) NAG-NSC Line 2 and primary astrocytes treated with 5μM soluble Aβ species for 7 days show loss of dendrites (MAP2, blue) and loss of synapses (synapsin, green) compared to no treatment on right. Scale bar = 50um (C) NAG-NSC Line 2 and primary astrocytes treated repeatedly treated with 1.25 μM sAβ42s 3 times and stained with additional neuritic plaque markers APP (green), XO4 (Methoxy-X04; blue), and axons (NFL-H; green). Scale bar = 50um (D) Triple culture of NAG-NSC Line2, astrocytes, and iPSC microglia repeatedly treated with 1.25 μM sAβ42s for 3 times and stained with additional plaque markers ApoE (D, green), XO4 (Methoxy-X04; blue), and axons (NFL-H; green). Scale bar = 50um (E-G) Quantification of MAP2 and synapsin demonstrate dose-dependent and time-dependent loss of dendrites (MAP2) and synapses (synapsin), and both can be rescued with treatment with anti-Aβ antibody. Scale bar = 100 um. (H-K) NAG-NSC Line 2 and primary astrocytes treated with 5uM $sA\beta42s$ for 7 days show loss of dendrites (MAP2, blue), Tau fragmentation (HT7, red), as well as upregulation and mislocalization of phospho-Tau (pS396-404, green) from axons to cell bodies and dendrites (I). (J-K) Quantification of phospho-Tau p396-404) (J) and phospho-Tau p400-403-404 (K) fold induction to show that phospho-Tau is upregulated in a dose and time-dependent manner, and this can be blocked with the treatment of anti-Aβ antibody. Data are presented as mean values $+/-$ SEM and $n=4$ wells.

Supplementary Fig. 4 | s $\mathbf{A}\beta 42s$ upregulate GFAP expression and induce GFAP

fragmentation (A-C) Primary human astrocytes cultured alone in Neuron Maintenance Medium express astrocyte markers GFAP (green), Vimentin (red, A), ALDH1L1 (red, B), and EAAT1 (red, C). (D) Primary human astrocytes cocultured with neurons in Neuron Maintenance Medium develop elaborate processes and more mature morphology (GFAP, white). (E) Primary human astrocytes cultured alone in Neuron Maintenance Medium upregulated GFAP (right, white; left, green) starting at 3DIV upon treatment with 5μM sAβ42s, aggregate Aβ (6E10, blue), and form diffuse dye-positive structures (Methoxy-X04, red) that are morphologically different from dyepositive structures that microglia form. At 1DIV (top), we observe small aggregates of $A\beta$ around cell processes that grow and begin to result in some cell death, which worsens at 7DIV. Yellow arrows indicate astrocytes with increased GFAP expression. Red arrows indicate dead/dying cells. The white dotted box indicates the zoomed in regions on the right. (F) Quantification of average GFAP intensity/cell shows that at 3DIV astrocytes treated with soluble Aβ species upregulate GFAP, and this is blocked by treatment with anti-Aβ antibody. (G) Cell death quantified by fragmentation of the cell body using GFAP shows that primary human astrocytes treated with sA $β42s$ show marked cell death at 3DIV which worsens at 7DIV. (H-J) Primary human astrocytes cocultured with neurons treated with 5μM sAβ42s also demonstrate similar upregulation of GFAP (I) and cell fragmentation indicating cell death (J) in a dose- and time-dependent manner. Data are presented as mean values $+/-$ SEM and $n=4$ wells. Two-way ANOVA with Sidak's multiple comparisons test. Scale bar=100um.

Supplementary Fig. 5 | Human iPSC microglia express common microglial markers and have typical ramified morphology. (A-E) iPSC derived microglia were stained with antibodies against microglia markers: TREM2, TMEM119, CXCR1, P2RY12, PU.1 (green); MERTK, CD33, CD64, CD32 (red); IBA1 (blue). Scale bar = 50μm.

Supplementary Fig. 6 | Amyloid plaque-like structures generated by human iPSC microglia but not by HeLa cells. (A) Left, human iPSC-derived microglia (IBA1, red) receiving no treatment show no accumulation of Aβ (6E10, blue), no plaque-like structures (Methoxy-X04, green). Middle, human iPSC-derived microglia (IBA1, red) treated with 2.5μM sAβ42s (6E10, blue) show accumulation of discrete plaque-like structures (Methoxy-X04, green) that are surrounded by cells. Right, HeLa cells (Phalloidin, red) treated with 2.5μM sAβ42s (6E10, blue) showed low surface binding of Aβ but did not generate the same characteristic plaque-structures (Methoxy-X04, green) observed in human iPSC derived-microglia. All scale bars = 50μm.

Supplementary Fig. 7 | IC50 validation of focused screen hits. (A-G) Hits from the focused screen (Fig. 5) were tested in dose-response curve for markers MAP2 (blue), Synapsin (green), CUX1/2 (red), NF-H (purple). All error bars represent s.e.m. and n=4 wells. IC50 curves were fitted using Prism software.

Supplementary Fig. 8 | Human iPSC microglia exhibit dynamic activities during Aβ plaque formation. (A) Schematic showing sAβ42s that were made using 5% HiLyte-555 labeled Aβ42 monomers. (B) Representative images are taken from Incucyte Zoom software over a 7-day time-lapse showing the same field of view to track the microglial formation of one Aβ42 plaque (red) indicated by the white arrow in the indicated time frame. Scale bar = 50 μm. (C) Example of microglia movement around the plaques. After 2 days plaque formation has occurred within this 2-hour window, some microglial cells join plaque indicated by yellow arrows, and some cells that leave plaque indicated by green arrows. Scale bar = 50 μ m.

Supplementary Fig. 9 | Human primary macrophages generate internalized Aβ-plaque. (A) Human CD14-derived macrophages were treated with 5 μM sAβ42s, then fixed and stained after 30 minutes, 6 hours, 1 day, and 4 days. Macrophages (IBA1, red) continuously internalize Aβ (green; white - second row) over the course of 4 days and form intracellular X04-positive (blue; white - bottom row) aggregates. All scale bars = $50 \mu m$.

Supplementary Fig. 10 | Anti-Aβ antibody intervention window reduced by faster disease progression. (A-C) Repeated dosing schedule of 12-week old human iPSC neuron cultured with twice a week dosed 0.625 μM of sAβ42s. 0.625 μM Anti-Aβ antibodies (red) or anti-gD control antibodies (blue) were started at indicated time points for repeated dosing regimens. All cells were treated in the same plate and fixed at 21 days post-first dose. MAP2 area (A), synapsin count (B), and p-Tau induction fold (C) were quantified. (D-F) Same experimental set-up but with 1.25 μM of sAβ42s, 1.25 μM Anti-Aβ antibodies (red) or anti-gD control antibodies (blue). (G-I) Same experimental setup but with 2.5 μM of sAβ42s, 2.5 μM Anti-Aβ antibodies (red) or anti-gD control antibodies (blue). Data are presented as mean values +/- SEM and n=4 wells. Two-way ANOVA with Tukey's multiple comparisons test.

Supplementary Movie 1 | Human iPSC microglia exhibit dynamic activities during Aβ plaque formation. Live cell imaging movie (30 minutes/second) using 10X objective and Incucyte Zoom software over a 7-day timelapse shows human iPSC microglia (phase) exhibit dynamic activities and aggregate 5uM 5% HiLyte-555 labeled sAβ42s (red) into Aβ plaque-like structures.

Supplementary Movie 2 | Human CD14-derived macrophages continuously internalize Aβ and do not form extracellular plaques. Live cell imaging movie (30 minutes/second) using 10X objective and Incucyte Zoom software over a 7-day timelapse shows human CD14-derived macrophages (phase) show low motility when treated with 5uM 5% HiLyte-555 labeled sAβ42s (red) and continuously internalize Aβ

Supplementary Movie 3 | Human iPSC microglia exhibit dynamic activities during Aβ plaque formation. Live cell imaging movie (30 minutes/second) using 10X objective and Incucyte Zoom software over a 7-day timelapse with human iPSC microglia (phase) treated with 5uM sAβ42s labeled by HiLyte555 and pHrodo Green. Microglia (phase) continuously internalize Aβ (green) before plaque formation (red) in the center of a group of cultured microglia.

Supplementary Table 1. Description of small molecules used in the focused screen.

Supplementary Table 2. Double culture focused screen results

Supplementary Table 3. Triple culture focused screen results

