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SUPPLEMENTARY INFORMATION RELATED TO INTRODUCTION

ANKRD11 missense variants reported in literature

Individuals with *ANKRD11* missense variants reported in literature are listed in Table S1 [1-20].

SUPPLEMENTARY METHODS

Identification of ANKRD11 variants, clinical characterization and in silico predictions

Individuals with (likely) pathogenic ANKRD11 missense variants were identified through international collaborations facilitated by MatchMaker Exchange [21], the Decipher Database [22], the Solve-RD consortium and RD-connect [23]. Variants were identified by WES or Sanger sequencing as previously described [24, 25]. We annotated variants in the context of genome build GRCh37/Hg19, using transcript reference sequence NM_013275.6 and protein reference sequence NP_037407.4. Pathogenicity of variants was assessed by the following in silico tools: CADD-PHRED V1.6 [26], PhyloP 2015 [27], GERP 2013 [28], Align GVGD v2007 [29], SIFT v6.2.0 [30], MutationTaster v2013 [31], Grantham [32], Metadome [33] and SpliceAI [34]. ANKRD11 domain information is provided in Table S5B [13, 35-39]. The presence of degron motifs was analysed with ProViz and presented in Table S6 [40]. Variants were classified according to ACMG/AMP guidelines [41]. Individuals were clinically characterized by reviewing medical files, and/or revising the phenotypes in outpatient clinics. Phenotypic fit to the KBG-associated clinical spectrum was assessed by two medical geneticists with expertise in KBG syndrome, based on diagnostic criteria [42] and frequently described features in four large cohorts [42-45]. We obtained informed consent to publish unidentifiable data for all individuals reported in this study. Specific consent was obtained for publication of clinical photographs. Consent procedures were in accordance with the Declaration of Helsinki and local ethical guidelines of participating centres.

Human Phenotype Ontology (HPO)-based phenotype clustering analysis

To quantify potential differences between phenotypic features of individuals with ANKRD11 missense variants and individuals with ANKRD11 PTVs or microdeletions, HPO-based clustering analysis was performed as previously described [46]. Clinical data of 29 individuals carrying ANKRD11 missense variants, and of 35 individuals with KBG syndrome caused by *ANKRD11* PTVs or 16q24 microdeletions affecting *ANKRD11* only (Table S2 [1, 12, 42, 43], Supplementary JSON) obtained from the Radboudumc expert centre for rare neurodevelopmental disorders via Biobank Genetics and Rare Disease were standardized using HPO terminology (release 2018-12-21) [47] in PhenoTips

(https://github.com/phenotips/phenotips, version 1.4.1) [48]. To avoid interobserver bias, all standardization of clinical data to HPO terminology was performed by the same clinician. In brief, semantic similarity between all HPO terms was calculated with the Wang algorithm in the HPOSim R-package [49, 50]. Terms were grouped and replaced by an overarching new feature when having a similarity score ≥0.5 (Table S3). To quantify a potential difference between cases with missense variants and cases with PTVs/microdeletions, we used Partitioning Around Medoids (PAM) clustering [51]. This analysis defines two clusters in the total available HPO-data. The algorithm is agnostic both to the size of the clusters as well as to the observed variant type of the individuals (correct labels), as the size of the clusters is not defined upfront, and the algorithm is not provided with the correct labels (PTV or missense). After the cluster analysis, the correct labels are used to establish for how many individuals the predicted cluster corresponds with the observed variant, generating a score. To determine the statistical significance of the score of the cluster analysis, a permutation test (100,000x) is performed, that randomly shuffles the correct labels and repeats the analysis. The score of the cluster analysis on the true cohort is then compared to the scores generated by the permutation test – enabling the calculation of a p-value.

All code is available online at https://github.com/ldingemans/HPO_clustering_Wang. Furthermore, the results of this clustering analysis, the permutation test and the calculation of the corresponding p-value are available in Table S3A-C.

Data of individuals obtained from the Radboudumc Biobank and Radboudumc KBG national referral centre

To compare the individuals with ANRKD11 missense variants observed in the cohort to KBG syndrome resulting from PTVs and 16q24.3 microdeletions, we used information on genotype and phenotype of 35 individuals diagnosed with KBG syndrome obtained from the Radboudumc Biobank Genetics and Rare Disease

(https://www.radboudumc.nl/en/research/radboud-technology-centers/radboud-biobank) and the Radboudumc KBG national referral centre.

The 35 individuals obtained from the Radboudumc Biobank are a representative subset of all individuals with KBG syndrome that are in clinical care of the Radboudumc KBG national referral centre (https://www.radboudumc.nl/en/centers-of-clinical-expertise/centers-of-clinical-expertise/centers-of-clinical-expertise/centers-of-clinical-expertise/centers-of-clinical-expertise-for-rare-diseases/rare-congenital-developmental-disorders), capturing the full phenotypic spectrum of KBG syndrome, including mild and subclinical presentations. This group of 35 individuals comprises all individuals with KBG syndrome caused by PTVs or 16q24.3 microdeletions that consented for further research studies using clinical and genetic data. Of the 35 individuals, 18 were male and 17 female, with an age range of 3 to 73 years. Genotypically, three individuals had a 16q24.3 microdeletion that only comprised (part of) *ANKRD11*, 24 individuals carried frameshift variants, and eight individuals had a nonsense variant. Of the 32 single nucleotide variants and indels, 31 located to the long exon 9, introducing a premature stop codon that is predicted to result in escape from the nonsense-mediated decay (NMD) pathway, whereas only one variant is predicted to trigger NMD [52,

53]. Variants were shown to be *de novo* in 23 individuals. For four individuals, the variant occurred in a familial context, and for the final eight, inheritance could not be established.

Spatial clustering analysis of missense variants

25 of the 29 observed missense variants were included in spatial clustering analysis, after removal of four variants because of familial occurrence. The geometric mean was computed over the locations of observed missense variants in the cDNA of *ANKRD11* (7,992 bp) and subsequently compared to each of the geometric means of 1,000,000 permutations of randomly redistributing the variant locations over the total coding sequence of *ANKRD11*. A *p*-value was obtained by calculating how often the observed geometric distance was smaller than the permutated geometric mean distance [54, 55] and considered significant if <0.05.

Immunoblotting

Whole-cell lysates were prepared as described previously [56]. Total protein was quantified using the Pierce BCA protein assay kit (Thermo Fisher). Proteins were resolved on 4–15% Tris-Glycine gels and transferred to PDVF membranes (Bio-Rad). After blotting, membranes were incubated overnight at 4°C with the appropriate primary antibodies. Membrane were then incubated with HRP-conjugated secondary antibodies. Proteins were visualized using the Novex ECL Chemiluminescent Substrate Reagent kit (Invitrogen) or SuperSignal West Femto Maximum Sensitivity Substrate (Thermo Fisher) and the ChemiDoc XRS+ System (Bio-Rad). A list of antibodies used can be found in Table S4.

SUPPLEMENTARY RESULTS

ANKRD11 missense variants cause syndromic neurodevelopmental phenotypes

In addition to the most frequently observed phenotypic features described in the manuscript, individuals presented with a variety of additional features (summarized in Table 1 with details provided in Table S2). We observed seizures in six cases (6/27, 22.2%), ranging in severity from absence seizures to refractory complex focal seizures. Additional neurological features were predominantly mild, with sleep disturbances (8/26, 30.8%) and hypotonia (10/24, 41.7%) most frequently reported. Commonly observed behavioral problems included ADHD or hyperactivity (18/26, 69.2%), ASD (9/25, 36%) and anxiety (9/24, 37.5%), together with a spectrum of additional behavioral symptoms. Although most individuals were born at term (23/24, 95.8%), both pre- and perinatal complications were prevalent (11/24, 45.8% and 15/26, 57.7% respectively), including maternal pregnancy-related illness, a variety of ultrasound abnormalities, complicated delivery and asphyxia. Short stature was seen in over half of the cohort (15/28, 53.6%), explained by growth hormone deficiency in only two individuals, and seven cases presented with abnormal head circumference (macrocephaly 1/27, 3.7%; microcephaly 6/27, 22.2%). Congenital heart defects occurred in 32% of individuals (8/25), mostly consisting of atrial and/or ventricular septal defects and cardiac valve abnormalities. Cryptorchidism was observed in 20% of male individuals (3/15), and other urogenital abnormalities included duplication of the kidney or renal collecting system and hypospadias. The most prominent problems of the gastrointestinal tract were feeding difficulties (9/27, 33.3%), constipation (6/27, 22.2%) and gastroesophageal reflux disease (3/27, 11.1%). Over half of all individuals showed delayed bone maturation (8/14, 57.1%), but other abnormalities of the skeletal system were not frequently reported. Abnormalities of vision occurred in 50% (13/26) of individuals, comprising hypermetropia, myopia, astigmatism and strabismus. Hearing loss, resulting from recurrent or chronic otitis media, stapes ankylosis or ear atelectasis, was also prevalent (11/28, 39.3%). Only two individuals had a cleft palate, and two individuals were affected by velopharyngeal insufficiency.

Additionally, a wide range of other abnormalities was observed at low frequencies (Table S2), most remarkably choanal atresia (individual 4) and ileal atresia (individual 19).

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Figure S1: Pedigree of the family with five individuals carrying p.(Arg2579His)



Figure S2: Variant p.(Glu2522Lys) in individuals 13 and 14 is equivalent to Yoda variant p.(Glu2502Lys)

Alignment of human ANKRD11 (Q6UB99) and mouse Ankrd11 (E9Q4F7) using CLUSTAL O(1.2.4) multiple sequence alignment. De human p.(Glu2522Lys) variant and Yoda mouse variant p.(Glu2502Lys) are marked.

SP|Q6UB99|ANR11_HUMAN_MPKGGCPKAPQQEELPLSSDMVEKQTGKKDKDKVSLTKTPKLERGDGGKEVRERASKRKL_60 SP | E9Q4F7 | ANR11 MOUSE MPKGGCSKTPQQEDFALSNDMVEKQTGKKDKDKVSLTKTPKLDRSDGGKEVRERATKRKL 60 SP|Q6UB99|ANR11 HUMAN PFTAGANGEQKDSDTEKQGPERKRIKKEPVTRKAGLLFGMGLSGIRAGYPLSERQQVALL 120 SP|E9Q4F7|ANR11_MOUSE PFTVGANGEQKDSDTEKQGPERKRIKKEPVARKSGLLFGMGLSGIRAGYPLSERQQVALL 120 SP|Q6UB99|ANR11_HUMAN_MQMTAEESANSPVDTTPKHPSQSTVCQKGTPNSASKTKDKVNKRNERGETRLHRAAIRGD_180 SP E904F7 ANR11 MOUSE MOMTAEESANSPVDTTPKHPS0STVC0KGTPNSASKTKDKVNKRNERGETRLHRAAIRGD 180 SP|Q6UB99|ANR11 HUMAN ARRIKELISEGADVNVKDFAGWTALHEACNRGYYDVAKQLLAAGAEVNTKGLDDDTPLHD 240 SP/E9Q4F7/ANR11_MOUSE_ARRIKELISEGADVNVKDFAGWTALHEACNRGYYDIAKQLLAAGAEVNTKGLDDDTPLHD_240 SP|Q6UB99|ANR11 HUMAN AANNGHYKVVKLLLRYGGNPQQSNRKGETPLKVANSPTMVNLLLGKGTYTSSEESSTESS 300 SP|E9Q4F7|ANR11 MOUSE AANNGHYKVVKLLLRYGGNPQQSNRKGETPLKVANSPTMVNLLLGKGTYTSSEESSTESS 300 SP|Q6UB99|ANR11 HUMAN EEEDAPSFAPSSSVDGNNTDSEFEKGLKHKAKNPEPQKATAPVKDEYEFDEDDEQDRVPP 360 SP E9Q4F7 ANR11 MOUSE EEEDAPSFAPSSSVDGNNTDSEFEKGLKLKAKNPEPQKTVTPVKDEYEFDEDDEQDRVPP 360 ****** SP|Q6UB99|ANR11 HUMAN VDDKHLLKKDYRKETKSNSFISIPKMEVKSYTKNNTIAPKKASHRILSDTSDEEDASVTV 420 SP|E9Q4F7|ANR11_MOUSE_VDDKHLLKKDYRKEAKANSFISIPKMEVKSYSKNNTLAPKKAAHRILSDTSDEEDVSVSI_420 SP|Q6UB99|ANR11 HUMAN GTGEKLRLSAHTILPGSKTREPSNAKQQKEKNKVKKKRKKETKGREVRFGKRSDKFCSSE 480 SP|E9Q4F7|ANR11 MOUSE GAGEKLRLSAHTMLPGSKARESSSSRQQKEKNKLKKKRKKETKGKEVRFGKRSDKFCSSG 480 SP|Q6UB99|ANR11_HUMAN_SESESSESGEDDRDSLGSSGCLKGSPLVLKDPSLFSSLSASSTSSHGSSAAQKQNPSHTD_540 SP|E9Q4F7|ANR11 MOUSE SESESSESEEDDGDSVGSSGCLKGSPLVLKDPSLFSSLSASSTSSHGSAVAQKHGSGHTD 540 SP|Q6UB99|ANR11 HUMAN QHTKHWRTDNWKTISSPAWSEVSSLSDSTRTRLTSESDYSSEGSSVESLKPVRKRQEHRK 600 SP/E9Q4F7/ANR11_MOUSE_QHTKHWRTDNWKAISSPAWSEVSSLSDSSRTGLTSESDCSSEGSSVESLKPTRRKQEHRK_600 ************ SP|Q6UB99|ANR11 HUMAN RASL----SEKKSPFLSSAEGAVPKLDKEGKVVKKHKTKHKHKNKEKGQCSISQELKLKS 656 SP/E9Q4F7/ANR11_MOUSE_RGVLQSAPSEKRSSFHPCTDGAVPKLDKEGKVVKKHKTKHKHKHKEKGQCSVSQELKLKS_660 *. * SP|Q6UB99|ANR11 HUMAN FTYEYEDSKQKSDKAILLENDLSTENKLKVLKHDRDHFKKEEKLSKMKLEEKEWLFKDEK 716 SP|E9Q4F7|ANR11_MOUSE_FTYEYEDSKQKSDKAILLESDLSTENKLKVLKHDREHLKKEDKLGRMKPEDKDWLFKDEK_720 SP|Q6UB99|ANR11 HUMAN SLKRIKDTNKDISRSFREEKDRSNKAEKERSLKEKSPKEEKLRLYKEERKKKSKDRPSKL 776 SP|E9Q4F7|ANR11_MOUSE_VLKRIKDANKDMSRAFREDKDRASKAERERATKDKSPKEEKLRLYKEERKKKSKDRASRL_780 SP/Q6UB99/ANR11 HUMAN EKKNDLKEDKISKEKEKIFKEDKEKLKKEKVYREDSAFDEYCNKNQFLENEDTKFSLSDD 836 SP|E9Q4F7|ANR11 MOUSE ERKNDMKEDKLSKEKEKAFKEDKEKLKKEKLYREDAAFDDYCNKSQFLDHEDTKFSLSDD 840 SP|Q6UB99|ANR11 HUMAN QRDRWFSDLSDSSFDFKGEDSWDSPVTDYRDMKSDSVAKLILETVKEDSKERRRDSRARE 896 SP/E9Q4F7/ANR11_MOUSE_QQERWFSDLSDSSFDFKGEDSWDS-VTDYRDIKNDSVAKLILETVKEDSKEKKRDNKIRE_899

SP|Q6UB99|ANR11 HUMAN KRDYREPFFRKKDRDYLDKNSEKRKEQTEKHKSVPGYLSEKDKKRRESAEAGRDRKDALE 956 SP/E9Q4F7/ANR11_MOUSE_KRDFKDSFFRKRDRDCLDKNSEKRRDQTEKHKSIPSYLSEKDKKRRESAEGGRDR----- 954 SP|Q6UB99|ANR11 HUMAN SCKERRDGRAKPEEAHREELKECGCESGFKDKSDGDFGKGLEPWERHHPAREKEKKDGPD 1016 SP|E9Q4F7|ANR11_MOUSE ----RDGRIRSEEVHREDLKECGFESSFKDKSDCDFPKNLEPWERPHAAREKEKKDALE 1009 SP|Q6UB99|ANR11_HUMAN_KERKEKTKPERYKEKSSDKDKSEKSILEKCQKDKEFDKCFKEKKDTKEKHKDTHGKDKER_1076 SP E9Q4F7 ANR11 MOUSE KERKEKGRADKYKEKSSERERSDKSTLDKCQKDKEFEKCFKEKKDGKEKHKDIHSKD--R 1067 SP|Q6UB99|ANR11 HUMAN KASLDQGKEKKEKAFPGIISEDFSEKKDDKKGKEKSWYIADIFTDESEDDRDSCMGSGFK 1136 SP|E9Q4F7|ANR11 MOUSE KASFDQLREKKEKVFSSIISEDFSERKDDRKGKEKSWYIADIFTDESEDEKDDCVAGSFK 1127 SP|Q6UB99|ANR11 HUMAN MGEASDLPRTDGLQEKEEGREAYASDRHRKSSDKQHPERQKDKEPRDRRKDRGAADAGRD 1196 SP E9Q4F7 ANR11 MOUSE ATEASDTQRVDGLPEKEEGREHPSDRHRKSSSDRQHTEKPRDKEPKEKKKDRGASEGGKD 1187 **** * *** ******* :. :::.*** *: :****::::**** SP|Q6UB99|ANR11 HUMAN KK---EKVFEKHKEKKDKESTEKYKDRKDRASVDSTQDKKNKQKLPEKAEKKHAAEDKAK 1253 SP E9Q4F7 ANR11 MOUSE KKEKMEKIFEKHKEKKDKECAERYKDRKERASADSAPEKKNKQKLPEKVEKKHFAEDKVK 1247 SP|Q6UB99|ANR11_HUMAN_SKHKEKSDKEHSKE--RKSSRSADAEKSLLEKLEEEALHEYREDSNDKISEVSSDSFTDR_1311 SP|E9Q4F7|ANR11_MOUSE_SKHKEKPEKEHSRERERKPSRGPDVEKSLLEKLEEEALHDYREDSNDKISEVSSDSFADH_1307 SP|Q6UB99|ANR11 HUMAN GQEPGLTAFLEVSFTEPPGDDKPRESACLPEKLKEKERHRHSSSSSKKSHDRERAKKEKA 1371 SP | E9Q4F7 | ANR11 MOUSE GQEPSLSTLLEVSFSEPPAEDKARDSACLSEKLREKERHRHSSSSSKKSHERERAKKEKA 1367 SP|Q6UB99|ANR11 HUMAN EKKEKGEDYKEG--GSRKDSGQYEKDFLEADAYGVSYNMKADIEDELDKTIELFSTEKKD 1429 SP | E9Q4F7 | ANR11_MOUSE EKKEKSEDYKDSISSVRKDASQFEKDFLDAETYGVSYPTKADVEEELDKAIELFSSEKKD 1427 SP|Q6UB99|ANR11_HUMAN KNDSEREPSKKIEKELKPYGSSAINILKEKKKREKHREKWRDEKERHRDRHADGLLRHHR 1489 SP|E9Q4F7|ANR11_MOUSE_RSDPEREPAKRIEKELKPYGSSAISILKEKKKREKHRERWREEKERHRDKHVDGFLRHH- 1486 SP|Q6UB99|ANR11 HUMAN DELLRHHRDEQKPATRDKDSPPRVLKDKSRDEGPRLGDAKLKEKFKDGAEKEKGDPVKMS 1549 SP|E9Q4F7|ANR11 MOUSE ------KDEPKPAAKDKDNPPNSFKEKSREESLKLSETKLKEKFKENTEREKGDSIKMS 1539 SP|Q6UB99|ANR11 HUMAN NGNDKVAPSKDPGKKDARPREKLLGDGDLMMTSFERMLSQKDLEIEERHKRHKERMKQME 1609 SP|E9Q4F7|ANR11_MOUSE NGNDKLVPSRDSGKKDSRPREKLLGDGDLMMTSFERMLSQKDLEIEERHKRHKERMKQME 1599 SP|Q6UB99|ANR11 HUMAN KLRHRSGDPKLKEKAKPADDGRKKGLDIPAKKPPGLDPPFKDKKLKESTPIPPAAENKLH 1669 SP|E9Q4F7|ANR11_MOUSE_KMRHRSGDPKLKEK-KPTEDGRKKSLDFPSKKALGLDKK-----VKEPAPTLTTGESKPH_1653 * ********** ** ***** ** ** ** ** ** * : * * * SP|Q6UB99|ANR11_HUMAN_PASGADSKDWLAGPHMKEVLPASPRPDQSRPTGVPTPTSVLSCPSYEEVMHTPRTPSCSA_1729 SP|E9Q4F7|ANR11_MOUSE SGPGTESKDWLSGQPLKEVLPASPRTEQSRPTGVPTPTSVVSCPSYEEVMHTPRTPSCSA 1713 SP|Q6UB99|ANR11 HUMAN DDYADLVFDCADSQHSTPVPTAPTSACSPSFFDRFSVASSGLSENA-SQAPARPLSTNLY 1788 SP|E9Q4F7|ANR11_MOUSE_DDYPDLVFDCTDSQHSMPVSTASTSACSPPFFDRFSVASSVVSENAAGQTPTRPISTNLY_1773 SP|Q6UB99|ANR11 HUMAN RSVSVDIRRTPEEEFSVGDKLFRQQSVPAASSYDSPMPPSMEDRAPLPPVPAEKFACLSP 1848 SP|E9Q4F7|ANR11 MOUSE RSISVDIRRTPEEEFSAGDKLFRQQSVPAPSSFDSPVQHLLEEKAPLPPVPAEKFACLSP 1833 ** ************ *************** * *********** SP|Q6UB99|ANR11 HUMAN GYYSPDYGLPSPKVDALHCPPAAVVTVTPSPEGVFSSLQAKPSPSPRAELLVPSLEGALP 1908 SP|E9Q4F7|ANR11_MOUSE GYYSPDYGIPSPKVDTLHCPPTAVVSATPPPDSVFSNLPPKSSPSPRGELLSPAIEGTLP 1893

SP|Q6UB99|ANR11 HUMAN PDLD----TSEDQQATAAIIPPEPSYLEPLDEGPFSAVITEEPVEWAHPSEQ--ALASSL 1962 SP/E9Q4F7/ANR11_MOUSE_PDLGLPLDATEDQQATAAILPQEPSYLEPLDEGPFTTVITEEPVEWTHTAAEQGLSSSSL_1953 ***. ********* :*** SP|Q6UB99|ANR11 HUMAN IGGTSENPVSWPVGSDLLLKSPQRFPESPKRFCPADPLHSAAPGPFSASEAPYPAPPASP 2022 SP E904F7 ANR11 MOUSE IASASENPVSWPVGSELMLKSPQRFAESPKHFCPGESLHSTTPGPYSAAEPTYPV---SP 2010 * * SP|Q6UB99|ANR11 HUMAN APYALPVAEPGLEDVKDGV-DAVPAAIST-SEAAPYAPPSGLESFFSNCKSLPEAPLDVA 2080 SP|E9Q4F7|ANR11_MOUSE_GSYPLPAPEPALEEVKDGGTGAIPVAISAAEGAAPYAAPARLESFFSNCKSHPDAPLDTA_2070 * ** ** ** *** * * * *** ***** SP|Q6UB99|ANR11 HUMAN PEPACVAAVAQVEALGPLENSFLDGSRGLSHLGQVEPVPWADAFAGPEDDLDLGPFSLPE 2140 SP/E9Q4F7/ANR11_MOUSE_PEPTGVTAVAQVEALGPLESSFLDSNPSISTLSQVEPVSWHEAFTSPEDDLDLGPFSLPE_2130 *** * *********** **** * * * **** * *** SP/Q6UB99/ANR11 HUMAN LPLQTKDAADGEAEPVEESLAPPEEMPPGAPGVINGGDVSTVVAEEPPALPPDQASTRLP 2200 SP|E9Q4F7|ANR11 MOUSE LPLQAKDASDVEAEAAKASPVPPAESPPGPTGVLGGGDVPAPAAEEPPAPPPQEASPQLS 2190 SP|Q6UB99|ANR11 HUMAN AELEPEPSGEPKLDVALEAAVEAETVPEERARGDPDSSVEPAPVPPEQRPLGSGDQGAEA 2260 SP E904F7 ANR11 MOUSE -- TEPEPSEEPKLDVVLEATVETEVLADDSAPEASISNSVPAPSPPQQPPGGGDEEAET 2248 ***** ***** *** *** * * *** ** * * * ** ** SP|Q6UB99|ANR11 HUMAN EGPPAASLCAPDGPAPNTVAQAQAADGAGPEDDTEASRAAAPAEGPPGGIQPEAA--EPK 2318 SP|E9Q4F7|ANR11 MOUSE EDPSATPCCAPDGPTTDGLAQAHN-----SAEASCVVAAAEGPPGNVQAEATDPEPK 2300 * * *: *****: : :***: *** * ***** * *** *** SP|Q6UB99|ANR11 HUMAN PTAEAPKAPRVEEIPQRMTRNRAQMLANQSKQGPPPSEKECAPTPAPVTRAKARGSEDDD 2378 SP E9Q4F7 ANR11 MOUSE PTSEVPKAPKVEEVPQRMTRNRAQMLASQSKQGIPAAEKDP -- MPTPASRAKGRASEEED 2358 * * * *** * ** SP|Q6UB99|ANR11 HUMAN AQAQHPRKRRFQRSTQQLQQQLNTSTQQTREVIQQTLAAIVDAIKLDAIEPYHSDRANPY 2438 SP/E9Q4F7/ANR11_MOUSE_AQAQHPRKRRFQRSSQQLQQQLNTSTQQTREVIQQTLAAIVDAIKLDAIEPYHSDRSNPY_2418 ************ SP|Q6UB99|ANR11_HUMAN FEYLQIRKKIEEKRKILCCITPQAPQCYAEYVTYTGSYLLDGKPLSKLHIPVIAPPPSLA 2498 SP|E9Q4F7|ANR11_MOUSE FEYLQIRKKIEEKRKILCCITPQAPQCYAEYVTYTGSYLLDGKPLSKLHIPVIAPPPSLA 2478 SP|Q6UB99|ANR11 HUMAN EPLKELFRQQEAVRGKLRLQHSIERKLIVSCEQEILRVHCRAARTIANQAVPFSACTML 2558 SP|E9Q4F7|ANR11 MOUSE EPLKELFKQQEAVRGKLRLQHSIERKLIVSCEQEILRVHCRAARTIANQAVPFSACTML 2538 SP/Q6UB99/ANR11 HUMAN LDSEVYNMPLESQGDENKSVRDRFNARQFISWLQDVDDKYDRMKTCLLMRQQHEAAALNA 2618 SP | E9Q4F7 | ANR11 MOUSE LDSEVYNMPLESQGDENKSVRDRFNARQFISWLQDVDDKYDRMKTCLLMRQQHEAAALNA 2598 SPIQ6UB99IANR11 HUMAN VQRMEWQLKVQELDPAGHKSLCVNEVPSFYVPMVDVNDDFVLLPA 2663 SP E9Q4F7 ANR11 MOUSE VQRMEWQLKAQELDPAGHKSLCVNEVPSFYVPMVDVNDDFVLLPA 2643

Figure S3: Four variants are located at three residues in predicted destruction motifs

ANKRD11 amino acid sequence with the variants identified in affected individuals shaded in yellow. Different degradation motifs are indicated: RxxL-motifs are underlined, Proviz-predicted destruction motifs are bold, with D-boxes in red, Ken-boxes in green and an Abba-motif in orange.

>sp]Q6UB99|ANR11_HUMAN Ankyrin repeat domain-containing protein 11 OS=Homo sapiens OX=9606 GN=ANKRD11 PE=1 SV=3

MPKGGCPKAPQQEELPLSSDMVEKQTGKKDKDKVSLTKTPKLERGDGGKEVRERASKRKL PFTAGANGEQKDSDTEKQGPERKRIKKEPVTRKAGLLFGMGLSGIRAGYPLSERQQVALL MQMTAEESANSPVDTTPKHPSQSTVCQKGTPNSASKTKDKVNKRNERGETRLHRAAIRGD ARRIKELISEGADVNVKDFAGWTALHEACNRGYYDVAKQLLAAGAEVNTKGLDDDTPLHD AANNGHYKVVKLLLRYGGNPQQSNRKGETPLKVANSPTMVNLLLGKGTYTSSEESSTESS EEEDAPSFAPSSSVDGNNTDSEFEKGLKHKAKNPEPQKATAPVKDEYEFDEDDEQDRVPP VDDKHLLKKDYRKETKSNSFISIPKMEVKSYTKNNTIAP<mark>K</mark>KASHRIL<mark>S</mark>DTSDEEDASVTV GTGEKLRLSAHTILPGSKTREPSNAKQQKEKNKVKKKRKKETKGREVRFGKRSDKFCSSE SESESSESGEDD<u>RDSL</u>GSSGCLKGSPLV<mark>L</mark>KDPSLFSSLSASSTSSHGSSAAQKQNPSHTD QHTKHWRTDNWKTISSPAWSEVSSLSDSTRTRLTSESDYSSEGSSVESLKPVRKRQEHRK RASLSEKKSPFLSSAEGAVPKLDKEGKVVKKHKTKHKHKNKEKGQCSISQELKLKSFTYE YEDSKQKSDKAILLENDLSTENKLKVLKHDRDHFKKEEKLSKMKLEEKEWLFKDEKSLKR IKDTNKDISRSFREEKDRSNKAEKERSLKEKSPKEEKLRLYKEERKKKSKDRPSKL**EKKN** DLKEDKISKEKEKIFKEDKEKLKKEKVYREDSAFDEYCNKNQFLENEDTKFSLSDDQRDR WFSDLSDSSFDFKGEDSWDSPVTDYRDMKSDSVAKLILETVKEDSKERRRDSRAREKRDY REPFFRKKD**RDYL**DKNSEKRKEQTEKHKSVPGYLSEKDKKRRESAEAGRDRKDALESCKE RRDGRAKPEEAHREELKECGCESGFKDKSDGDFGKGLEPWERHHPAREKEKKDGPDKERK EKTKPERYKEKSSDKDKSEKSILEKCQKDKEFDKCFKEKKDTKEKHKDTHGKDKERKASL DQGKEKKEKAFPGIISEDFSEKKDDKKGKEKSWYIADIFTDESEDDRDSCMGSGFKMGEA SDLPRTDGLQEKEEGREAYASDRHRKSSDKQHPERQKDKEPRDRRKDRGAADAGRDKKEK VFEKHKEKKDKESTEKYKDRKDRASVDSTQDKKNKQKLPEKAEKKHAAEDKAKSKHKEKS DKEHSKERKSSRSADAEKSLLEKLEEEALHEYREDSNDKISEVSSDSFTDRGQEPGLTAF LEVSFTEPPGDDKPRESACLPEKLKEKERHRHSSSSSKKSHDRERAKKEKAEKKEKGEDY KEGGSRKDSGQYEKDFLEADAYGVSYNMKADIEDELDKTIELFSTEKKDKNDSEREPSKK IEKELKPYGSSAINILKEKKKREKHREKWRDEKERHRDRHADGLLRHH**RDEL**LRHHRDEQ KPATRDKDSPPRVLKDKSRDEGPRLGDAKLKEKFKDGAEKEKGDPVKMSNGNDKVAPSKD PGKKDARP**REKL**LGDGDLMMTSFERMLSQKDLEIEERHKRHKERMKQMEKLRHRSGDPKL KEKAKPADDGRKKGLDIPAKKPPGLDPPFKDKKLKESTPIPPAAENKLHPASGADSKDWL AGPHMKEVLPASPRPDQSRPTGVPTPTSVLSCPSYEEVMHTPRTPSCSADDYADLVFDCA DSQHSTPVPTAPTSACSPSFFDRFSVASSGLSENASQAPARPLSTNLYRSVSVDIRRTPE EEFSVGDKLFRQQSVPAASSYDSPMPPSMEDRAPLPPVPAEKFACLSPGYYSPDYGLPSP KVDALHCPPAAVVTVTPSPEGVFSSLQAKPSPSPRAELLVPSLEGALPPDLDTSEDQQAT AAIIPPEPSYLEPLDEGPFSAVITEEPVEWAHPSEQALASSLIGGTSENPVSWPVGSDLL LKSPQRFPESPKRFCPADPLHSAAPGPFSASEAPYPAPPASPAPYALPVAEPGLEDVKDG VDAVPAAISTSEAAPYAPPSGLESFFSNCKSLPEAPLDVAPEPACVAAVAQVEALGPLEN SFLDGSRGLSHLGQVEPVPWADAFAGPEDDLDLGPFSLPELPLQTKDAADGEAEPVEESL APPEEMPPGAPGVINGGDVSTVVAEEPPALPPDQASTRLPAELEPEPSGEPKLDVALEAA VEAETVPEERARGDPDSSVEPAPVPPEQRPLGSGDQGAEAEGPPAASLCAPDGPAPNTVA QAQAADGAGPEDDTEASRAAAPAEGPPGGIQPEAAEPKPTAEAPKAPRVEEIPQRMTRNR AQMLANQSKQGPPPSEKECAPTPAPVTRAKARGSEDDDAQAQHPRKRRFQRSTQQLQQQL NTSTQQTREVIQQTLAAIVDAIKLDAIEPYHSDRANPYFEYLQIRKKIE**EKRKILCCITP** QAPQCYAEYVTYTGSYLLDGKPLSKLHIPVIAPPPSLAEPLKELFRQQEAVRGKLRLQHS IEREKLIVSCEQEILRVHCRAARTIANQAVPFSACTMLLDSEVYNMPLESQGDENKSVRD RFNARQFISWLQDVDDKYDRMKTCLLMRQQHEAAALNAVQRMEWQLKVQELDPAGHKSLC VNEVPSFYVPMVDVNDDFVLLPA

Figure S4: *ANKRD11* missense variants affecting arginine residues in RD2 are overrepresented in the cohort

The observed number of mutated arginine residues in our cohort (12/17 RD2; 0/8 outside RD2) were compared against an expected distribution of mutated arginine residues in ANKRD11 (see Methods). The mean (circle) and standard deviation (interval) of the expected distribution is shown in red. The black diamond represents the observed distribution inside RD2 (top) and outside (bottom). Permutation *p*-values shown above the expected distribution represent the likelihood that the observed distribution would occur by chance.



Figure S5: Quantification of ANKRD11 nuclear speckles (related to Figure 3)

Results of quantification of (A) number, (B) size, (C) perimeter, (D) area covered, (E) solidity and (F) and density of ANKRD11 nuclear speckles. Values are expressed relative to wildtype (WT) and represent the mean ± SD of three independent experiments (one-way ANOVA and a post-hoc Dunnett's test).



Figure S6: EGFP-ANKRD11 protein expression in transiently transfected HEK293T/17 cells

(A) Immunoblot of whole cell lysates of HEK293T/17 cells expressing EGFP-Myc-tagged ANKRD11 variants probed with an anti-GFP antibody. B) Immunoblot of whole cell lysates of HEK293T/17 cells expressing EGFP-Myc-tagged ANKRD11 variants probed with an anti-Myc antibody. β -actin was used as a loading control.



Figure S7: Stability and degradation of ANKRD11 variants as EGFP-fusion protein in HEK293T/17 cells

Relative expression ANKRD11 variants as EGFP-fusion protein in HEK293T/17 cells treated with (A) 50µg/ml cycloheximide (CHX) or (B) 5µg/ml proteasome inhibitor MG132. Equal volume of DMSO was used as a vehicle control. Fluorescence intensity was measured for 24 hours with three-hour intervals. Values are expressed relative to t= 0 hour and represent the mean ± SD of three independent experiments, each preformed in triplicates (*p<0.05, **p<0.01, ***p<0.001, ****p<0.0001 CHX or MG132 versus DMSO; repeated measure two-way ANOVA and a post-hoc Sidak's test).



Figure S8: Potential effects on cryptic splice sites

Alamut splice site tools predict potential effects of p.(Gly1093Arg) and p.(Asp2178Tyr), respectively predicted to remove a cryptic acceptor splice site, and to introduce a cryptic donor splice site.

		NM_013	275.6(ANKRD11):c.3	277G>A - [c.3172 (Exc	on 9) - c.3383 (Exon 9)] Alamut	Visual v.2.13 rev. 0
SpliceSiteFinder-like	[0-100]						
MaxEntScan	[0-12]						
NNSPLICE D	[0-1]						
GeneSplicer	[0-24]						
D. (3250	3260	3270	3280	3290	3300	3310
Reference Sequence	JAAAGAG	JAAGAAGGA	GAAGGCITIC	CCI GGGAICAI			AAAGAIGACAAG
SpliceSiteFinder-like	[0-100]				71.9		
MaxEntScan	[0-16]				3.9		
NNSPLICE	[0-1]						
GeneSplicer	[0-21]						
Branch Points	[0-100]						
SpliceSiteFinder-like	[0-100]						
MaxEntScan	[0-12]						
NNSPLICE D	[0-1]						
GeneSplicer	[0-24]						
	3250	3260	3270	3280	3290	3300	3310
Mutated Sequence	GAAAGAG	GAAGAAGGA	GAAGGCTTTC	CCT <u>A</u> GGATCAT	CTCAGAAGACI	T C T C T G A A A A	AAAAGATGACAAG
SpliceSiteFinder-like	[0-100]						
MaxEntScan	[0-16]						
NNSPLICE	[0-1]						
GeneSplicer	[0-21]					·•; S	OPHi∆™
Branch Points	[0-100]			54.5			

		Alamut	Visual v.2.13 rev. 0				
SpliceSiteFinder-like	[0-100]						
MaxEntScan	[0-12]						
NNSPLICE	[0-1]						
GeneSplicer	[0-24]	_					
	6510	6520	6530	6540	6550	6560	6570
Reference Sequence		BICATAAACG	GIGGGGAIGI	TICCALL	JI AGI GGCI GAG	JGAGLLGLLG	JCACIGULIULI
SpliceSiteFinder-like	[0-100]						
MaxEntScan 🥤	[0-16]						
NNSPLICE 🌙	[0-1]						
GeneSplicer	[0-21]				-		
Branch Points	[0-100]						
SpliceSiteFinder-like	[0-100]						
MaxEntScan	[0-12]						
NNSPLICE D	[0-1]						
GeneSplicer	[0-24]	_	_				
	6510	6520	6530	6540	6550	6560	6570
Mutated Sequence	GCCCCCGGGG	GTCATAAACG	GT GGG <mark>T</mark> AT GT	TTCCACCO	GTAGTGGCTGA	GGAGCCGCCGC	SCACTGCCTCCT
SpliceSiteFinder-like	[0-100]						
MaxEntScan 🦳	[0-16]						
NNSPLICE 🎝	[0-1]						
GeneSplicer	[0-21]					·•: 5	OPHi∆™
Branch Points	[0-100]						<u> </u>