

Differentiation signals induce *APOBEC3A* expression via GRHL3 in squamous epithelia and squamous cell carcinoma

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Abstract

Two APOBEC DNA cytosine deaminase enzymes, APOBEC3A and APOBEC3B, generate somatic mutations in cancer, thereby driving tumour development and drug resistance. Here, we used single-cell RNA sequencing to study *APOBEC3A* and *APOBEC3B* expression in healthy and malignant mucosal epithelia, validating key observations with immunohistochemistry, spatial transcriptomics and functional experiments. Whereas *APOBEC3B* is expressed in keratinocytes entering mitosis, we show that *APOBEC3A* expression is confined largely to terminally differentiating cells and requires grainyhead-like transcription factor 3 (GRHL3). Thus, in normal tissue, neither deaminase appears to be expressed at high levels during DNA replication, the cell-cycle stage associated with APOBEC-mediated mutagenesis. In contrast, in squamous cell carcinoma we find that, there is expansion of *GRHL3* expression and activity to a subset of cells undergoing DNA replication and concomitant extension of *APOBEC3A* expression to proliferating cells. These findings suggest that APOBEC3A may play a functional role during keratinocyte differentiation, and offer a mechanism for acquisition of APOBEC3A mutagenic activity in tumours.

Keywords

APOBEC3A, cancer mutagenesis, GRHL3, keratinocyte, HNSCC

49 **Introduction**

50 The *APOBEC3A* and *APOBEC3B* (apolipoprotein B mRNA editing catalytic polypeptide-like 3A
51 and 3B) genes encode two closely related DNA cytosine deaminases that belong to the
52 seven-protein human APOBEC3 family. The APOBEC3 enzymes convert deoxycytidine to
53 deoxyuridine in single-stranded DNA (ssDNA), a mutagenic activity that explains at least in
54 part their ability to restrict replication of retroviruses and endogenous retroelements
55 through targeting nascent cDNA during reverse transcription (Harris & Dudley, 2015;
56 Conticello, 2008). In addition, APOBEC3A and APOBEC3B have evolved functions in the cell
57 nucleus including transcriptional regulation (Periyasamy *et al*, 2015; Taura *et al*, 2022) and
58 responses to nuclear-resident viruses (Chen *et al*, 2006; Vartanian *et al*, 2008; Warren *et al*,
59 2015; Lejeune *et al*, 2023; Lucifora *et al*, 2014; Cheng *et al*, 2018). Acquisition of these
60 nuclear functions appears to have come at a cost however, as both APOBEC3A and
61 APOBEC3B have been implicated in generating somatic mutations (mainly C>T transitions
62 and C>G tranversions at TpC sites) in cancer cell genomes, driving cancer development and
63 therapeutic resistance (Henderson & Fenton, 2015; Swanton *et al*, 2015; Petljak &
64 Maciejowski, 2020; Mertz *et al*, 2022; Green & Weitzman, 2019; Isozaki *et al*, 2023; Lin *et al*,
65 2022; Caswell *et al*, 2023; Periyasamy *et al*, 2020; Law *et al*, 2020; Durfee *et al*, 2023;
66 Naumann *et al*, 2023). Two mutation signatures attributed to APOBEC3A/B activity have
67 been observed in multiple cancer types but although extensive biochemical and genetic
68 data support the involvement of both APOBEC3A and APOBEC3B in somatic mutagenesis,
69 their gene expression levels as determined by analysis of bulk tumour data or in cancer cell
70 lines that display the signatures are only weakly, if at all, correlated with the presence of
71 these mutation signatures (Alexandrov *et al*, 2013; Roberts *et al*, 2013; Burns *et al*, 2013b,
72 2013a; Taylor *et al*, 2013; Cortez *et al*, 2019; Buisson *et al*, 2019; Jalili *et al*, 2020; Petljak *et*

al, 2022a). Accurately determining the conditions under which *APOBEC3A* and *APOBEC3B* are expressed in normal and cancerous tissues represents a key challenge in building our understanding of how APOBEC-mediated mutagenesis occurs, and how they might be targeted for cancer treatment (Petljak *et al*, 2022b). This objective is complicated however, by their expression in immune cells, which are frequently present at high levels in tumour biopsies, and until recently by a lack of specific antibodies for *in situ* analysis. Here, we addressed these challenges by conducting single cell RNA sequencing (scRNA-seq) of matched normal and tumour samples from patients with head and neck squamous cell carcinoma (HNSCC), a tumour type in which high burdens of APOBEC signature mutations are frequently observed, with evidence pointing to roles for both *APOBEC3A* and *APOBEC3B* in generating these mutations (Alexandrov *et al*, 2013; Burns *et al*, 2013b; Roberts *et al*, 2013; Henderson *et al*, 2014; The Cancer Genome Atlas Network, 2015; Faden *et al*, 2017). We analysed *APOBEC3A* and *APOBEC3B* gene expression patterns in these data and in additional published scRNA-seq datasets from healthy and cancerous epithelial tissues, deploying recently developed antibodies in immunohistochemical analysis of tissue sections to corroborate our findings at the protein level. We used computational methods to predict transcription factors responsible for regulating APOBEC expression and validated our predictions in near-normal immortalized keratinocytes (NIKS) (Allen-Hoffmann *et al*, 2000), identifying Grainyhead-like transcription factor 3 (GRHL3) as a novel regulator of *APOBEC3A* expression in terminally differentiating keratinocytes. In contrast, and consistent with findings from different cell types (Hirabayashi *et al*, 2021; Roelofs *et al*, 2023), *APOBEC3B* expression is confined to proliferating cells, with highest levels evident in G2/M-phase of the cell cycle. In HNSCC, we find evidence of GRHL3 activity and *APOBEC3A* in a subpopulation of tumour cells undergoing DNA replication; the context in which mutagenic

APOBEC activity is postulated to occur due to deamination of lagging strand ssDNA exposed at the replication fork (Green *et al*, 2016; Haradhvala *et al*, 2016; Hoopes *et al*, 2016; Morganella *et al*, 2016; Seplyarskiy *et al*, 2016; Stewart *et al*, 2020). Our findings provide new insight into the transcriptional control of *APOBEC3A* gene expression in squamous epithelia and provide a potential mechanism for the acquisition of APOBEC3A-induced mutations in cancer.

Results

***APOBEC3A* is expressed in epithelial cells from healthy tonsil and oesophagus.**

Although most cancers that display enrichment for APOBEC mutational signatures are carcinomas, i.e. tumours that arise from epithelial cells, little is known about the expression patterns and physiological regulation of *APOBEC3A* and *APOBEC3B* in healthy epithelium, or regarding the proportion of malignant cells that express *APOBEC3A*, *APOBEC3B* or both genes in tumour biopsies. To address these knowledge gaps, we assembled scRNA-seq data from the epithelial cells (see Methods) present in 10 oropharyngeal SCC samples and 7 matched normal (contralateral tonsil) samples from patients undergoing surgical resection at our institution (Table EV1), together with 11 published scRNA-seq datasets from healthy skin, breast and oesophagus and from cancers of the breast, bladder, head and neck (HNSCC), oesophagus (ESCC) and lung (all cancers that typically display moderate to strong enrichment for APOBEC mutation signatures, Table EV2). Very few *APOBEC3A* or *APOBEC3B* expressing epithelial cells were present in the normal skin, breast or lung datasets but 16.4% of epithelial cells from normal oesophagus and 38.1% from normal tonsil expressed *APOBEC3A*, 10.5% of which also expressed *APOBEC3B* (Fig 1). 3.5% of tonsil epithelial cells expressed only *APOBEC3B*, and the mean *APOBEC3A* expression per cell was significantly

higher than that of *APOBEC3B* in both tonsil and esophagus (Fig 1, $p < 2.22 \times 10^{-16}$ (unpaired Wilcoxon's Rank Sum test)). In the tumour samples, the majority of epithelial (tumour) cells expressed neither *APOBEC3A* nor *APOBEC3B* at levels detectable by scRNA-seq, and the only datasets containing a significant number of cells expressing *APOBEC3A* and/or *APOBEC3B* were from HNSCC or ESCC (Fig 1). Only the datasets from healthy tonsil and oesophagus and from HNSCC and ESCC contained sufficient *APOBEC3A* and/or *APOBEC3B* expressing cells to permit further analysis, so we initially interrogated the data from tonsil epithelial cells, the dataset in which we observed the highest average *APOBEC3A* expression per cell and the greatest proportion of *APOBEC3A*- and/or *APOBEC3B*-positive cells (Fig 1).

***APOBEC3A* and *APOBEC3B* are expressed in distinct cell sub-populations in healthy tonsil epithelium.**

Since most *APOBEC3A*-expressing cells in the normal tonsil dataset did not co-express detectable levels of *APOBEC3B*, we were interested to determine whether the cells comprising this *APOBEC3A*-positive / *APOBEC3B*-negative population might share a common phenotype and if so, whether it might be distinct from the *APOBEC3A*-negative / *APOBEC3B*-positive, *APOBEC3A/B*-positive and *APOBEC3A/B*-negative populations. To address this question, after further quality control (see Methods for details), we identified the top 100 genes co-expressed with either *APOBEC3A* or *APOBEC3B* (Table EV3) in 2,649 epithelial cells from our healthy tonsil samples (Fig 2A, blue) and used pathway analysis to examine the gene ontology biological processes (GOBP) enriched among each geneset (Fig 2B). Considering only the top ten GOBP pathway hits for the two APOBECs, there was no overlap, and each was dominated by different biological processes. For *APOBEC3A* the top ten pathways included those involved in epidermal and keratinocyte development and

differentiation whereas, consistent with observations in bulk RNA-seq data from breast cancer (Cescon *et al*, 2015), all processes in the top ten for *APOBEC3B* were associated with mitosis (Fig 2B, Dataset EV1). This finding suggested that in healthy tonsil epithelium, *APOBEC3B* is expressed in cycling cells undergoing cell division while *APOBEC3A* is restricted to those keratinocytes undergoing terminal differentiation. To further investigate this possibility, the epithelial cells were clustered based on known markers for different epithelial cell states (Kang *et al*, 2015; Kabir *et al*, 2022; Rochman *et al*, 2022; Franzén *et al*, 2019). These genes included markers for basal cells (cytokeratin-14 (*KRT14*) and cytokeratin-15 (*KRT15*), proliferating epithelium (Ki-67 (*MKI67*), minichromosome maintenance complex component 7 (*MCM7*)), differentiating keratinocytes (involucrin (*IVL*), cytokeratin-10 (*KRT10*)), and terminally differentiating keratinocytes (*SPRR2A*, *S100P*) (Fig 2C, D). Similarly, scRNA-seq of healthy oesophageal epithelium (Madisson *et al*, 2019) had previously been clustered into four distinct epithelial phenotypes: basal epithelium ('epi-basal'), a proliferating suprabasal epithelium ('epi-suprabasal'), differentiating stratified epithelium ('epi-stratified'), and terminally differentiated upper epithelium ('epi-upper') (Appendix Fig S1A). Marker gene expression patterns for these epithelial subtypes resembled those observed in the corresponding tonsillar epithelial subtypes (Appendix Fig S1B).

As inferred from the pathway analysis, *APOBEC3B* was expressed predominantly in proliferating cells, significantly more so than in differentiating cells ($p < 0.0001$, Wilcoxon's Rank Sum Test), exhibiting a similar expression profile to *MKI67* (Fig 2E). While also expressed in a subset of proliferating cells, *APOBEC3A* expression was significantly higher in differentiating cells ($p < 0.0001$, Wilcoxon's Rank Sum Test), and was also detectable in some terminally differentiated cells, following the expression pattern of *IVL* (Fig 2E).

Although *APOBEC3A* was expressed in a lower proportion of healthy oesophageal epithelial cells compared to those of the tonsillar epithelium, it was again co-expressed with *IVL* in differentiating cells and expressed weakly if at all, in the proliferative compartment ($p < 0.0001$, Wilcoxon's Rank Sum Test, Appendix Fig S1C).

Keratinocyte cell cycle exit and initiation of differentiation is marked by a switch from *APOBEC3B* to *APOBEC3A* expression.

Our finding that *APOBEC3A* is expressed in differentiating epithelial cells of the tonsil and oesophagus is consistent with a previous report that it is upregulated during Ca^{2+} -induced differentiation of W12 cells (a cell line established from a cervical neoplasia that harbours HPV16 (Stanley *et al*, 1989)) and normal human epidermal keratinocytes (NHEK) (Wakae *et al*, 2018). In the same study, *APOBEC3B* upregulation was also observed in W12 cells following 10 days in high Ca^{2+} but not in NHEKs, suggesting an HPV-specific induction, as reported (Vieira *et al*, 2014; Henderson *et al*, 2014; Periyasamy *et al*, 2017). Ca^{2+} is an activator of protein kinase C (PKC) signalling, which also mediates potent induction of *APOBEC3A* by phorbol esters in keratinocytes (Rasmussen & Celis, 1993; Madsen *et al*, 1999; Siriwardena *et al*, 2018). We therefore sought to uncouple potential PKC-dependent effects from differentiation-dependent effects on *APOBEC3A* expression by using three other established methods for inducing keratinocyte differentiation: growth to high density; inhibition of epidermal growth factor receptor (EGFR); and growth factor withdrawal (Poumay & Pittelkow, 1995; Peus *et al*, 1997). In all three contexts we observed upregulation of *APOBEC3A*, along with *IVL* and *KRT10* and either no change (following 24 hours of the EGFR inhibitor afatinib) or a decrease (following growth to high density, serum and growth factor withdrawal) in *APOBEC3B* expression, closely mirroring decreases in

MKI67 and *MCM7* (Fig 3A, C, E). Analysis of DNA content by flow cytometry confirmed cell cycle arrest in all three conditions (Fig 3B, D, F). In contrast to *APOBEC3A* induction by phorbol 12-myristate 13-acetate (PMA), the upregulation observed following growth factor withdrawal was independent of PKC signalling (Appendix Fig S2A, B) and was also observed in primary keratinocytes (Figure 3G). Editing of cytosine 558 to uracil in the Dolichyl-diphosphooligosaccharide--protein glycosyltransferase 48 kDa subunit (DDOST) transcript (a highly specific measure of *APOBEC3A* deaminase activity (Jalili *et al*, 2020)) paralleled the increase in *APOBEC3A* mRNA observed upon growth factor withdrawal (Figure 3H). Upon treating NIKS with inhibitors of the two major mitogenic signalling pathways downstream of EGFR (RAS/MEK/ERK and PI3K/AKT/mTOR) we observed induction of *APOBEC3A* only by the MEK inhibitor trametinib, which was also the only compound to induce *IVL* / *KRT10* expression (Appendix Fig S2C, top) and to induce cell cycle arrest (Appendix Fig S2D). Interestingly the ERK1/2 inhibitor raxoxertinib did not block proliferation, nor did it induce *APOBEC3A* or differentiation markers (Appendix Fig S2C, D). PI3K (pictilosib), AKT (MK2206) and mTORC1 (everolimus) inhibitors had no effect on proliferation or *APOBEC3A* expression but they did reduce *APOBEC3B* expression, which unlike *MKI67* and *MCM7*, was unaffected by MEK inhibition (Appendix Fig S2C). PI3K inhibition has previously been shown to reduce *APOBEC3B* expression in the U2OS human osteosarcoma cell line, via effects on NFκB and AP-1 activity (Lin *et al*, 2020).

Taken together, our results from human tissue samples and the experiments in NIKS suggest that cell cycle exit and initiation of terminal differentiation in keratinocytes is accompanied by a switch in *APOBEC3* gene usage, from *APOBEC3B*, which is expressed in cycling cells entering cell division, to *APOBEC3A*.

APOBEC3A expression during keratinocyte differentiation requires Grainyhead-like transcription factor 3.

Transcription factor activity analysis of scRNA-seq data from normal tonsil epithelial cells using single-cell regulatory network inference and clustering (SCENIC) (Aibar *et al*, 2017) identified the Grainyhead-like transcription factor 3 (GRHL3), a key regulator of epidermal differentiation (Ting *et al*, 2005; Yu *et al*, 2006; Hopkin *et al*, 2012; Klein *et al*, 2017) as a potential regulator of *APOBEC3A* expression in the datasets from normal tonsil, HNSCC and ESCC, with strong positive associations between GRHL3 activity scores and *APOBEC3A* expression evident across all scRNA-seq datasets we analysed (Dataset EV2). Furthermore, GRHL3 was the only transcription factor among those whose activity was correlated with *APOBEC3A* expression, and significantly increased in the differentiating compartment of the normal tonsil epithelium, in which most *APOBEC3A*-expressing cells were clustered (Fig 4A, B, Fig 2E, Table EV4). It is also known to be activated downstream of the Receptor-Interacting Protein Kinase 4 (RIPK4) in PMA-treated keratinocytes (Scholz *et al*, 2016). Stratifying cells by their binary (on / off) GRHL3 activity as determined from SCENIC analysis (Appendix Fig S3) revealed increased *APOBEC3A* expression in 'GRHL3-on' cells (Fig 4C (upper panel); Wilcoxon's Rank Sum test $p < 0.0001$). 936 of 1,416 (66%) 'GRHL3-on' cells expressed *APOBEC3A*, a significantly higher number of cells compared to those that were 'GRHL3-off', where only 73 of 1,233 (6%) cells expressed *APOBEC3A* (Fishers Exact Test, $p < 0.0001$; Fig 4C (lower panel)). Published GRHL3 target genes include *IVL* and E74 Like ETS Transcription Factor 3 (*ELF3*) (Scholz *et al*, 2016; Hopkin *et al*, 2012), both of which display very similar patterns of gene expression to *APOBEC3A* in response to differentiation stimuli in NIKS (Fig 3; Appendix Fig S2 and Appendix Fig S4). Suppressing *GRHL3* expression using

two different siRNAs blocked induction of *APOBEC3A* mRNA (Fig 4D) and DDOST mRNA editing (Fig 4E) by afatinib in NIKS, demonstrating a functional role for GRHL3 in activating *APOBEC3A* expression during differentiation. Induction of GRHL3 target genes *IVL* and *ELF3* was also suppressed, whereas expression of *MKI67* and *MCM7* was unaffected by *GRHL3* knockdown (Appendix Fig S5), consistent with GRHL3-dependent induction of *APOBEC3A* occurring during afatinib-induced differentiation, downstream of cell cycle exit. *GRHL3* knockdown also decreased *APOBEC3A* mRNA levels in PMA-treated NIKS (Appendix Fig S6A), and following growth factor withdrawal (Appendix Fig S6B, C). Analysis of chromatin immunoprecipitation (ChIP-seq) data from human keratinocytes (NHEK) (Hopkin *et al*, 2012; Klein *et al*, 2017) revealed GRHL3 binding at a predicted enhancer 33kb upstream of the *APOBEC3A* TSS following Ca^{2+} -induced differentiation but not in control (proliferating) cells, consistent with a direct role for GRHL3 in regulating *APOBEC3A* transcription (Fig 4F, Appendix Fig 7A, main panel). The 176 bp region at which the GRHL3 binding peak is located contains four 8-mer sequences that are close matches for the previously defined consensus GRHL3 binding motif (AACC[G/T]GTT) (Yu *et al*, 2006) (Appendix Fig 7A inset). GRHL3 has been shown to recruit the trithorax group (trxG) protein WDR5 to its target sites to enable H3K4 methylation (Hopkin *et al*, 2012), and a WDR5 binding peak coincided with the GRHL3 peak at -33kb in differentiating NHEKs (Fig 4F). A predicted promoter at -4kb relative to the TSS harbours NF κ B and STAT2 binding sites previously implicated in *APOBEC3A* regulation (Oh *et al*, 2021; Isozaki *et al*, 2023), and WDR5 binding was also observed at this region in differentiating NHEKs (Fig 4F, Appendix Fig S7A). Analysis of ChIP-seq data from keratinocytes (Kouwenhoven *et al*, 2015; Rubin *et al*, 2017; Bernstein *et al*, 2010; Ernst *et al*, 2011) revealed a dominant peak for active histone marks (H3K27Ac, H3K4Me1, and H3K4Me3) at the -33kb enhancer where GRHL3 binding was detected (Fig

4F). ChIP-seq data from monocytes (Nurminen *et al*, 2018; Bernstein *et al*, 2010; Novakovic *et al*, 2016; Dunham *et al*, 2012), which also express *APOBEC3A* (Peng *et al*, 2007; Chen *et al*, 2006; Koning *et al*, 2009) but not *GRHL3* (Kudryavtseva *et al*, 2003), revealed a different profile, with abundant H3K27 acetylation and H3K4 methylation marking the -4kb promoter and a second predicted enhancer at -15kb but not at the -33kb enhancer (Figure 4F). Differential enhancer usage in keratinocytes and monocytes may explain the requirement for *GRHL3* in the former but not the latter. *GRHL3* and *WDR5* binding to a region of the *ELF3* promoter containing three putative *GRHL3* binding motifs was also evident (Appendix Fig S7B) but no peaks were observed at *IVL* promoter.

The relationship between *GRHL3* and *APOBEC3A* was further investigated in a dataset of 77,969 cells from healthy human airways (Deprez *et al*, 2020). Both *GRHL3* and *APOBEC3A* were predominantly (865/1545 (56%) of *GRHL3*-expressing cells and 230/623 (37%) of *APOBEC3A*-expressing cells) expressed in secretory epithelial cells of the nasal cavity which also expressed the differentiation markers *KRT10*, *IVL* and *ELF3* (Fig 4G). *APOBEC3B*, *MKI67* and *TOP2A* were predominantly expressed in cycling basal cells and suprabasal cells, again consistent with our observations from tonsil epithelium (Fig EV1). As expected, *APOBEC3A* was also expressed in monocytes and macrophages (9.8% and 9.5% of *APOBEC3A*-expressing cells respectively), while *GRHL3* was not (Figure 4G). Together, these data from tissues and cultured cells identify *GRHL3* as a key transcription factor that acts to upregulate *APOBEC3A* expression during keratinocyte differentiation.

Although no single transcription factor activity displayed a consistently strong correlation with *APOBEC3B* expression (Dataset EV2), possibly due to the lower number of *APOBEC3B*-expressing cells in several of the datasets), correlations with E2F family transcription factors

are consistent with previous reports linking repressive E2F-containing complexes to *APOBEC3B* regulation (Periyasamy *et al*, 2017; Roelofs *et al*, 2020), and with its expression in proliferating cells.

Evidence for regulation of *APOBEC3A* by *GRHL3* in SCC tissues and cell lines.

Having determined that *APOBEC3A* is expressed during the terminal differentiation of non-cancerous epithelial cells in the tonsil and oesophagus, and that this expression pattern could be recapitulated in immortalised but non-transformed epidermal keratinocytes in culture, we next investigated *APOBEC3A* and *APOBEC3B* expression patterns in scRNA-seq data from tumour samples. After inferring copy number variation (CNV) profiles for each cell by averaging gene expression levels over large genomic regions (Patel *et al*, 2014) (see methods for details), we identified 695 epithelial cells from our tumour samples with inferred CNV profiles that closely resembled those of cells from our matched normal tonsil cells (Appendix Figure S8). These were classed as non-malignant and further analyses were based on the 18,619 malignant epithelial cells remaining. Pathway analysis of the top 100 genes co-expressed with either *APOBEC3A* or *APOBEC3B* in the 18,619 malignant tumour cells from the 10 Southampton HNSCCs (7 of which were patient-matched with the healthy tonsil samples analysed in Figure 2 (Tables EV1, EV2)) and in the additional published scRNA-seq datasets from HNSCC(Puram *et al*, 2023; Kürten *et al*, 2021) and ESCC(Zhang *et al*, 2021) revealed similar results to those obtained when performing the analysis on data from healthy tonsil; *APOBEC3A* was again co-expressed with genes in pathways related to keratinocyte differentiation, while *APOBEC3B* was co-expressed with genes in pathways linked to cell division (Appendix Figure S9A-D and Datasets EV3-EV6).

313 Although it was not possible to visualise the four phenotypes (basal, proliferating,
314 differentiating and terminally differentiated) on UMAPs due to the cells from individual
315 tumours clustering by patient rather than by phenotype (Appendix Figure S9E), we again
316 observed *APOBEC3A* co-expression with markers of differentiation and components of the
317 RIPK4 pathway and *APOBEC3B* co-expression with markers of proliferation (Appendix Figure
318 S10A). When analysing each of the 10 tumour samples in the Southampton HNSCC dataset
319 individually, the same trends were observed in almost all cases (Appendix Figure S10B-K).
320 SCENIC analysis of the four SCC datasets implicated GRHL3 as a potential regulator of
321 *APOBEC3A* in squamous cell carcinoma as well as in healthy epithelia, with strong
322 correlations between GRHL3 activity and *APOBEC3A* expression evident across all studies
323 (Figure 5A, Dataset EV2). Having observed strong correlations between *APOBEC3A*
324 expression and *GRHL3* expression and predicted activity in single cell data from HNSCC and
325 ESCC, we next sought to determine whether GRHL3 may be involved in regulating
326 *APOBEC3A* expression cancer arising in other tissues. Since too few tumour cells in the
327 scRNA-seq datasets from lung, breast and urothelial cancer that we analysed (Table EV1)
328 expressed *APOBEC3A* to permit co-expression analysis, we examined *APOBEC3A* expression
329 (Fig EV2A), GRHL3 expression (Fig EV2B) and GRHL3 activity (Fig EV2C) in bulk RNA-seq data
330 from The Cancer Genome Atlas (TCGA). Squamous cell carcinomas (notably of the head
331 and neck (HNSC), cervix (CESC-SQ), oesophagus (ESCA-SQ), lung (LUSC), and bladder (BLCA)
332 were among the cancers with highest *APOBEC3A* expression (Figure EV2A), and these also
333 displayed the highest GRHL3 expression (Figure EV2B) and activity scores (as inferred from
334 the expression of genes in the GRHL3 regulon identified in our earlier SCENIC analysis, Fig
335 EV2C). As previously reported (Green *et al*, 2017), *APOBEC3A* was also highly expressed in
336 acute myeloid leukaemia (LAML) but *GRHL3* was not, which is consistent with our earlier

conclusion that *APOBEC3A* is differentially regulated in keratinocytes and myeloid cells. We also observed strong correlations between *APOBEC3A* and *GRHL3* expression (Fig EV2D), and *GRHL3* activity scores (Fig EV2E) in bulk RNA-seq data from SCCs, and from adenocarcinomas of the cervix (CESC-AD) and oesophagus (ESCA-AD). Other cancer types in which *APOBEC3A* has been implicated in somatic mutagenesis, such as breast cancer, lung adenocarcinoma and bladder cancer displayed weaker but nonetheless significant correlations between *APOBEC3A* expression and *GRHL3* expression and/or transcriptional activity, suggesting *GRHL3* may play a role in promoting *APOBEC3A* expression in these tumours. It is important to note the limitations of performing this analysis in bulk RNA-seq data, in which *APOBEC3A* expression in cell types (e.g. tumour-resident macrophages or infiltrating neutrophils) that do not express *GRHL3* will influence these correlations. Given the strong evidence from both single cell and bulk RNA-seq data that implicates *GRHL3* in *APOBEC3A* regulation in HNSCC, we next analysed RNA-seq data from the 34 HNSCC cell lines in the Cancer Cell Line Encyclopedia (CCLE) (Ghandi *et al*, 2019), observing correlations between *APOBEC3A*, *GRHL3* and differentiation-related genes, and inverse correlations between *APOBEC3A* and proliferation markers, *MKI67*, *MCM7* and *TOP2A* (Figure EV3A). Among those cell lines profiled by the CCLE, *APOBEC3A* and *GRHL3* mRNA levels were highest in BICR6 and BICR22; lines derived from an SCC of the hypopharynx and from a lymph node metastasis from a tongue SCC respectively (Edington *et al*, 1995) (Figure EV3B). *APOBEC3A* and *GRHL3* mRNA levels were higher in sub-confluent cultures of both BICR6 and BICR22 than in NIKS harvested under the same conditions (Appendix Figure S11) and we observed a significant reduction in *APOBEC3A* expression upon *GRHL3* knockdown in both cell lines (Figure 5B).

361 To gain further insight into the heterogeneity of *APOBEC3A* and *APOBEC3B* expression in
 362 HNSCC, we next analysed spatial transcriptomics data obtained from tissue sections
 363 representing the same cases as those from which our scRNA-seq were derived. Consistent
 364 with what we observed in the scRNA-seq analysis, *APOBEC3A* was expressed in regions that
 365 displayed high predicted GRHL3 activity (the GRHL3 target genes that comprise the GRHL3
 366 module are listed in Table EV5) and expression of additional genes related to keratinocyte
 367 differentiation, while *APOBEC3B* was expressed in regions marked by high expression of
 368 proliferation markers (Figure 5C). Pathway analysis of genes co-expressed with *APOBEC3A*
 369 or *APOBEC3B* yielded similar results to those obtained from the scRNA-seq data but in
 370 addition to pathways associated with keratinocyte differentiation, the wound healing
 371 response (another process in which GRHL3 plays a critical role) was also overrepresented
 372 among those genes co-expressed with *APOBEC3A* (Table EV6, Appendix Figure S12). Since
 373 the Visium platform typically provides resolution of approximately 10 cells / spot depending
 374 on cell size and cellularity, we performed spot deconvolution, observing that the *APOBEC3A*
 375 reads from each spot were largely derived from epithelial (tumour) cells with expression
 376 also evident in monocytes and neutrophils, consistent with previous reports (Suspène *et al*,
 377 2011; Aynaud *et al*, 2012; Chen *et al*, 2006). *APOBEC3B* reads were largely derived from the
 378 tumour cells (Appendix Figure S13). A representative example tumour section (case HN485),
 379 displaying regions of *APOBEC3A* expression with high GRHL3 activity ('GRHL3 module',
 380 composed of SCENIC-predicted target genes including *ELF3*) is shown in Figure 5d. In the
 381 same section, distinct *MKI-67*-positive regions of the tumour show peak expression of
 382 *APOBEC3B*. Strong *CDKN2A* expression (the gene encoding p16^{INK4A}, a biomarker for HPV-
 383 positive HNSCC) is evident throughout most of the tumour cells. GRHL3 activity and
 384 *APOBEC3A* expression were frequently highest near to the tumour surface.

385

386 Analysis of APOBEC3 protein expression in tissue samples has been hampered by a lack of
387 suitable antibodies for detection by immunohistochemistry but we (M.A.C and R.S.H)
388 recently developed a monoclonal antibody that specifically detects APOBEC3A in formalin-
389 fixed, paraffin-embedded tissues (Naumann *et al*, 2023). Having confirmed specificity by
390 staining of paraffin-embedded blocks generated from PMA-treated wild-type control and
391 *APOBEC3A*-knockout (KO) NIKS (Figure S14), we conducted APOBEC3A
392 immunohistochemistry on a tissue microarray (TMA) representing 20 HNSCC cases (10
393 HPV+ve and 10 HPV-ve). As predicted from our scRNA-seq and spatial transcriptomics data,
394 some tumours were devoid of APOBEC3A, while others displayed abundant staining in more
395 differentiated tumour cells, including in those cells surrounding keratin pearls – a
396 distinguishing feature of well differentiated SCC (Figure EV4(I), left panel). Staining the same
397 TMA with an antibody that binds to APOBEC3A, APOBEC3B and APOBEC3G (Brown *et al*,
398 2019) revealed characteristic nuclear APOBEC3B expression in tumour cells (Figure EV4,
399 right panels). As expected, this was particularly evident in HPV-positive cases (Figure EV4 (II,
400 III), right panels), in which APOBEC3B is upregulated by the viral E6 and E7 proteins (Vieira
401 *et al*, 2014; Warren *et al*, 2015; Periyasamy *et al*, 2017; Mori *et al*, 2017). APOBEC3G is
402 known to be expressed in the cytoplasm of T-lymphocytes and was evident in resident
403 lymphocytes (e.g. Figure S12b(I) arrowheads). The pan-cellular staining of keratinizing cells
404 with the APOBEC3A/B/G antibody is consistent with the APOBEC3A-specific staining
405 (compare Figure EV4(I) boxed areas and EV4(III) insets between left and right panels). We
406 also stained three cases (HN485, Figure 5E), HN482 and HN494 (Appendix Figure S15), for
407 which we had also generated spatial transcriptomics data, observing good concordance
408 between the patterns of mRNA and protein positivity for both *APOBEC3A* and *APOBEC3B*

(compare Figure 5D and E and Appendix Figure S13A and B). Importantly, in addition to providing further validation of the specificity of our antibodies, these data confirm that our conclusions relating to *APOBEC3A* and *APOBEC3B* expression drawn from mRNA data (scRNA-seq, spatial transcriptomics) are valid at the protein level.

Finally, while *APOBEC3A* expression was largely confined to IVL^{+ve} / MKI67^{-ve} (non-cycling) tumour cells, the correlation between *APOBEC3A* and IVL expression was weaker in the SCC datasets than in the normal tonsil epithelial cells, and in the UMAPs from the Southampton HNSCC dataset, *APOBEC3A* expression was apparent in IVL^{-ve} cells, which also displayed high predicted GRHL3 activity (Figure 5A). This was most obvious in two tumours (HN489 and HN492; compare Figure 5A and Figure S9E), suggesting that under certain conditions, activation of GRHL3 may induce *APOBEC3A* in cycling tumour cells. Given the considerable evidence linking *APOBEC3A*-mediated mutagenesis to deamination of the lagging strand during DNA replication (Green *et al*, 2016; Haradhvala *et al*, 2016; Hoopes *et al*, 2016; Morganella *et al*, 2016; Seplyarskiy *et al*, 2016; Stewart *et al*, 2020), we used gene expression data to assign cells from our normal tonsil and HNSCC datasets to G0/G1, S, or G2/M phase of the cell cycle (Figure 5F inset) and compared *APOBEC3A* expression and GRHL3 activity in those cells predicted to be in S-phase. While as expected, the majority of S-phase cells did not express *APOBEC3A*, considering all S-phase cells in which *APOBEC3A* expression was detectable (more than zero reads) we observed a small minority that expressed considerably more *APOBEC3A* mRNA than was seen in S-phase cells from normal tonsil epithelium (Figure 5F; black dots on the boxplot represent cells that are statistical outliers with respect to the level of *APOBEC3A* found in normal tonsil). The S-phase tumour cells with high *APOBEC3A* expression were all designated a binary GRHL3 activity score of

'on', suggesting that GRHL3 can drive *APOBEC3A* expression in tumour cells undergoing DNA replication, potentially causing APOBEC3A-mediated mutagenesis. The fact that we only observed high *APOBEC3A* expression in a small minority of S-phase cells in our HNSCC samples is consistent with the proposed episodic nature of APOBEC-mediated mutagenesis, in which the chances of observing a mutagenic burst in the snapshot provided by a tumour biopsy are low (Petljak *et al*, 2019, 2022a, 2022b; Smith & Fenton, 2019).

Discussion

Our analysis of *APOBEC3A* and *APOBEC3B* gene expression in healthy and cancerous squamous epithelia provides new insight into how these genes are regulated and raises several questions that warrant further investigation. The low expression of *APOBEC3B* in normal epithelium and increased levels in tumours that we observed in scRNA-seq datasets is consistent with previous analyses of bulk tissue samples and breast cancer cell lines (Burns *et al*, 2013a), in which repressive E2F/RB complexes have been shown to silence expression in quiescent cells (Periyasamy *et al*, 2017; Roelofs *et al*, 2023, 2020). Loss of p53-mediated repression of *APOBEC3B* transcription, resulting either from *TP53* mutation (observed at high frequency in HPV-negative HNSCC and ESCC) or from HPV E6/E7 activity in HPV-positive HNSCC (Vieira *et al*, 2014; Periyasamy *et al*, 2017) is also likely an important driver of *APOBEC3B* expression seen in many of the SCC samples we analysed.

The high expression of *APOBEC3A* in tonsil and oesophageal epithelium could indicate a role in defence against one or more viruses with tropism for the upper aerodigestive tract. Wild-type adeno-associated virus (AAV, a target for APOBEC3A (Chen *et al*, 2006)) infects keratinocytes via binding to heparan sulphate proteoglycans and AAV genomic DNA has

457 been isolated from tonsils (Schnepp *et al*, 2005). *APOBEC3A* and *APOBEC3B* have both been
458 implicated in host responses to HPV infection (Wang *et al*, 2014; Vartanian *et al*, 2008;
459 Vieira *et al*, 2014; Warren *et al*, 2015) and although our data suggest that neither are
460 expressed in quiescent basal cells of the tonsil epithelium (the target cell for HPV infection),
461 *APOBEC3B* is expressed in those cells undergoing division in the parabasal layer, while
462 *APOBEC3A* is expressed in cells undergoing terminal differentiation; a pattern also evident in
463 an area of normal stratified epithelium at the margin of an HPV-associated oropharyngeal
464 SCC in which *APOBEC3A* and *APOBEC3B* were detected by RNA *in situ* hybridization (Kono *et*
465 *al*, 2020). Both genes are therefore expressed (at least in the absence of infection) under
466 cellular conditions in which different stages of the HPV productive life cycle occur: genome
467 maintenance following E6/E7-induced cell cycle entry in the basal / para-basal layer and
468 genome amplification in terminally differentiating cells (Doorbar *et al*, 2012). Whether this
469 pattern of APOBEC3 gene expression represents a host adaptation to papillomaviruses, or to
470 other pathogens that infect the upper-aerodigestive tract remains to be determined.
471 Alternatively, the expression of *APOBEC3B* in dividing keratinocytes and *APOBEC3A* during
472 terminal differentiation may reflect hitherto unidentified physiological roles related to these
473 processes. *APOBEC3B* is also expressed as breast cancer cell lines approach mitosis and its
474 knockdown slows proliferation, suggesting a role in cell cycle progression that might be
475 linked to its function as a transcriptional co-activator for the oestrogen receptor
476 (Periyasamy *et al*, 2015; Roelofs *et al*, 2023). Unlike in normal breast epithelium (Figure 1) or
477 in MCF10A, a cell line derived from normal mammary epithelium (Roelofs *et al*, 2023), we
478 observed sufficient *APOBEC3B* expression in our scRNA-seq data from normal tonsil
479 epithelium and from NIKS (Figure 3e) to observe a clear enrichment in G2/M-phase cells,
480 suggesting *APOBEC3B* may play a role in normal keratinocytes entering cell division.

APOBEC3B expression in G2/M-phase is not unique to epithelial cells either; it has also been documented in myeloma cells and in B-cells from healthy bone marrow (Hirabayashi *et al*, 2021). *APOBEC3A* induction during Ca^{2+} -induced keratinocyte differentiation has been linked to hypermutation of mitochondrial DNA (Wakae *et al*, 2018), although the functional significance of this remains unclear. More investigation of *APOBEC3A* and *APOBEC3B* function in epithelial cells is required but it is maybe not surprising that by restricting *APOBEC3A* expression to post-mitotic keratinocytes and *APOBEC3B* expression to the G2/M phase of proliferating cells, mechanisms have evolved to restrict these potentially dangerous deaminases to contexts in which DNA replication is not occurring.

The identification of GRHL3 as a transcription factor responsible for driving *APOBEC3A* expression in differentiating keratinocytes and in squamous cell carcinoma highlights the power of single cell transcriptomics to uncover gene regulatory networks. In this case using SCENIC (Aibar *et al*, 2017) we observed striking correlations between GRHL3 activity scores and *APOBEC3A* expression across multiple scRNA-seq datasets from healthy and cancerous epithelia and validated the prediction using RNA interference in cultured cells. GRHL3 is a key transcription factor in epidermal keratinocytes, required not only during differentiation but also in migration during developmental processes and in wound healing (Ting *et al*, 2005; Caddy *et al*, 2010; Hislop *et al*, 2008; Gordon *et al*, 2014; Yu *et al*, 2006, 2008). Given the extensive overlap between the molecular processes that are active during wound healing and cancer (MacCarthy-Morrogh & Martin, 2020), this latter function may be of particular relevance to driving *APOBEC3A* expression in tumour cells, including in those undergoing DNA replication and warrants further investigation.

While most studies have focused on its function in the epidermis, *GRHL3* and its murine orthologue, *Grhl3*, have been implicated as suppressors of squamous carcinogenesis in the mucosal epithelia of the oral cavity and oesophagus as well as in skin (Darido *et al*, 2011; Georgy *et al*, 2023). *GRHL3* loss-of-function mutations have not been reported in SCC but it is located at a locus (1p36.11) that is frequently deleted in HNSCC and it is also targeted by a micro-RNA (miR-21) that is over-expressed in HNSCC. Accordingly, *GRHL3* expression in SCCs was demonstrated to be significantly lower than in adjacent normal tissue (Georgy *et al*, 2015; Darido *et al*, 2011). Our scRNA-seq analysis of normal tonsil and HNSCC cases is in agreement with the above studies; we observed higher mean *APOBEC3A* expression in normal tonsil epithelial cells than in tumour cells from patient-matched HNSCC cases (Figure 1). Similarly, while spatial transcriptomics and immunohistochemistry of sections from these HNSCCs revealed widespread *APOBEC3B* expression (particularly in HPV +ve cases, as expected), *APOBEC3A* was not expressed in all cases and in those tumours where expression was observed, it was restricted to areas of high *GRHL3* activity (Figure 5). Repression of *APOBEC3B* expression by the E2F4/RB-containing DREAM (dimerization partner, RB-like, E2F and MuvB) complex has been reported (Periyasamy *et al*, 2017), which may explain its confinement to proliferating cells in healthy squamous epithelia. The absence of *APOBEC3A* in basal and terminally differentiated cells suggests it too is subject to transcriptional repression; another mode of regulation that if disrupted could enable bursts of mutagenic APOBEC activity in cancer cells.

These observations, together with our siRNA experiments in HNSCC cell lines, suggest that in SCC at least, *APOBEC3A* expression is confined to the minority of tumour cells in which *GRHL3* is expressed and active. If we consider that APOBEC activity is only likely to be

mutagenic in cycling cells (or in cells that have re-entered the cell cycle without repairing deaminated cytosines), the pool of tumour cells at risk of APOBEC3A-mediated mutagenesis is likely limited to those rare cells highlighted in Figure 5f, in which *APOBEC3A* expression coincides with DNA replication. It follows that if such *APOBEC3A*-expressing tumour cells were to acquire mutations that caused them to become more proliferative (as might be expected if the subclone were to expand to constitute a significant portion of the tumour) this would result in loss of *APOBEC3A* expression (and potentially an increase in *APOBEC3B* expression). This model could explain the somewhat puzzling observation that tumours with strong enrichment for mutational signatures (YpTp[C>T/C>G]pN) associated most strongly with APOBEC3A often express very low levels of *APOBEC3A*, while *APOBEC3B* expression is more closely correlated with enrichment for the APOBEC mutational signatures but appears to be responsible for generating a smaller fraction of these mutations(Chan *et al*, 2015; Jalili *et al*, 2020; Petljak *et al*, 2022a; Carpenter *et al*, 2023).

Finally, we note that activation of GRHL3 in keratinocytes plays a key role in resolving psoriatic lesions by suppressing inflammatory mediators and driving epidermal repair (Shi *et al*, 2021; Gordon *et al*, 2014). Our finding that GRHL3 regulates *APOBEC3A*, which was originally discovered as a protein (Phorbolin-1) that is highly upregulated in psoriatic lesions (Rasmussen & Celis, 1993; Madsen *et al*, 1999) finally provides a potential mechanistic explanation for this early observation that predated mapping of the *APOBEC3A* gene (Jarmuz *et al*, 2002) by almost a decade.

Methods

Ethics / patient samples

Patients undergoing biopsies of suspected primary Head and Neck cancers at University Hospitals Dorset (UHD) NHS Foundation Trust were consented to take part in a study; “Head and Neck cancer: molecular, cellular and immunological mechanisms”. This study is NIHR portfolio adopted (portfolio No. 8130) and has been approved by the National research ethics service South Central committee (reference No. 09/H0501/90). Tumour samples from ten oropharyngeal patients (Table EV1), as well as normal tissue samples from the contralateral tonsil for seven of the patients (collected at the time of diagnostic biopsy) were selected for single cell RNA sequencing. Informed consent was obtained from all subjects and the experiments conformed to the principles set out in the WMA Declaration of Helsinki and the Department of Health and Human Services Belmont Report. Sample number (17), including 10 tumour samples and 7 matched tumour-free contralateral tonsil controls, was dictated by sample availability and funding as opposed to statistical considerations.

Single cell suspension preparation

Upon receipt, tissue samples were washed once in Dulbecco’s modified eagle medium (Sigma #D5671) containing 10% Foetal Calf Serum, 1% Penicillin/streptomycin, 1% L- Glutamine, 1% Amphotericin, 1% Sodium pyruvate, and 12.5mM HEPES. Samples were chopped into 1-2mm size pieces prior to enzymatic digestion. The first stage of the enzymatic digestion was performed using LiberaseTM (Sigma #5401020001) at 100µg.mL⁻¹ and DNase-1 (Sigma #DN25) at 16 units.mL⁻¹ in cDMEM. The solution was sterile filtered using a 0.22µm syringe filter and the sample material was suspended in up to 5mL of cDMEM/Liberase solution. Samples were then sealed and placed in a benchtop shaker/incubator at 37°C and 150rpm for fifteen minutes and then removed. The tube was

577 left to stand until the undigested material had settled to the bottom then the upper 4 –
578 4.5mL was carefully transferred to a fresh tube, the Liberase fraction. For the second digest
579 (Col+) cDMEM containing collagenase-P (Sigma #11213857001) at 3 units.mL⁻¹, liberase at
580 100µg.mL⁻¹, dispase (Sigma #D4693) at 0.5 units.mL⁻¹, elastase (Sigma #E1250) at 400µg.mL⁻¹,
581 trypsin (Sigma #T4799) at a final concentration of 0.25%, and DNase-1 (16 units.mL⁻¹) was
582 added to the remaining material through a 0.22µm sterile syringe filter. The Col+ digest was
583 returned to the incubator (37°C / 150rpm) for up to a maximum of 45 minutes (or until
584 digestion is complete) with trituration performed using a 5mL graduated pipette every 15
585 minutes. After 45 minutes the Col+ fraction was removed from the incubator and any
586 remaining undigested pieces were allowed to settle at the bottom of the tube; the
587 supernatant was then transferred to a fresh sterile tube. Any remaining tissue was set aside.
588
589 The post digestion process was the same for both the Liberase and Col+ fractions. Complete
590 DMEM, up to 10 mL, was added to each fraction and both cell suspensions were pelleted at
591 350rcf for 5 minutes. Supernatant was removed and RBC lysis buffer (Biolegend #420301)
592 used to remove erythrocytes for 10 minutes at 4°C. The samples were then washed in PBS
593 and suspended in residual volume and then held at 4°C until the Col+ fraction was prepared.
594 Cell pellets were suspended in PBS containing 2% BSA-Fraction V (Scientific Lab Supplies
595 #10735108001) and passed through a pre-wetted 40µm filter. Both samples were then
596 counted and viability assessed by Trypan blue exclusion. A final visual check of sample
597 quality was also performed to ensure there were no large clumps of cells nor debris from
598 the digestion. Finally the two fractions were used to make a 100µL suspension of 100,000
599 cells of which 10,000 were from the liberase fraction and 90,000 from the Col+ fraction, and

2% BSA in PBS was used as the diluent. This cell suspension was then run immediately on a Chromium Controller (10X Genomics).

Fluorescence-activated cell sorting

Flow cytometry to determine the proportions of cell types in the disaggregated samples was carried out using a FACSCanto II (BD Biosciences). Cell viability was assessed using Zombie Violet™ (Biolegend #423114). The following antibodies were purchased from Biolegend: EpCAM (#369806), CD90 (#328114), CD45 (#368508), CD31 (#303118), CD3 (#300426). A minimum of 20,000 events were acquired for each case. Gating was applied to exclude debris, dead cells, doublets and the immune compartment (CD45+ and/or CD3+) before enumerating the numbers of endothelial, epithelial, and CD90 positive fibroblasts in the sample.

Single cell RNA sequencing

Five thousand single cells from each sample were captured on a Chromium Controller™ (10X Genomics) system using Illumina single cell 3' gene expression and library preparation kits (V3.1 #1000269). Sample capture, sample indexing, and library preparation were carried out strictly according to manufacturer's instructions. Size distribution, quality control, and quantification of the libraries was assessed using High Sensitivity DNA chips (Agilent Technologies #5067-4626) and KAPA library quantification qPCR kit (Roche #07960140001). Prepared libraries were pooled and sent to Oxford Genomics (UK) for 150-base pair, paired-end sequencing on a Novaseq6000™.

Sequence alignment and annotation

624 Cell Ranger (10x Genomics) pipelines (mkfastq, count) were used to align reads, filter, count
625 barcodes and UMIs (unique molecular identifiers) and generate feature-barcode matrices.
626 FASTQ files were aligned to the Human reference genome (GRCh38–2020-A) which had the
627 HPV genome concatenated to both FASTA and GTF reference files. HPV reference sequences
628 were downloaded from PaVE: The Papillomavirus Episteme (<https://pave.niaid.nih.gov>). The
629 HPV-16 reference sequence (NC_001526) was used in the first instance and in cases
630 requiring further identification of the HPV subtype references including HPV-33
631 (OQ_672679) and HPV-18 (NC_001357) were also created. In all cases the individual HPV
632 ORFs were identified in the FASTA and GTF files to allow identification during alignment.

633

634 *Pre-processing of scRNA-seq data*

635 For each sample, raw gene expression matrices were integrated into one dataset using
636 Seurat package (v4.0.1). The resulting feature-barcode matrix from the cell ranger pipeline
637 was transformed into a Seurat object with patient metadata. Cells with less than 200
638 expressed genes were removed. Genes expressed in less than 3 cells were also filtered out.
639 Further low-quality cells were removed based on mitochondrial gene percentage with the
640 threshold for calculated as the median + 3*median absolute deviation. Cells above the
641 threshold were removed ensuring high quality cells remained.

642

643 *Normalisation and integration*

644 After quality control steps, the data was normalised to adjust for differences in sequencing
645 depth between samples. SCTransform was chosen to normalise and variance stabilize the
646 count data¹⁰⁹. Reciprocal PCA ('RPCA') Seurat integration workflows were utilised for
647 integration. The Seurat object was first split by patient into a list of 10 smaller objects, in

which each dataset was normalised by `sctransform` individually. 3000 features were selected via `'SelectIntegrationFeatures'` function. `'PrepSCTIntegration'` was run prior to anchor identification to ensure `sctransform` residuals from the 3000 features identified (by `SelectIntegrationFeatures`) were present. Anchors, used to integrate objects, were found between datasets using `FindIntegrationAnchors`, with the `normalization.method` set to `'SCT'` and `reduction` set to `'rpca'` (all other parameters were default). Finally, `IntegrateData` was run, again specifying `'SCT'` as `normalization.method`. This integration pipeline was run using IRIDIS High Performance Computing Facility (University of Southampton).

Dimensionality reduction, visualisation, and clustering

Principal component analysis (PCA) was used to reduce the dimensionality of the datasets. Principal components were assessed by JackStraw and elbow plots to select an appropriate number of dimensions to be used downstream. Dimensions 1:30 were selected in the following steps. Clustering was performed in Seurat, which constructs a k-nearest neighbours graph and refines this using the shared local neighbourhood overlap between cells (`'FindNeighbours'`; `'FindClusters'`). RunUMAP command was used to visualise the data in a UMAP (Uniform, Manifold, Approximation and Projection) plot.

Identification of marker genes and cell type identification

After clustering and UMAP projection, broad cell populations were identified based on expression of known marker genes e.g., PTPRC/CD45+ immune cells, LUM+ Fibroblasts, RGS5+ Mural cells, PECAM1/CD31+ endothelial cells. Epithelial cell clusters were identified based on the expression of EPCAM, SFN and cytokeratin genes (e.g., KRT14, KRT17, KRT6A, KRT5, KRT19) – with absence of expression of other cell-type markers. Epithelial cell clusters

were then subset into a separate object, with new variable features found by re-running
sctransform, PCA and clustering, whereby any clusters suggestive of doublets were removed
based on the expression of non-epithelial markers (identified using FindAllMarkers) and
examining UMI/feature number. The remaining epithelial cells were then used for further
analysis.

Unsupervised clustering of epithelial cells

A total of 22,595 epithelial cells were subset into tumour (19,314 cells) and normal (3,281
cells) Seurat objects. The normal epithelial cells underwent further quality control, 658 cells
were removed as suspected doublets due to high expression of immune cell and fibroblast
related genes. The remaining 2,649 cells were clustered using the first seven principal
components with a resolution of 0.2, and a k parameter of 30. Cell subtypes were identified
using known gene markers for epithelial and keratinocyte cell states, and *a priori*
knowledge. The density of *APOBEC3A* and *APOBEC3B* expression was visualised on UMAPs
using the Nebulosa R package (v1.9.0). R package inferCNV (v1.3.3) was used to identify
malignant and non-malignant cells. The epithelial cells from our matched normal tonsil
samples (grouped by differentiation status: basal; proliferating; differentiating and
terminally differentiated) were used as reference cells, and the infercnv::run function was
used with a cutoff of 0.1 and HMM=FALSE, and clustered by patient (Appendix Figure S8A).
An inferCNV score (number of genes with inferred CNV / total number of genes) was
calculated for each cell. The higher the score, the more likely a cell was malignant. The
distribution of inferCNV scores was clearly bimodal, enabling us to set a threshold for
malignant cells at the lowest point between the two distributions (0.12, Appendix Fig S8B).
This resulted in 695 non-malignant cells that were removed from our analyses of gene

expression in tumour cells and 18,619 malignant cells that formed our tumour cell dataset. The tumour cells were clustered using the first 15 principal components with a resolution of 0.2 and k parameter of 60.

Gene co-expression

The COTAN R package (v2.0.1) was used to investigate the co-expression of gene pairs for scRNA-seq datasets. For both *APOBEC3A* and *APOBEC3B*, the top 100 genes with a positive correlation index were identified and used in pathway analysis using the enrichR package (v3.2) and GO biological processes gene sets. Relevant epithelial differentiation and proliferation markers were chosen and *APOBEC3A/APOBEC3B* co-expression values with selected genes were plot in heatmaps using R package pheatmap (v.1.0.12).

SCENIC analysis

Transcription factor (TF) analysis of scRNA-seq data was performed using pySCENIC (v0.12.1) (Kumar *et al*, 2021) and motif collection version mc9nr. TF activity AUC score for each cell was overlaid on UMAPs for visualisation and the score was correlated with *APOBEC3A* and *APOBEC3B* expression using Spearman correlation and corrected for multiple tests using Benjamini-Hochberg. Binary activity (on/off) of each TF was determined based on a threshold generated by pySCENIC and each cell was classified as on (1) or off (0). The *APOBEC3A* levels in 'GRHL3 on' and 'GRHL3 off' cells were compared using Wilcoxon rank sum test. Four groups of *APOBEC3A/GRHL3* expression were considered: *APOBEC3A*⁻/*GRHL3*⁻, *APOBEC3A*⁺/*GRHL3*⁻, *APOBEC3A*⁻/*GRHL3*⁺, and *APOBEC3A*⁺/*GRHL3*⁺. The number of cells in each group were counted and a comparison between the number of 'GRHL3 on' (*GRHL3*⁺) cells that were also *APOBEC3A*⁺ were compared with the number of 'GRHL3 off'

(*GRHL3*⁻) cells that were *APOBEC3A*⁺ using Fisher's exact test. The FindAllMarkers function in Seurat R package was used to perform the differential transcription factor activity analysis, using a threshold fold change of 1.1 and Benjamini-Hochberg adjusted P of 0.05.

GRHL3 binding motif analysis

Homer (v4.11) function findMotifsGenome with mismatches threshold set to 2 was used to identify the frequency of GRHL3 binding motifs in differentiating NHEK ChIP-seq for GRHL3 peaks. The three binding motifs searched for were based on previous literature: AACCGGTT (Boglev *et al*, 2011), AACCTGTT and AACAGGTT (Yu *et al*, 2006). The percentage of times each base was located at each position in the binding motif was calculated and visualised using R package motifStack (v1.44.1) and dependencies. GRHL3 and WDR5 ChIP-seq for differentiating and proliferating keratinocytes ChIP-seq data (bedfiles), and monocyte and keratinocyte H3K27Ac, H3K4Me1 and H3K4Me3 ChIP-seq data (BigWig files) was obtained from CistromeDB and visualised in the UCSC genome browser.

Airways single cell atlas analysis

Publicly available data for healthy human airways (HG38 version) was obtained from <https://doi.org/10.1164/rccm.201911-2199OC>. Only cells expressing *APOBEC3A* (623 cells), *APOBEC3B* (1,008), *GRHL3* (1,545), *ELF3* (45,597), *IVL* (113), *KRT10* (52,987), *MKI67* (730), and *TOP2A* (1,060) were considered for individual analysis. Proportions of each cell type that a gene was expressed in was calculated and visualised in stacked bar plots.

Spatial transcriptomic analysis

All steps leading up to sequencing (from the bench side) were performed per manufacturer recommendations on 6.5mm capture areas using the Visium V2 cytassist workflow. All the samples were run through the Spaceranger pipeline (v2.0.0) as per 10X Genomics/Visium guidelines.

Count matrices were loaded into Seurat. Samples were normalised using SCTransform function (using the variance-stabilizing transformation). To identify spot clusters across patients, samples were integrated using the Seurat v3 CCA anchor finding method (FindIntegrationAnchors and IntegrateData). The 3000 variable features selected for integration were then used for principal component analysis (PCA), followed by FindNeighbors and FindClusters for (shared) nearest-neighbor graph construction and cluster determination respectively. Uniform manifold approximation and projection (UMAP) algorithm (1:20 dimensions) was used to visualise the batch corrected integrated dataset. Resulting clusters were inspected, with poor quality clusters removed. The GRHL3 module score for each spot was calculated using AddModuleScore with 127 genes identified by SCENIC as potential target genes for GRHL3 binding in normal epithelium and HNSCC. Spatial feature expression plots were generated with the SpatialFeaturePlot function in Seurat.

Robust Cell Type Decomposition (RCTD) with spacexr 2.2.1111 in R was used to deconvolve Visium spots into cell types using the annotated scRNA-Seq HNSCC reference dataset. RCTD was ran with default parameters and doublet mode set to 'full' on each individual patient sample, with resulting deconvoluted normalised weights for each cell type obtained.

APOBEC3A expression in cancer cell lines

Expression data for 34 head and neck cancer cell lines from the Cancer Cell Line Encyclopaedia (CCLE) (Barretina *et al*, 2012) was obtained from the resource CellminerCDB (Luna *et al*, 2021) for differentiation and proliferation marker genes, *APOBEC3A*, and genes in the RIPK4 pathway. Spearman correlation coefficients were calculated pairwise for all genes.

TCGA RNA-seq analysis

Data were collected from the UCSC Xena functional genomics browser [<https://xenabrowser.net>]. Batch corrected gene expression data (RNAseq, log2(normalised value + 1)) for 11,060 patients (version 2016-12-29), and clinical data for 12,591 patients (version 2018-09-13) were downloaded for the TCGA pancancer (PANCAN) cohort (31 cancer types). Cervical (CESC) and oesophageal (ESCA) cancer cohorts were separated into squamous (CESC-SQ and ESCA-SQ) and adenocarcinoma (CESC-AD and ESCA-AD). *APOBEC3A* and *GRHL3* expression was visualised in boxplots made with R package ggplot2(v3.5.1) across all cancer types, sorting from highest median expression to the lowest. A GRHL3 signature was calculated for each sample by summing the means of the 127 genes predicted as being regulated by *GRHL3* in previously described SCENIC analysis. This score was visualised in boxplots for each cancer type.

Tissue microarrays

Tissue microarrays (TMAs) were constructed from paraffin-embedded HNSCC and normal oral mucosa (10 HPV+ve HNSCC, 10 HPV-ve HNSCC, 10 fibroepithelial polyps) using triplicate, randomly selected, 1-mm tumour cores (Aphelys Minicore 2, Mitogen,

Harpenden, UK). Automated immunostaining (DAKO/Agilent Autostainer) was performed in a CPA-accredited clinical cellular pathology department.

Immunohistochemistry

Staining of tissue microarrays and full-face sections was performed on a Dako link automated staining machine according to the manufacturer's instructions. The following antibodies were used: rabbit monoclonal anti-human APOBEC3A/B/G (Cell Signaling Technology, Cat#81001; 1:100 dilution with Dako FLEX TRS high pH retrieval); rabbit monoclonal anti-human APOBEC3A (UMN-13); 1:1000 dilution with Dako FLEX TRS high pH retrieval). Slides were scanned on an Olympus VS110 Digital Slide Scanner using a 20x magnification air objective. Staining and analysis of staining was performed blinded to the results of spatial transcriptomics profiling of adjacent sections.

Cell culture

Low-passage Normal immortalised keratinocytes (NIKS) and Normal primary human keratinocytes from pooled adult donors (Sigma C-12006) were cultured in FC medium (3:1 Ham's F12:DMEM, 5% foetal bovine serum (FBS), 10 ng/ml murine submaxillary gland EGF, 24 µg/ml adenine, 5 µg/ml insulin, 8.3 ng/ml cholera toxin, 0.4 µg/ml hydrocortisone, 1% penicillin/streptomycin) on a feeder layer of mitomycin C-treated mouse embryonic fibroblasts (3T3-J2). BICR6 and BICR22 cells were cultured in DMEM supplemented with 10% foetal bovine serum, 2 mM L-Glutamine, 0.4 µg/ml hydrocortisone and 1% penicillin/streptomycin. Cells were routinely checked and confirmed mycoplasma-negative by qPCR (MycoplasmaCheck, Eurofins Genomics) upon thawing and were subsequently used for experiments within 2-3 passages.

814

815 *qRT-PCR*

816 RNA purification was performed using the Monarch Total RNA Miniprep Kit (New England
817 Biolabs) and on-column DNase digestion. cDNA was synthesised from RNA using LunaScript®
818 Reverse Transcriptase (RT) SuperMix Kit (New England Biolabs). Gene-specific primers were
819 synthesised by IDT and are shown in Table 1. The qRT-PCR primers for *APOBEC3A*,
820 *APOBEC3B* and TATA binding protein (*TBP*) were published previously (Refsland *et al*, 2010)
821 and the remaining qRT-PCR primers were designed using OriGene's qPCR primer design tool
822 (<https://www.origene.com>). All real-time PCR reactions were performed using duplicate
823 technical repeats on a QuantStudio Real-Time PCR system (Applied Biosystems) with
824 amplification using PowerUp™ SYBR™ Green Master Mix for qPCR (Applied Biosystems). The
825 thermal cycling conditions were at 50°C for 2 min followed by an initial denaturation step at
826 95°C for 10 min, 40 cycles at 95°C for 15s and 60°C for 1 min, followed by 95°C for 1 min,
827 60°C for 1 min and 95°C for 1s. Standard curves for *APOBEC3A* and *APOBEC3B* were derived
828 using plasmids pRH3097-A3A (R.S.H lab) and pCMV4-APOBEC3B (a kind gift from Prof Mike
829 Malim, Kings College London, UK) respectively. Standards for all other qRT-PCR target genes
830 were constructed by cloning PCR amplicons generated from a NIKS cDNA library into pCR™
831 Blunt II-TOPO™ using the Zero Blunt™ TOPO™ PCR cloning kit (Thermo Fisher) as per the
832 manufacturer's instructions. PCR was conducted using the KAPA HiFi 2X MasterMix (Roche)
833 according to the manufacturer's instructions with 10 ng input cDNA and for all target genes
834 except *TBP* (for which additional primers are listed in Table 1), amplicons were generated
835 using the qRT-PCR primers. All plasmids are available from the authors upon request.

836

837 *siRNA transfections*

838 Silencer Select small interfering RNAs (siRNA) were purchased from ThermoFisher Scientific
839 (Negative control (NC#1) Cat No 4390843; GRHL3 (#1) Cat No s33753; GRHL3 (#2) Cat No
840 s33754). NIKS were plated in 6-well plates at a density of 2×10^5 cells / well and BICR6,
841 BICR22 at 1.5×10^5 cells / well, with 1×10^5 feeder cells / well and were transfected with 2
842 nM of siRNA using 2 μ L of Lipofectamine RNAiMAX (ThermoFisher Scientific) per well
843 according to the manufacturer's instructions (reverse transfection method). Transfection
844 complexes were removed after 24h, followed by (NIKS) 48h recovery period and 24h
845 treatment with 100 nM afatinib (Fisher Scientific #16463748) or removal of EGF and insulin
846 and reduction to 0.5% FBS for 48h to induce differentiation, or 3h treatment with 100
847 ng/ml PMA (Stem Cell Technologies #74042). BICR6, BICR22 cells were allowed to recover
848 for 42h post-transfection with a media change 18hr prior to cell collection.

849

850 *APOBEC3A KO NIKS*

851 *APOBEC3A* knockout NIKS clones were generated by using CRISPR-Cas9 to insert the
852 sequence tagttagttag (to terminate translation in all three reading frames), followed by the
853 bovine polyadenylation signal (bpA) at the end of exon 1, to generate an allele in which an
854 mRNA encoding only the first 7 amino acids of *APOBEC3A* is produced (the gene targeting
855 strategy is summarized in Appendix Figure S14A). Following the split nickase CRISPR method
856 for increased specificity (Cong *et al*, 2013), single guide (sg)RNAs were designed by entering
857 a 200 base-pair genomic sequence surrounding the *APOBEC3A* start codon into
858 <http://crispr.mit.edu/>. Oligonucleotides (Integrated DNA Technologies) encoding the
859 sgRNAs (Table 1) were annealed and cloned into pX335-U6-Chimeric_BB-CBh-
860 hSpCas9n(D10A), a gift from Feng Zhang (Addgene plasmid # 42335;
861 <http://n2t.net/addgene:42335>; RRID:Addgene_42335) using restriction enzyme Bbs I (NEB

862 as per the Zhang lab protocol (<https://www.addgene.org/crispr/zhang/>). A targeting
863 construct was generated using NEBuilder[®] HiFi DNA assembly to combine 1kb 5' and 3'
864 homology arms, the translation/transcription terminator sequence and a PGK-Puro-ΔTK
865 cassette (Chen & Bradley, 2000) flanked by FRT sites into a pBluescript plasmid backbone
866 (Appendix Figure S15A). The 5' homology arm contained point mutations at the CRISPR
867 target site to prevent re-cutting following successful recombination into the locus. 5' and 3'
868 homology arms were synthesized as g-blocks (Integrated DNA Technologies) and the
869 pBluescript backbone and FRT-Puro-ΔTK-FRT cassette (a kind gift from Dr Su Kit Chew) were
870 amplified by HiFi PCR using primers containing adapters for NEBuilder assembly. The
871 targeting construct was verified by Sanger sequencing and co-transfected into NIKS,
872 together with pX335 constructs containing the left and right sgRNAs using Eugene HD
873 transfection reagent (Promega), as per the manufacturer's recommendations. Transfected
874 NIKS were selected using puromycin (0.75 μg/ml) for 48 hours and following PCR genotyping
875 to detect successful targeting, single cell clones were generated by plating NIKS at limiting
876 dilution in 96 well plates, with each well containing 1x10³ mitomycin C-treated 3T3-J2
877 feeder cells. Feeder cells were replenished weekly as clones were expanded. Clones were
878 screened by PCR genotyping to identify homozygous knockouts and transfected with GFP-
879 Flippase (generated by cloning mouse codon-optimized Flippase (Flpo), a gift from Philippe
880 Soriano (Addgene plasmid # 13792; <http://n2t.net/addgene:13792>; RRID:Addgene_13792)
881 into pEGFP-N1 (Clontech)). Transfected cells were isolated by Fluorescence Activated Cell
882 Sorting and PCR genotyping was conducted to confirm removal of the FRT-flanked PGK-
883 Puro-ΔTK cassette. Loss of *APOBEC3A* expression and retention of *APOBEC3B*, *APOBEC3C*
884 and *APOBEC3F* expression in knockout clones (C5, F6, and G6) was confirmed by reverse
885 transcriptase PCR of PMA-stimulated NIKS (100 ng/ml / 24h) using the qRT-PCR primers

listed in Table 1 (Appendix Figure S15B). *APOBEC3D*, *APOBEC3G* and *APOBEC3H* were undetectable in wild-type or *APOBEC3A* KO NIKS by endpoint RT-PCR. To test the specificity of anti-*APOBEC3A* clone UMN-13 in immunohistochemistry, formalin-fixed, paraffin-embedded cell blocks were made by embedding wild-type and *APOBEC3A* KO (clone C5) NIKS cell pellets in agarose following 24h treatment with 100 ng/ml PMA).

DDOST RNA editing assay

DDOST editing at C558 was measured as described previously (Oh & Buisson, 2022) using 250 ng input RNA for cDNA synthesis. Digital PCR was conducted using the Absolute-Q instrument (ThermoFisher), with 1 uL of 1:4-diluted cDNA.

Statistical Analysis

Statistical analysis was performed using GraphPad Prism for qRT-PCR and digital PCR experiments and R (version 4.2.0) for single cell RNA seq analysis. All statistical tests are stated in the figure legends and/or related Methods sections. All statistical tests were two-tailed unless otherwise stated.

Data and Materials Availability

scRNA-seq data for epithelial cells from the Southampton dataset from 10 HNSCC cases and 7 matched healthy tonsil samples) are available here: <https://zenodo.org/doi/10.5281/zenodo.13742281>. Validation/external scRNA-seq datasets are available for healthy lung and oesophagus (Madisson *et al*, 2019) at Human Cell Atlas Data Coordination Platform and NCBI BIOPROJECT accession code PRJEB31843, and the following at the Gene Expression Omnibus (GEO): breast (GSE176078) (Wu *et al*, 2021);

healthy skin (GSE130973) (Solé-Boldo *et al*, 2020); bladder squamous cell carcinoma (GSE190888) (Luo *et al*, 2022); head and neck squamous cell carcinoma (GSE16469082 and GSE18222781); lung carcinoma (GSE131907, GSE136246, GSE148071, GSE153935, GSE127465, GSE119911) (Prazanowska & Lim, 2023) collected at <https://doi.org/10.6084/m9.figshare.c.6222221.v3>; oesophageal squamous cell carcinoma (GSE160269) (Zhang *et al*, 2021) Cancer cell line data were obtained at <https://discover.nci.nih.gov/rsconnect/cellminerfdb/> (accessed 31/07/2023). ChIP-seq data were obtained from the Cistrome Data Browser (<http://cistrome.org/db/#/>). *APOBEC3A* KO NIKS clones and the plasmids used to generate them are available from the authors upon request.

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Disclosure and Competing Interests

T.R.F. is an advisory board member of and holds stock options in APOBEC Discovery Ltd.

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Figure Legends

Figure 1: *APOBEC3A* and *APOBEC3B* expression in scRNA-seq datasets representing normal and tumour epithelial cells from tissues in which cancers that display prominent APOBEC mutational signatures arise. The number above each pie chart represents the total number of epithelial cells in each dataset. The references for each dataset are provided in Table EV2.

Figure 2: *APOBEC3A* and *APOBEC3B* are expressed in different subsets of tonsillar epithelial cells

A) UMAP projection of 22,595 epithelial cells from oropharyngeal squamous cell carcinoma samples (n = 10; 18,619 malignant cells (red), 695 non-malignant cells (purple)), and matched normal tonsil (n = 7; 3,281 cells (blue)).

B) GOBP terms enriched amongst the sets of 100 genes that were co-expressed with either *APOBEC3A* or *APOBEC3B* in the 2,649 (after QC) epithelial cells from normal tonsil. Terms ranked by P value calculated by EnrichR package (Fisher Exact test bias corrected using the z-score of the deviation from the expected rank).

1318 **C)** UMAP projection depicting four phenotypes (basal, proliferating, differentiating,
1319 terminally differentiated) displayed by the normal tonsillar epithelial cells in our dataset.
1320 **D)** Marker genes used to identify the four epithelial phenotypes represented in panel C.
1321 **E)** Violin plots of gene expression in individual tonsillar epithelial cells, and UMAP
1322 projections of the density of gene expression in the tonsillar epithelial subtypes. (**** = $P <$
1323 0.0001, Wilcoxon's Rank Sum Test; Basal, $n = 1,047$; Proliferating, $n = 353$; Differentiating, n
1324 $= 1,091$; Terminally Differentiated, $n = 158$).

1325

1326 **Figure 3: Keratinocyte cell cycle exit and initiation of differentiation is marked by a switch**
1327 **from *APOBEC3B* to *APOBEC3A* expression.**

1328 **A)** qRT-PCR-based gene expression measurements ($n = 3$) for *APOBEC3A* ($P = 0.0002$), *KRT10*
1329 ($P = 0.0002$), *IVL* ($P < 0.0001$), *APOBEC3B* ($P = 0.0001$), *MKI67* ($P < 0.0001$) and *MCM7* ($P =$
1330 0.0033) in proliferating NIKS (Async) or following 48 hours of growth factor deprivation
1331 (Starved).

1332 **B)** representative cell cycle profiles of Async and starved NIKS measured by PI staining and
1333 flow cytometry.

1334 **C)** qRT-PCR-based gene expression measurements ($n = 3$) for *APOBEC3A* ($P = 0.0036$), *KRT10*
1335 ($P = 0.0004$), *IVL* ($P = 0.0007$), *APOBEC3B* ($P = 0.9445$), *MKI67* ($P = 0.0032$) and *MCM7* ($P =$
1336 0.0001) following 24 hours of vehicle control (DMSO) or 100 nM afatinib treatment (EGFRi).

1337 **D)** representative cell cycle profiles of DMSO and afatinib-treated NIKS measured by PI
1338 staining and flow cytometry.

1339 **E)** qRT-PCR-based gene expression measurements ($n = 3$) for *APOBEC3A* (adjusted P values
1340 versus day 3 measurement: day 5 = 0.9960; day 7 = 0.0009; day 9 < 0.0001), *KRT10*
1341 (adjusted P values versus day 3 measurement: day 5 = 0.9518; day 7 = 0.0005; day 9 $<$

0.0001), *IVL* (adjusted P values versus day 3 measurement: day 5 = 0.9983; day 7 = 0.0035; day 9 < 0.0001), *APOBEC3B* (adjusted P values versus day 3 measurement: day 5 < 0.0001; day 7 < 0.0001; day 9 < 0.0001), *MKI67* (adjusted P values versus day 3 measurement: day 5 = 0.0001; day 7 < 0.0001; day 9 < 0.0001) and *MCM7* (adjusted P values versus day 3 measurement: day 5 < 0.0001; day 7 < 0.0001; day 9 < 0.0001) in NIKS collected 3, 5, 7, or 9 days after plating.

F) representative cell cycle profiles of NIKS collected 3, 5, 7, or 9 days after plating measured by PI staining and flow cytometry.

G) qRT-PCR measurements of *APOBEC3A* expression in primary human epidermal keratinocytes (NHEK) growing in FC medium and treated for 24 hr with vehicle control (DMSO) or 100 nM afatinib (EGFRi, $P < 0.0001$) or following growth factor deprivation for 48 hr (Starved, $P = 0.0003$).

H) Percentage of DDOST transcripts that were C>U edited at c558 in asynchronous growing NIKS (Async) and following 48 hours of growth factor withdrawal (starved) measured by digital PCR assay ($n = 3$; $P < 0.0001$). Error bars = SEM. * = $P < 0.05$; ** = $P < 0.01$; *** = $P < 0.001$; **** = $P < 0.0001$. Pairwise comparisons were performed using unpaired two-tailed t-tests in (A), (C) and (H). Comparisons of mRNA levels on days 5, 7 and 9 to day 3 in (E), and of mRNA levels in starved and afatinib-treated cells to DMSO-treated cells in (G) were performed using one-way ANOVA with Dunnett's multiple comparisons test.

1361

Figure 4: Grainyhead-like transcription factor 3 is required for *APOBEC3A* expression during keratinocyte differentiation.

A) Heatmap showing those transcription factors (of the 363 with a SCENIC activity score in our scRNA-seq dataset from healthy tonsil epithelium) that were differentially active (fold

change > 1.1, adjusted $P < 0.05$, Wilcoxon Rank Sum test) between the clusters defined in Figure 2C (Bas. = basal; Pro. = proliferating; Diff. = differentiating; T.Diff. = terminally differentiated).

B) UMAPs showing GRHL3 transcription factor activity score from SCENIC (top) and *APOBEC3A* expression (bottom) in the Southampton scRNA-seq dataset from healthy tonsil epithelium. **C)** boxplot showing *APOBEC3A* expression stratified by SCENIC binary predictions of GRHL3 'off' or GRHL3 'on' (top; (**** = $P < 0.0001$, Wilcoxon's Rank Sum Test)) and histogram showing the number of cells in each of four groups: GRHL3 'off', no detectable *APOBEC3A* (A3A-/GRHL3-), $n = 1,160$; GRHL3 'on', no detectable *APOBEC3A* (A3A-/GRHL3+), $n = 480$; GRHL3 'off', *APOBEC3A* expressed (A3A+/GRHL3-), $n = 73$, and GRHL3 'on', *APOBEC3A* expressed (A3A+/GRHL3+), $n = 936$ (bottom). Top, middle and bottom line of the boxplot represent the upper quartile (Q3), median, and lower quartile (Q1) respectively. The maximum value represented by the top whisker represents the highest observed data point within $Q3 + (1.5 \times (Q3-Q1))$, and the minimum value represented by the bottom whisker represents the lowest situated point within $Q1 - (1.5 \times (Q3-Q1))$. The dashed red line represents the mean.

D) qRT-PCR-based expression measurements ($n = 3$) of *APOBEC3A*, *GRHL3*, *IVL* and *ELF3* in NIKS transfected with control (NC#1) or *GRHL3*-specific siRNAs as indicated. Adjusted P values for comparisons between NC#1 and *GRHL3* siRNA #1: *APOBEC3A* = 0.0004; *GRHL3* < 0.0001; *IVL* < 0.0001; *ELF3* = 0.0072. Adjusted P values for comparisons between NC#1 and *GRHL3* siRNA #2: *APOBEC3A* = 0.0012; *GRHL3* < 0.0001; *IVL* < 0.0001; *ELF3* = 0.0052. Cells were treated with 100 nM afatinib for 24 hours prior to harvesting to induce differentiation.

1388 **(E)** Percentage of DDOST transcripts that were C>U edited at c558 in in NIKS transfected
1389 with control (NC#1) or *GRHL3*-specific siRNAs as indicated (n = 3). Adjusted P values: NC#1
1390 vs *GRHL3* siRNA #1 = 0.0072; NC#1 vs *GRHL3* siRNA #2 = 0.0099.

1391 Gene expression (D) and DDOST editing (E) in *GRHL3* siRNA-transfected cells were compared
1392 with control siRNA-transfected cells using one-way ANOVA with Tukey's multiple
1393 comparisons test (error bars represent SEM; ** = P < 0.01, *** = P < 0.001 and **** = P <
1394 0.0001).

1395 **F)** ChIP-seq data for *GRHL3*, *WDR5*, H3K27Ac, H3K4Me1 and H3K4Me3 from keratinocytes
1396 and or monocytes and GeneHancer predicted regulatory regions (grey = enhancer, red =
1397 promoter) as indicated, spanning the *APOBEC3A* gene and a 33kb region upstream of the
1398 TSS (see main text for references to the datasets).

1399 **G)** Stacked barplot showing the proportion of each cell type in the single cell atlas of healthy
1400 human airways from Deprez et al that express each selected gene.

1401

1402 **Figure 5: GRHL3 regulates APOBEC3A expression in squamous cell carcinoma.**

1403 **A)** UMAPs heatmap showing gene expression of *APOBEC3A* and *IVL* and predicted activity of
1404 *GRHL3* in scRNA-seq data from four independent tumour cohorts (3 HNSCC and one ESCC).

1405 **B)** qRT-PCR-based gene expression measurements of *APOBEC3A* and *GRHL3* in sub-
1406 confluent BICR6 (top row) and BICR22 (bottom row) HNSCC cells transfected with control
1407 (NC#1) or *GRHL3*-specific siRNAs as indicated. Adjusted P values: NC#1 vs *GRHL3* siRNA #1
1408 (*APOBEC3A*: BICR6 < 0.0001; BICR22 = 0.0145; *GRHL3*: BICR6 < 0.0001; BICR22 < 0.0001);
1409 NC#1 vs *GRHL3* siRNA #2 (*APOBEC3A*: BICR6 < 0.0001; BICR22 = 0.0035; *GRHL3*: BICR6 <
1410 0.0001; BICR22 < 0.0001). Gene expression in *GRHL3* siRNA-transfected cells was compared
1411 with control siRNA-transfected cells using one-way ANOVA with Tukey's multiple

1412 comparisons test (n = 3; error bars represent SEM; **** = P < 0.0001; ** = P < 0.01 and * = P
1413 < 0.05).

1414 **C)** matrix showing the relationship between expression of the indicated genes in spatial
1415 transcriptomics data from the Southampton HNSCC cohort obtained using the Visium
1416 platform (10X Genomics).

1417 **D)** Images displaying expression levels (Visium spot intensities) of selected genes in HN485,
1418 an HPV+ve HNSCC case from the Southampton cohort.

1419 **E)** Immunohistochemistry with an antibody specific for APOBEC3A (left) and with an
1420 antibody that cross-reacts with APOBEC3A, APOBEC3B and APOBEC3G (right) in sections
1421 from the same tissue block from HN485 used for the Visium profiling displayed in part D.

1422 **F)** Boxplot showing expression of *APOBEC3A* in those cells predicted to be in S-phase in
1423 normal tonsil and HNSCC, stratified by binary GRHL3 activity score (on/off). Cells shown in
1424 black are outliers relative to the distribution of expression in the cells from healthy tonsil.

1425 Inset: UMAP showing the predicted cell cycle phase for each cell in the Southampton HNSCC
1426 scRNA-seq dataset. Top, middle and bottom line of the boxplot represent the upper quartile
1427 (Q3), median, and lower quartile (Q1) respectively. The maximum value represented by the
1428 top whisker represents the highest observed data point within $Q3 + (1.5 \times (Q3 - Q1))$, and the
1429 minimum value represented by the bottom whisker represents the lowest situated point
1430 within $Q1 - (1.5 \times (Q3 - Q1))$. Healthy GRHL3 'OFF', n = 19; Healthy GRHL3 'ON', n = 173;
1431 Tumour GRHL3 'OFF', n = 98; Tumour GRHL3 'ON', n = 620.

1432

1433 **Table 1: Primers used for qPCR, digital PCR, genotyping and/or plasmid construction.**

Gene	Sequence
APOBEC3A (Forward)	5'-GAGAAGGGACAAGCACATGG-3'
APOBEC3A	5'-TGGATCCATCAAGTGTCTGG-3'

(Reverse)	
APOBEC3B (Forward)	5'-GACCCTTTGGTCCTTCGAC-3'
APOBEC3B (Reverse)	5'-GCACAGCCCCAGGAGAAG-3'
KRT10 (Forward)	5'-CCTGCTTCAGATCGACAATGCC-3'
KRT10 (Reverse)	5'-ATCTCCAGGTCAGCCTTGGTCA-3'
IVL (Forward)	5'-GGTCCAAGACATTCAACCAGCC-3'
IVL (Reverse)	5'-TCTGGACACTGCGGGTGGTTAT-3'
MKI67 (Forward)	5'-GAAAGAGTGGCAACCTGCCTTC-3'
MKI67 (Reverse)	5'-GCACCAAGTTTTACTACATCTGCC-3'
MCM7 (Forward)	5'-GCCAAGTCTCAGCTCCTGTCAT-3'
MCM7 (Reverse)	5'-CCTCTAAGGTCAGTTCTCCACTC-3'
ELF3 (Forward)	5'-CATGACCTACGAGAAGCTGAGC-3'
ELF3 (Reverse)	5'-GACTCTGGAGAACCTCTTCCTC-3'
GRHL3 (Forward)	5'-ACTGTGGAGCACATTGAGGAGG-3'
GRHL3 (Reverse)	5'-CTGTGCTCAGACAGTTTACGCC-3'
TBP (Forward)	5'-TTGAGGAAGTTGCTGAGAAGAG-3'
TBP (Reverse)	5'-CAGATAGCAGCACGGTATGAG-3'
TBP standard (Forward)	5'-CACTCACAGACTCTCACAACCTG-3'
TBP standard (Reverse)	5'-GTCGTCTTCCTGAATCCCTTTAG-3'
DDOST (Forward)	5'- ACTGAGAACCTGCTGAAG-3'
DDOST (Reverse)	5'- AAGAGGATGGGATTTAGAGA-3'
DDOSTC558 Probe	5'-(HEX)-CAACCATCGTTGGGAAATC-(Q)-3'
DDOSTT558 Probe	5'-(FAM)-CCAACCATTGTTGGGAAATC-(Q)-3'
A3A N-term left sgRNA (sense)	5'- CACCGCTTGCGACTTGCTCAAGGCG-3'
A3A N-term left sgRNA (antisense)	5'-AAACCGCCTTGAGCAAGTCGCAAGC-3'
A3A N-term right sgRNA (sense)	5'-CACCGCACAGACCAGGAACCGAGAA-3'
A3A N-term right sgRNA (antisense)	5'-AAACTTCTCGGTTCTGCTGTGTC-3'
A3A deletion genotyping primer (Forward)	5'-TGAGCTCACACCAGAACCAC-3'
A3A deletion genotyping primer (Reverse)	5'-TAGAGCCCAGAGAAGGTCCC-3'

1434

1435 Expanded View Figure Legends

1436 **Figure EV1. *APOBEC3B* is predominantly co-expressed with proliferation markers *MKI67***
1437 **and *MCM7* in cycling basal and suprabasal cells of the healthy human airway.** Stacked
1438 barplot showing the proportion of each cell type in the single cell atlas of healthy human
1439 airways from Deprez et al that express each selected gene.

1440

1441 **Figure EV2. *APOBEC3A* and *GRHL3* expression by cancer type in TCGA bulk RNA-seq data.**

1442 **A)** Boxplot ranked from highest median (left) to lowest median (right) for *APOBEC3A* gene
1443 expression.

1444 **B)** Boxplot ranked from highest median (left) to lowest median (right) for *GRHL3* gene
1445 expression.

1446 **C)** Boxplot ranked from highest median (left) to lowest median (right) for GRHL3 signature
1447 score based on the mean expression of 127 GRHL3 target genes identified in scRNA-seq
1448 SCENIC analysis. Each dot represents an individual tumour sample.

1449 **D)** Spearman correlation coefficients for *APOBEC3A* and *GRHL3* expression in TCGA RNA-seq
1450 data.

1451 **E)** Spearman correlation coefficients for *APOBEC3A* expression and GRHL3 signature score in
1452 TCGA RNA-seq data.

1453 ESCA and CESC were stratified into squamous cell (SQ) and adeno- (AD) carcinomas.

1454 For all boxplots, the top, middle and bottom line of the boxplot represent the upper quartile
1455 (Q3), median, and lower quartile (Q1) respectively. The maximum value represented by the
1456 top whisker represents the highest observed data point within $Q3 + (1.5 \times (Q3 - Q1))$, and the
1457 minimum value represented by the bottom whisker represents the lowest situated point
1458 within $Q1 - (1.5 \times (Q3 - Q1))$.

1459

1460 **Figure EV3. *APOBEC3A* is positively correlated with differentiation marker genes and**
1461 **negatively correlated with proliferation marker genes in HNSCC cell lines.**

1462 **A)** Spearman's correlation of *APOBEC3A* expression with the expression of differentiation
1463 marker genes, proliferation marker genes, and genes of the RIPK4 pathway in 34 HNSCC cell

1464 lines from the CCLE. P values calculated by T-test: *** = $P < 0.0001$; ** = $P < 0.001$; * = $P <$
1465 0.05 ; . = $P < 0.1$.

1466 **B)** Log2 expression levels of *APOBEC3A* and *GRHL3* in the 34 individual HNSCC cell lines from
1467 the CCLE. Accompanies Figure 5.

1468

1469 **Figure EV4. Detection of APOBEC3A and APOBEC3B protein expression in HNSCC.**

1470 Representative images from an HNSCC tissue microarray stained with APOBEC3A-specific
1471 (left panels) or APOBEC3A/B/G-specific (right panels) antibodies. Accompanies Figure 5.

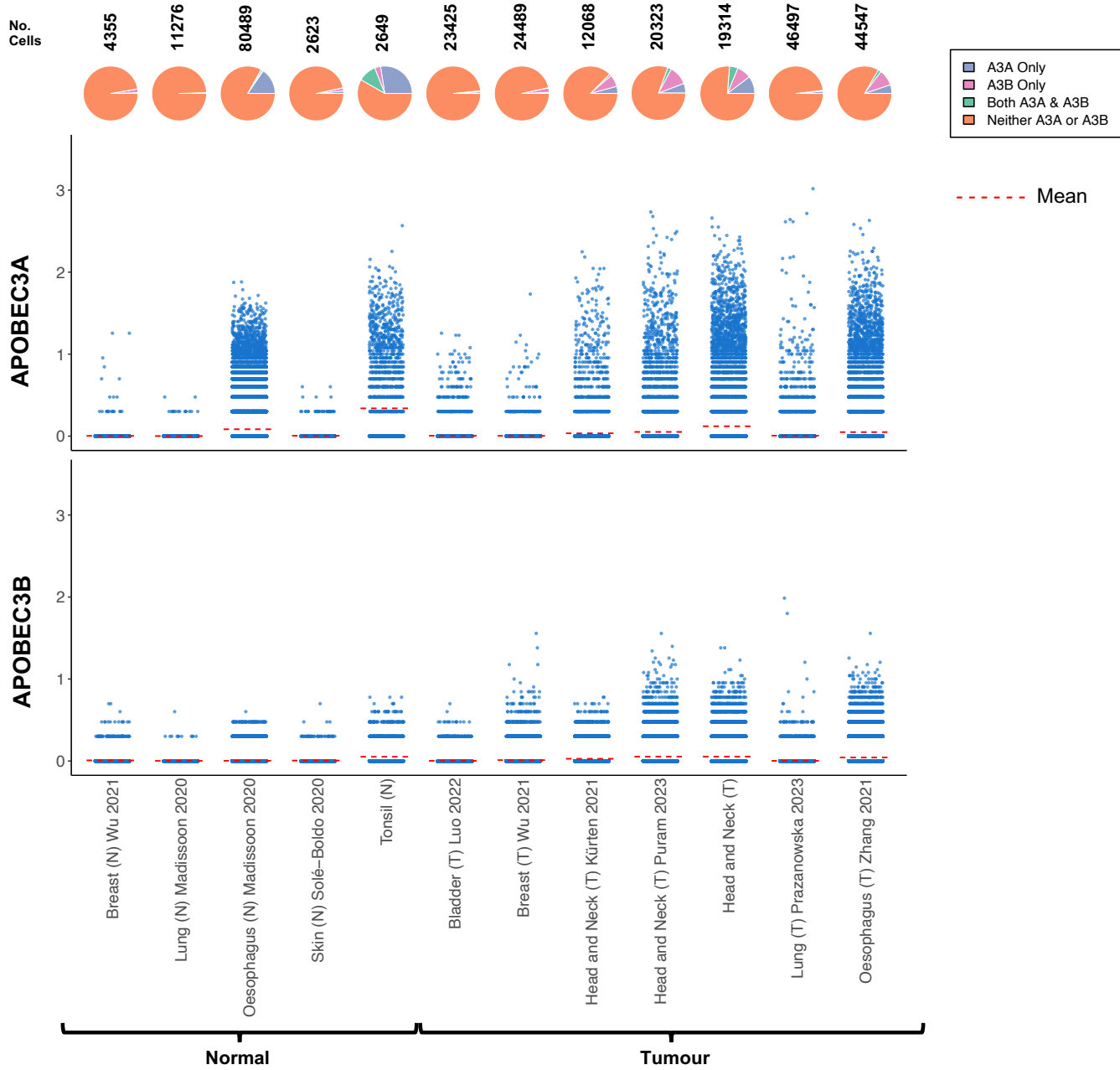
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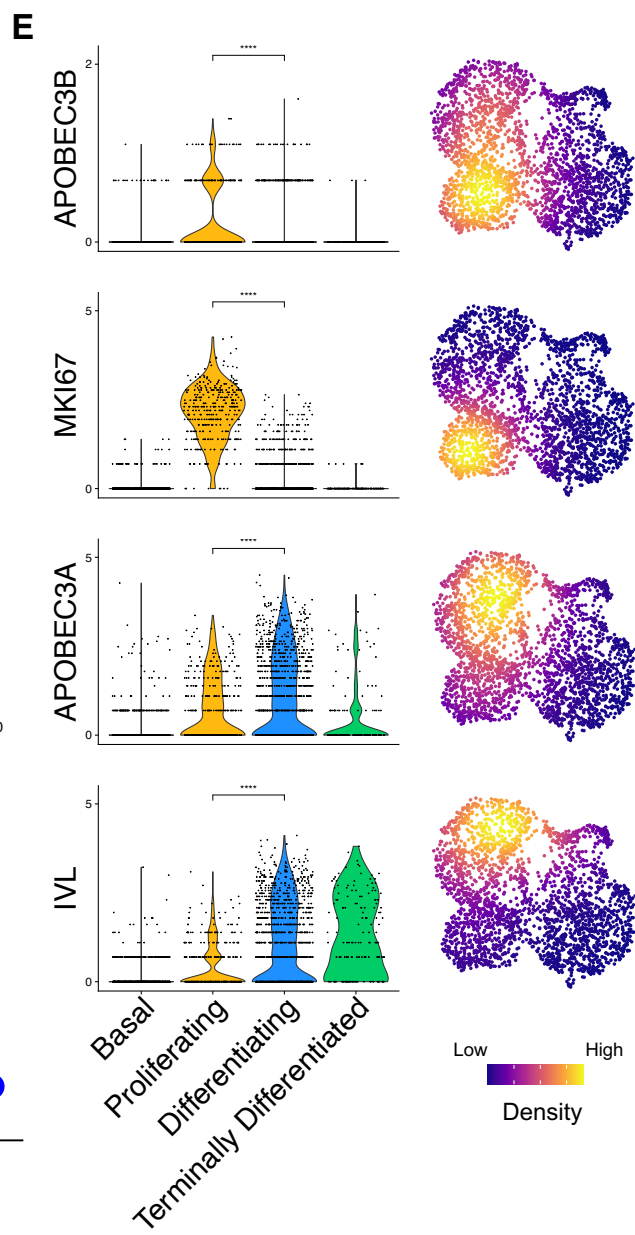
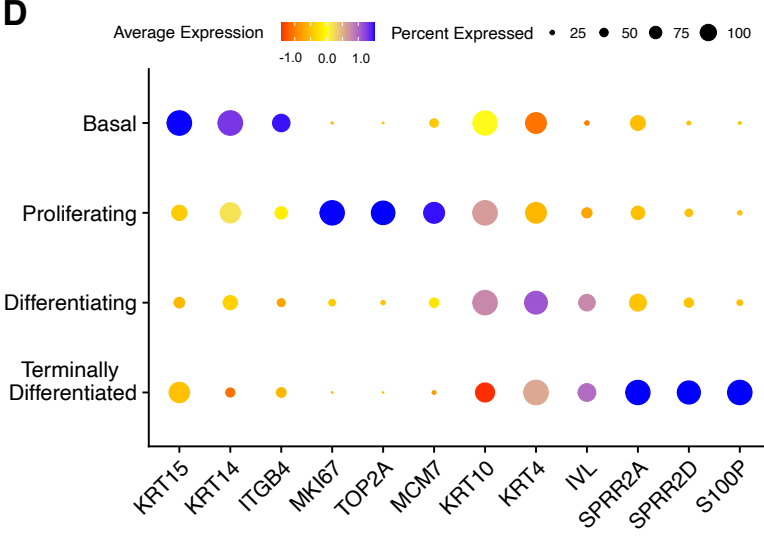
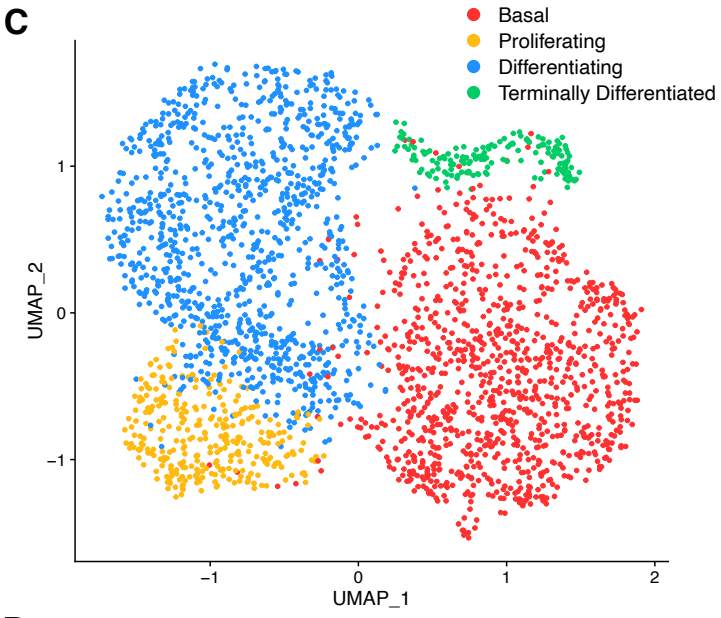
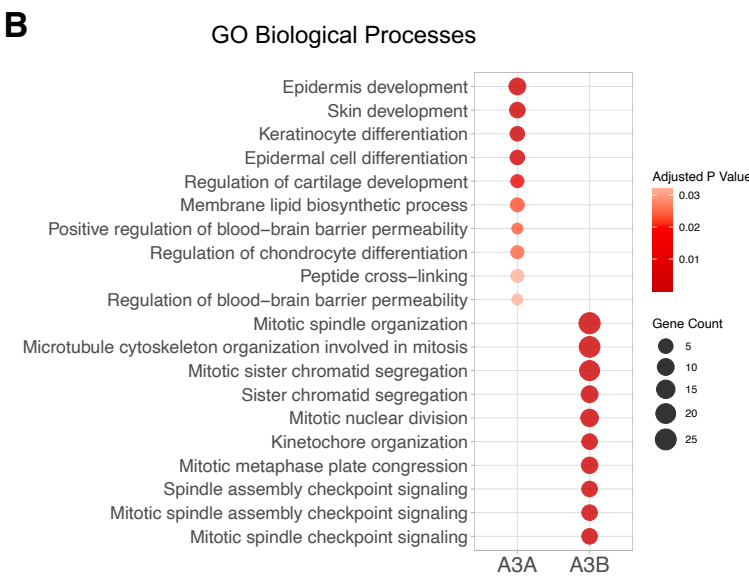
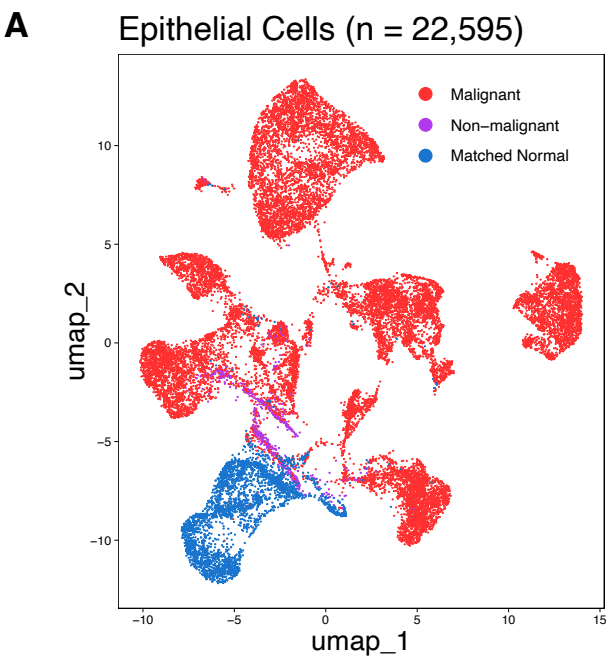
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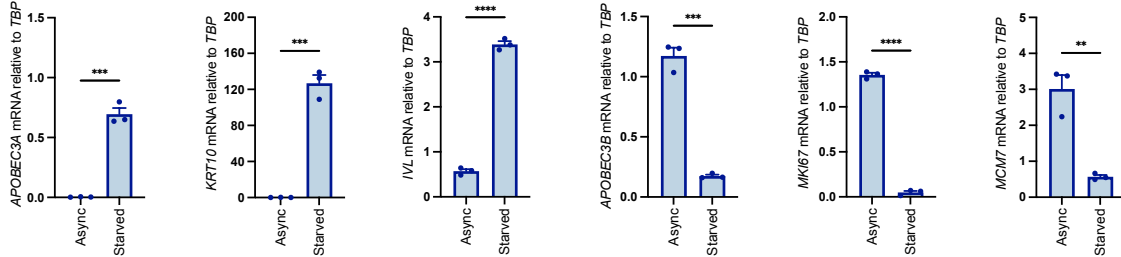
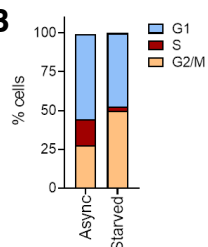
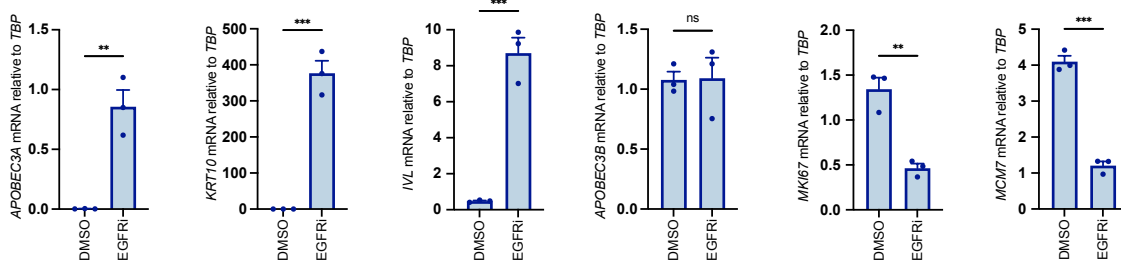
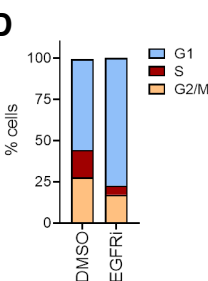
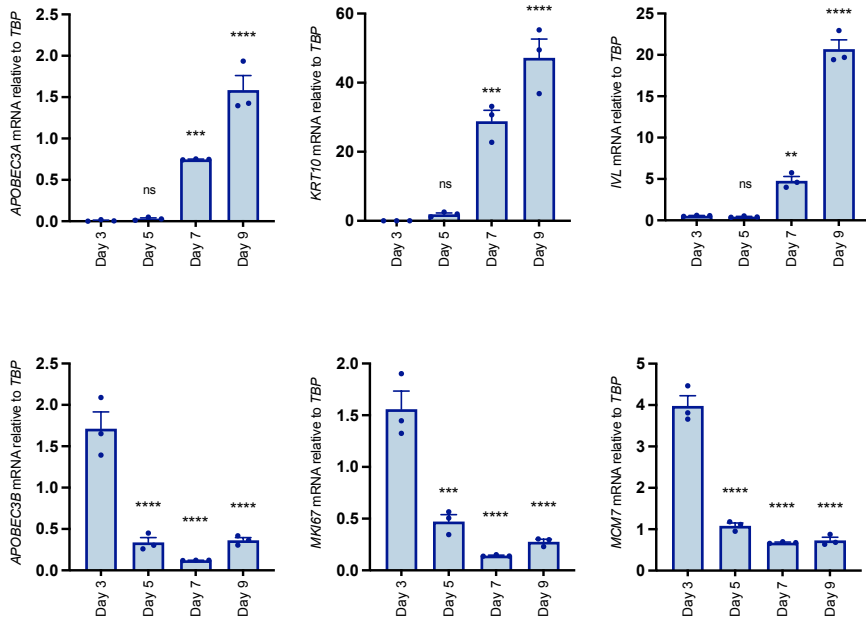
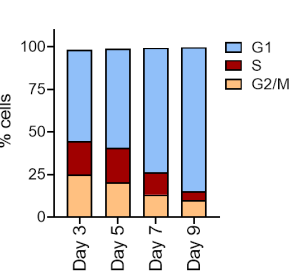
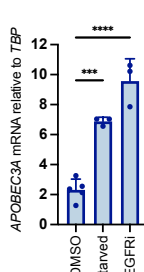
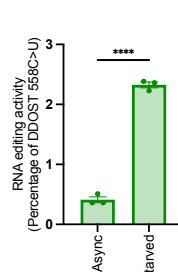
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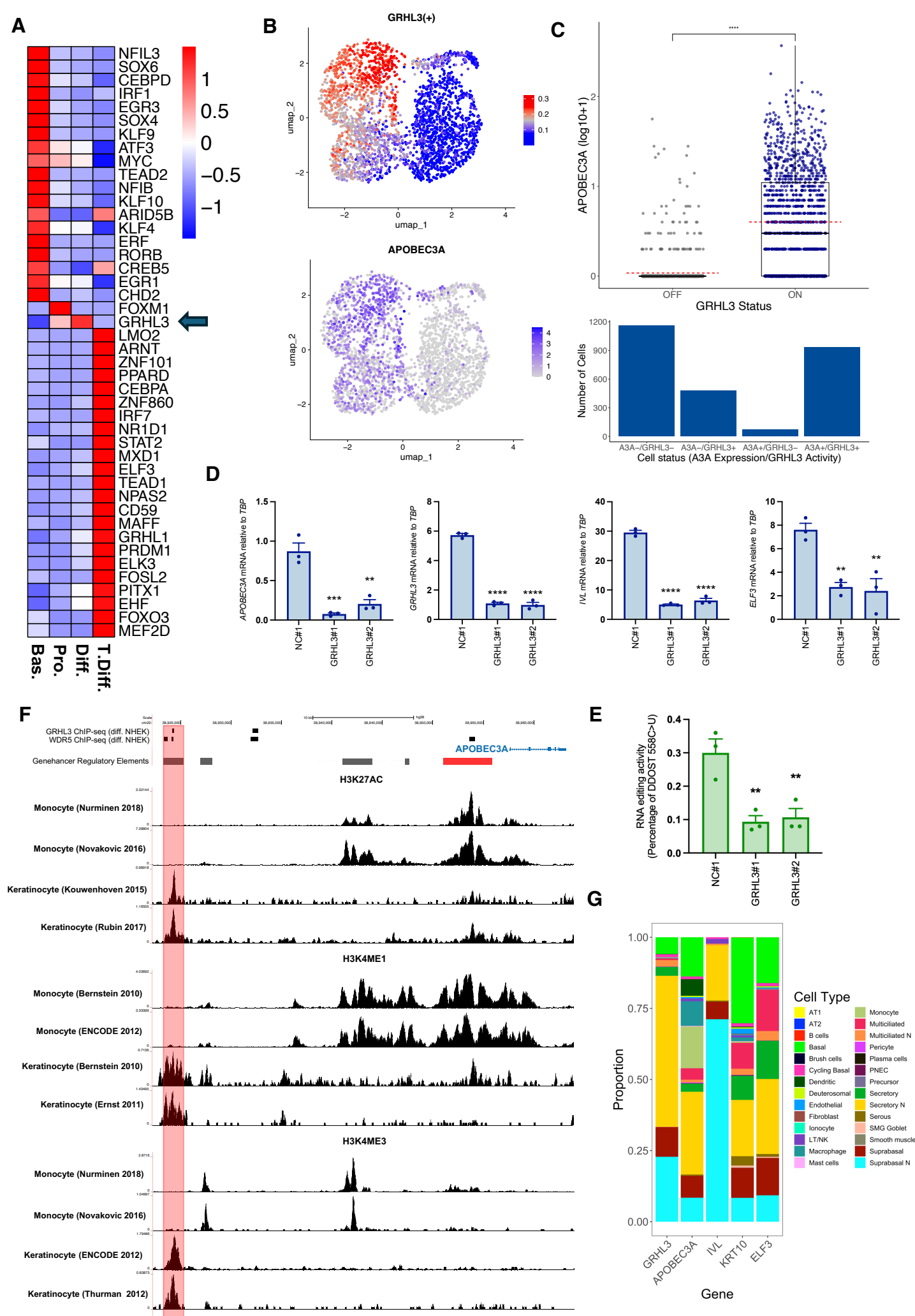
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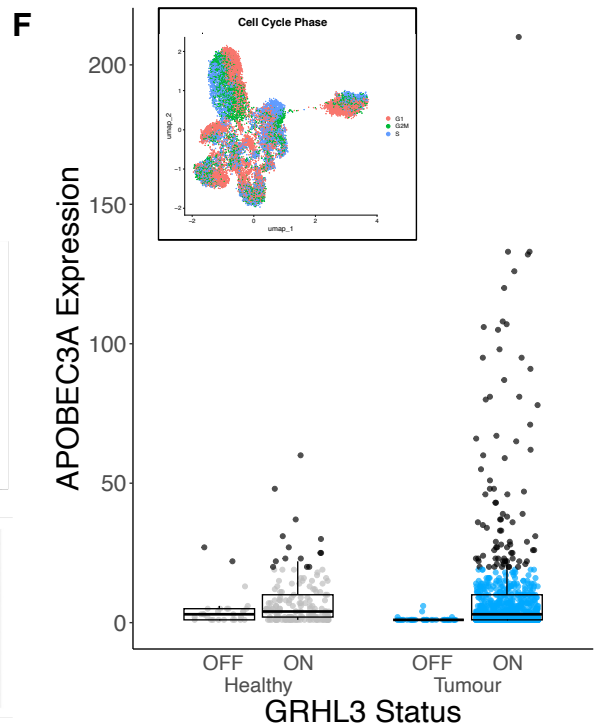
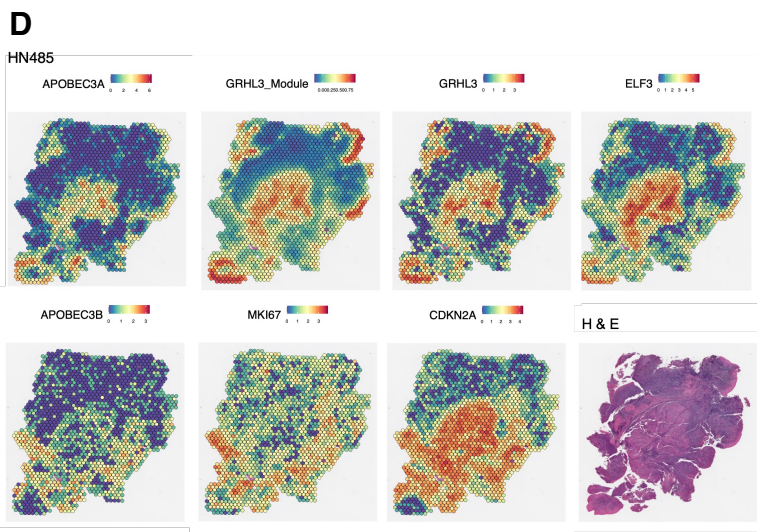
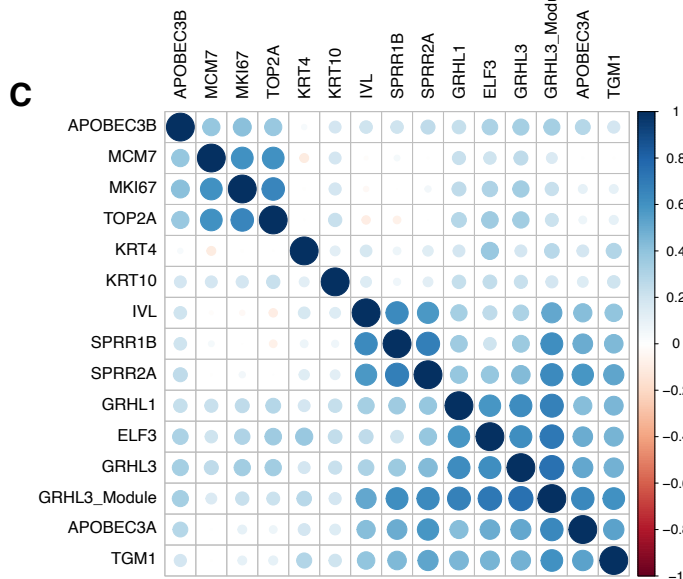
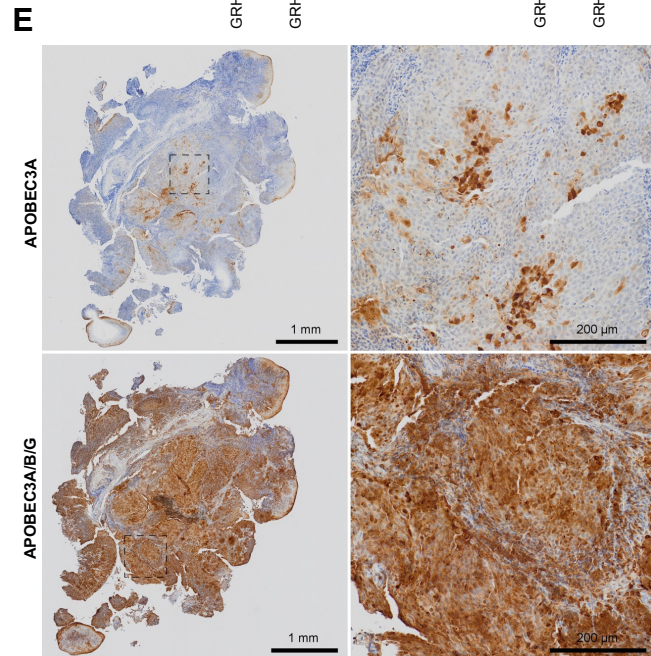
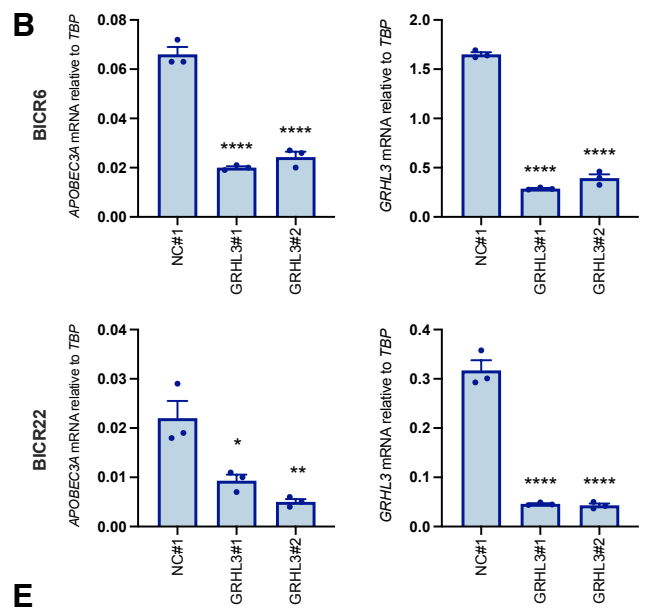
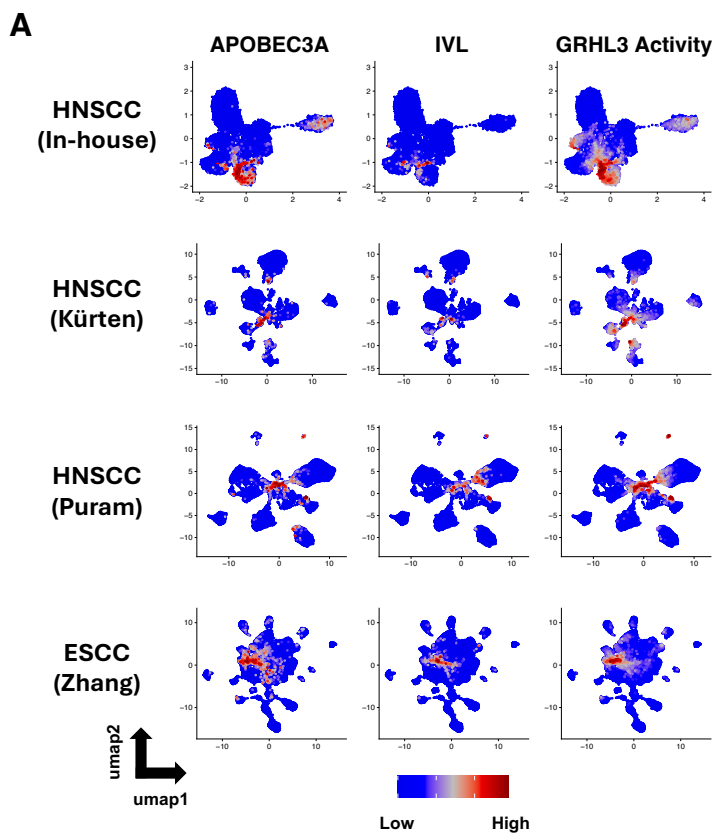
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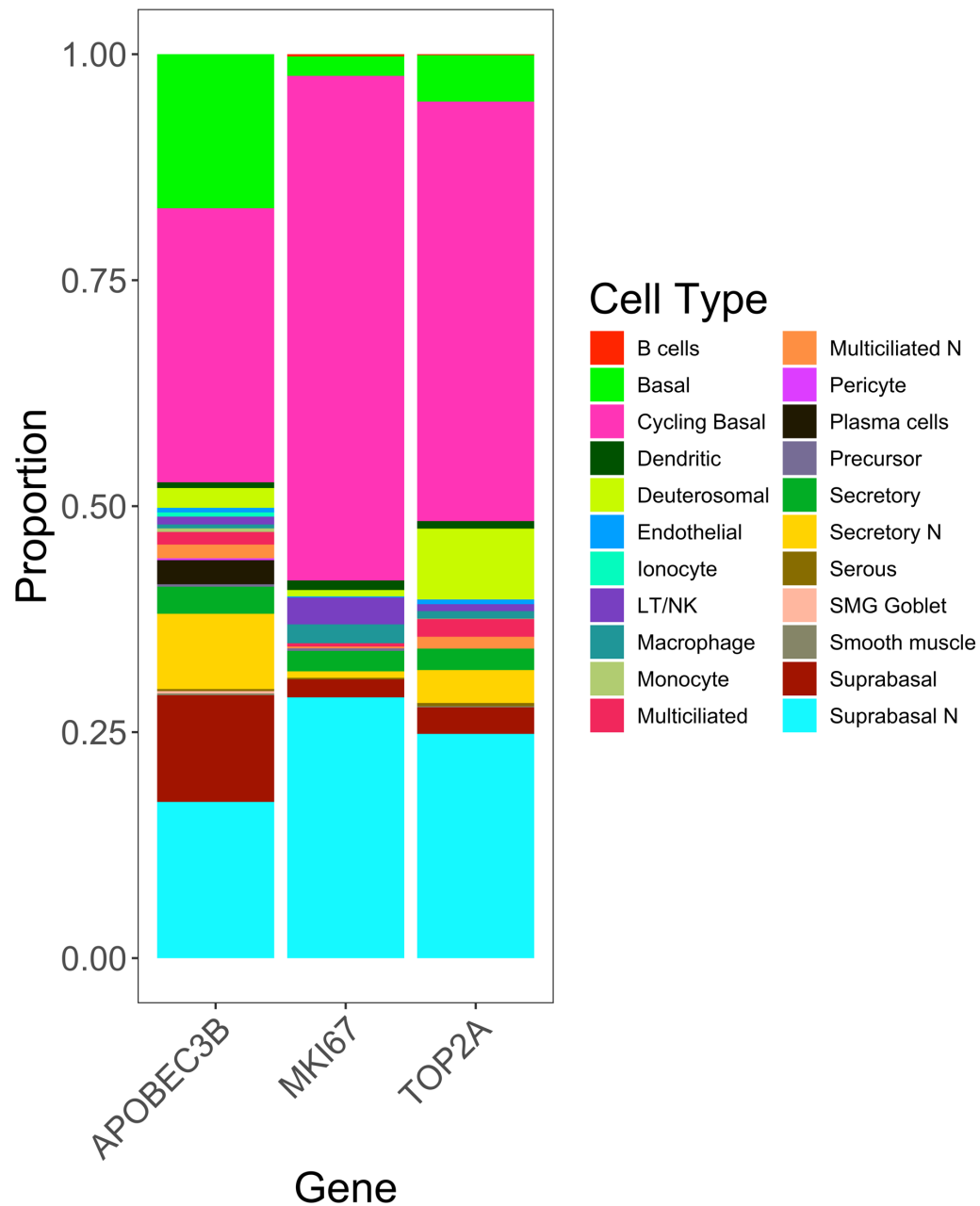


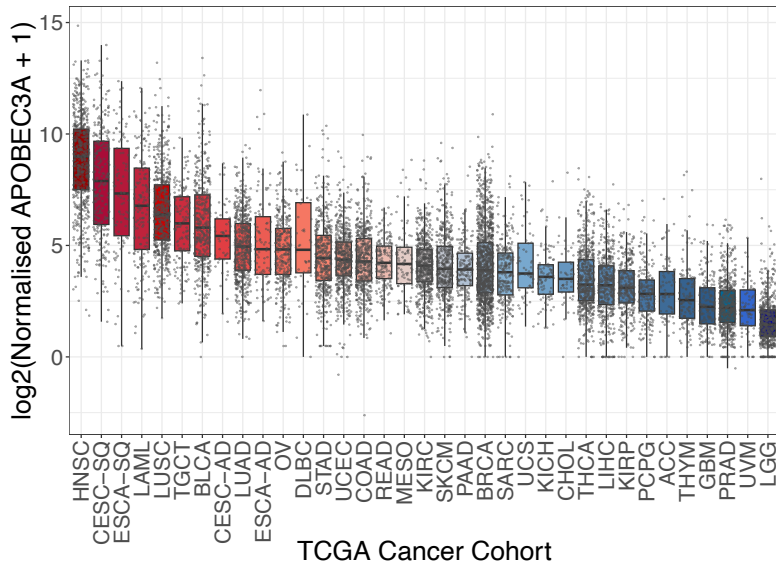
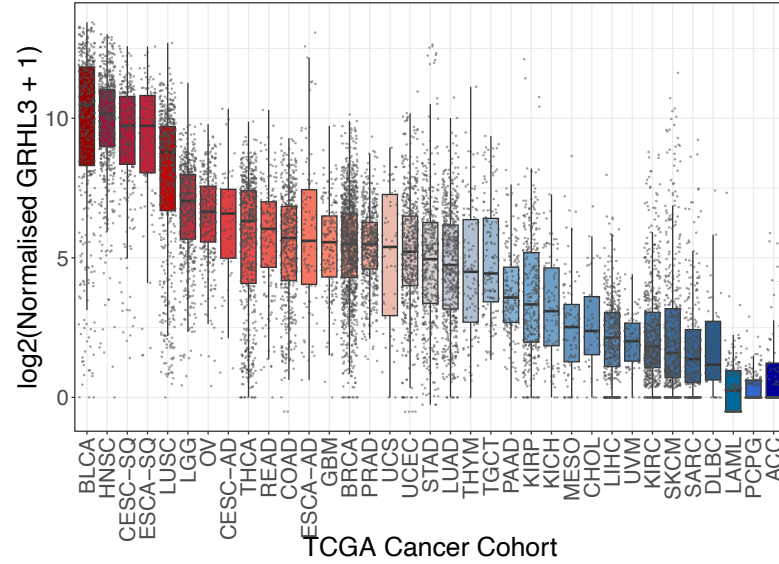
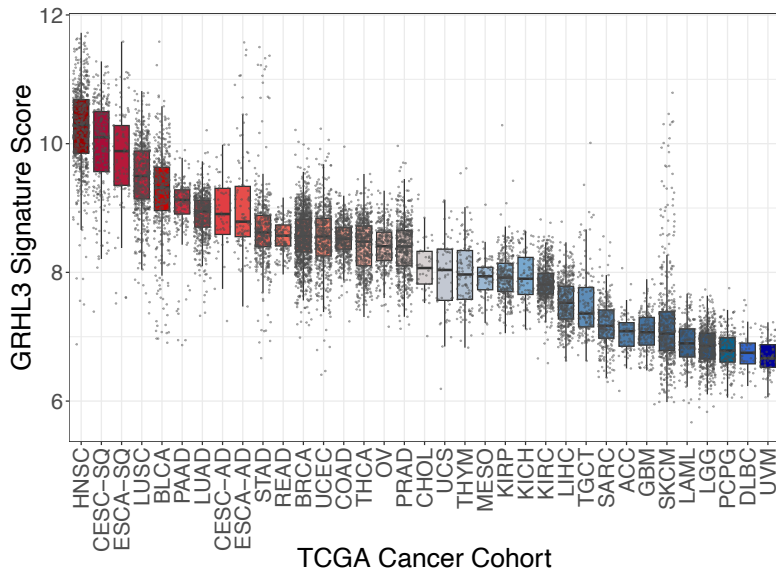


A**B****C****D****E****F****G****H**





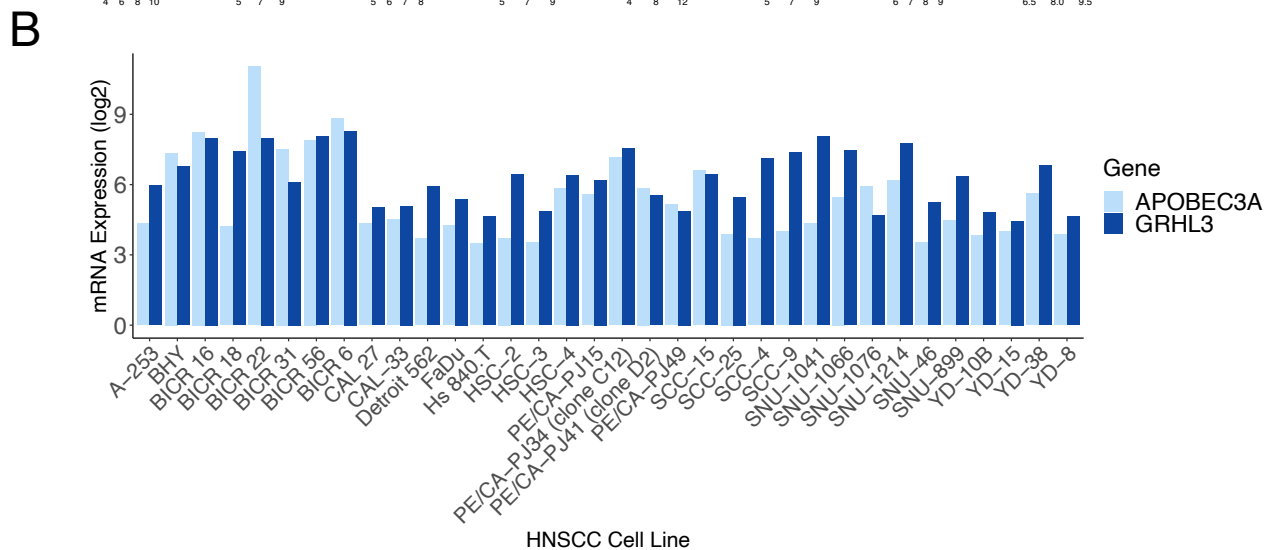
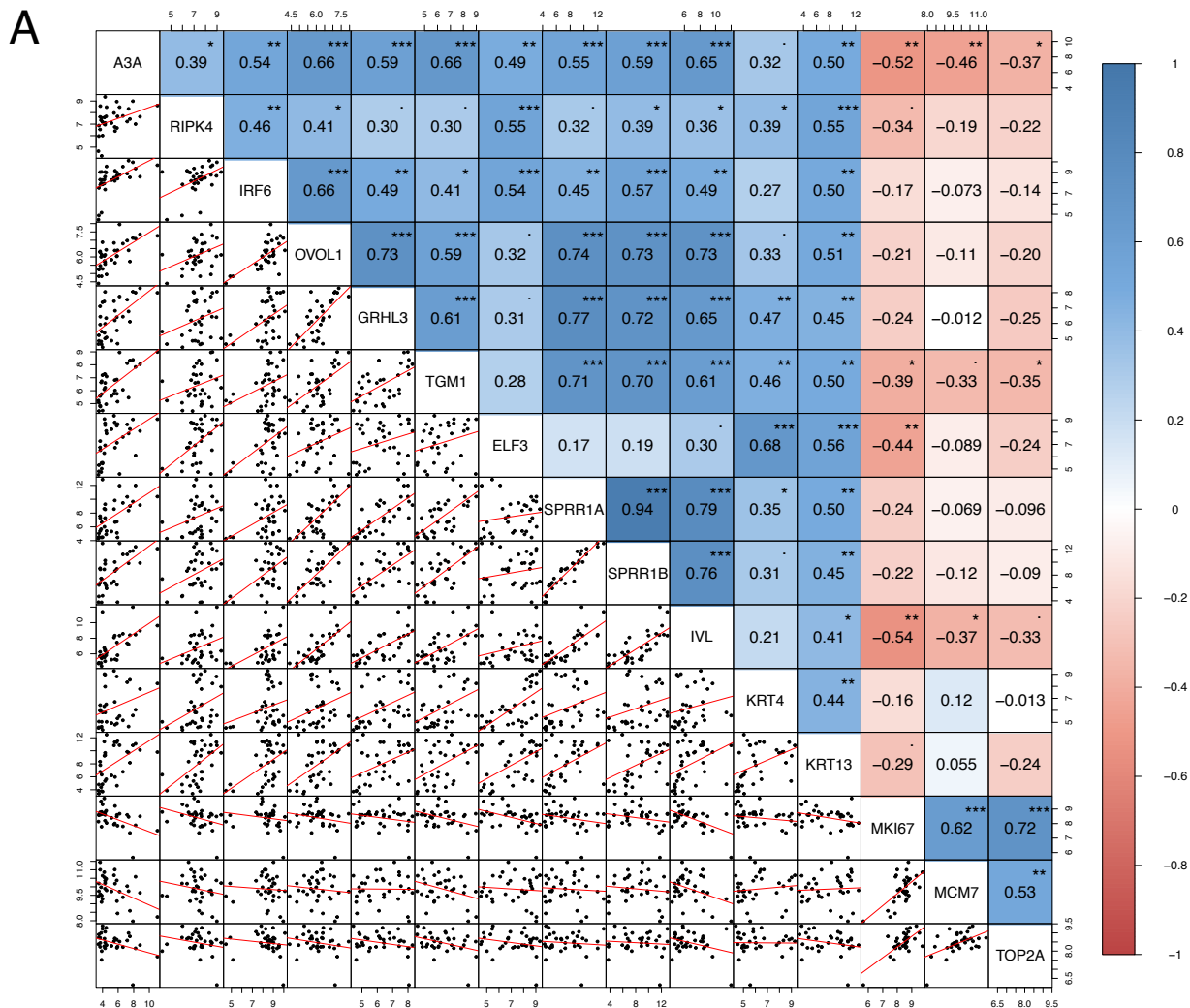


A**B****C****D**

TCGA Cancer Type	n	Spearman Correlation	Adjusted p-value
ESCA-SQ	99	0.65	2.48E-12
CESC-SQ	255	0.62	2.10E-27
CESC-AD	54	0.51	2.70E-04
ESCA-AD	97	0.48	2.17E-06
THYM	122	0.47	2.15E-07
HNSC	566	0.43	2.31E-25
THCA	572	0.40	3.45E-22
LUSC	552	0.32	9.80E-14
PRAD	550	0.20	8.56E-06
BRCA	1,215	0.19	4.07E-10
CHOL	45	0.15	3.94E-01
OV	308	0.14	3.29E-02
BLCA	427	0.12	3.75E-02
KICH	91	0.10	4.36E-01
UCEC	555	0.09	7.62E-02
PAAD	183	0.07	3.94E-01
SKCM	473	0.06	2.59E-01
STAD	450	0.06	3.03E-01
LUAD	576	0.06	2.59E-01
LAML	173	0.00	9.64E-01
KIRP	323	0.00	9.64E-01
DLBC	48	-0.01	9.64E-01
LIHC	423	-0.01	8.49E-01
ACC	79	-0.03	8.49E-01
LGG	529	-0.12	2.05E-02
SARC	265	-0.12	1.06E-01
GBM	166	-0.12	1.96E-01
TGCT	139	-0.13	1.96E-01
PCPG	187	-0.13	1.30E-01
READ	170	-0.15	8.67E-02
COAD	492	-0.16	9.22E-04
KIRC	606	-0.16	1.75E-04
MESO	87	-0.23	6.60E-02

E

TCGA Cancer Type	n	Spearman Correlation	Adjusted p-value
ESCA-SQ	99	0.71	1.2E-15
CESC-SQ	255	0.68	3.7E-35
ESCA-AD	97	0.64	5.9E-12
CESC-AD	54	0.57	9.1E-06
LAML	173	0.56	3.3E-15
LUSC	552	0.54	3.9E-42
THYM	122	0.54	2.9E-10
HNSC	566	0.54	4.0E-42
THCA	572	0.53	5.9E-41
KICH	91	0.46	6.8E-06
BLCA	427	0.45	8.6E-22
DLBC	48	0.37	1.2E-02
SKCM	473	0.37	1.0E-15
SARC	265	0.34	2.2E-08
PRAD	550	0.32	4.7E-14
PCPG	187	0.31	2.9E-05
GBM	166	0.31	8.6E-05
LIHC	423	0.30	5.7E-10
LGG	529	0.28	2.3E-10
STAD	450	0.27	1.4E-08
OV	308	0.25	1.5E-05
LUAD	576	0.24	1.3E-08
COAD	492	0.24	1.7E-07
CHOL	45	0.22	1.7E-01
KIRP	323	0.22	1.1E-04
UCEC	555	0.18	1.8E-05
BRCA	1,215	0.17	2.0E-09
READ	170	0.16	4.6E-02
PAAD	183	0.07	3.3E-01
MESO	87	0.04	7.5E-01
TGCT	139	0.01	9.0E-01
KIRC	606	-0.07	8.6E-02
ACC	79	-0.16	1.8E-01



APOBEC3A

APOBEC3A/B/G

