

Identical *NR5A1* Missense Mutations in Two Unrelated 46,XX Individuals with Testicular Tissues

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40 **Abbreviations:** DSD, disorders of sex development; ExAC, the Exome Aggregation
41 Consortium; FOXL2, Forkhead box L2; HGVB, the Human Genetic Variation Browser; NR0B1,
42 nuclear receptor subfamily 0 group B member 1; NR5A1, nuclear receptor subfamily 5, group
43 A, member 1; SOX9, SRY-box 9; TESCO, testis enhancer sequence core element.

44

45 **Abstract**

46 **Context:** The association between monogenic mutations and 46,XX testicular/ovotesticular
47 disorders of sex development (DSD) remains rather speculative. Although mutations in *NR5A1*
48 are known to cause 46,XY gonadal dysgenesis and 46,XX ovarian insufficiency, such mutations
49 have not been implicated in the testicular development of 46,XX gonads.

50 **Case Description:** Patients 1 and 2 were unrelated 46,XX DSD patients who manifested genital
51 abnormalities at birth. Clinical examinations confirmed the presence of ovotesticular and/or
52 testicular tissues in the gonads and the absence of uterus and vagina. Molecular analysis of 28
53 genes involved in gonadal development identified a heterozygous p.R92W mutation of *NR5A1*
54 in both patients. This mutation was absent from the clinically normal mothers of patients 1 and
55 2 and has not been detected in the general population. *In silico* analysis suggested that p.R92W
56 is probably pathogenic and likely causes conformational changes at the DNA-binding site. *In*
57 *vitro* assays demonstrated that the mutant protein is resistant to the NR0B1 (nuclear receptor
58 subfamily 0 group B member 1)-induced suppression on *SOX9* TESCO (testis enhancer
59 sequence core element) activity. While patient 1 carried additional rare polymorphisms in
60 *FOXL2* and *WWOX*, patient 2 had no other mutations in tested genes.

61 **Conclusions:** This study provides the first indication that specific mutations in *NR5A1* may
62 underlie testicular development in 46,XX individuals.

63

64 46,XX testicular/ovotesticular disorders of sex development (DSD) are rare conditions in which
65 the developmental process of 46,XX gonads is switched toward testicular formation. 46,XX
66 testicular DSD usually results from translocations of *SRY*-containing DNA fragments from Y
67 chromosomes to X chromosomes (1), while a small percentage of cases is attributed to
68 chromosomal rearrangements that affect *cis*-regulatory regions of *SOX9* or *SOX3* (2). Likewise,
69 46,XX ovotesticular DSD frequently arises from chromosomal mosaicism or chimerism (3). To
70 date, monogenic mutations have not been associated with 46,XX testicular/ovotesticular DSD,
71 except for those in *RSP01* and *WNT4*, which were identified in a few patients with syndromic
72 DSD.

73 Nuclear receptor subfamily 5 group A member 1 (NR5A1, also known as SF1/Ad4BP)
74 is a transcription factor that regulates gonadal and adrenal development. In mice and possibly in
75 humans as well, NR5A1 and SRY-box-9 (SOX9) synergistically activate the testis enhancer
76 sequence core element (TESCO) of *Sox9/SOX9* (4). The cooperative transactivation of TESCO
77 by NR5A1 and SOX9 is antagonized by the nuclear receptor subfamily 0 group B member 1
78 (NR0B1, also known as DAX1) (5). More than 40 loss-of-function mutations of *NR5A1* have
79 been identified in patients with gonadal dysgenesis and/or adrenal insufficiency (6). *NR5A1*
80 abnormality represents one of the major causes of gonadal dysgenesis in genetic males and
81 accounts for a small fraction of primary ovarian insufficiency in genetic females (6).
82 Nevertheless, *NR5A1* mutations have not been implicated in 46,XX testicular/ovotesticular DSD.
83 Here, we identified an *NR5A1* missense mutation in two unrelated 46,XX individuals with
84 testicular tissues.

85

86 **Subjects and Methods**

87 **Case reports**

88 Detailed clinical information of patients 1 and 2 is shown in Table 1 and in the Supplemental
89 Information. These patients are unrelated Japanese individuals with a 46,XX karyotype.

90 Patient 1 was raised as a female. At birth, this patient manifested ambiguous external

91 genitalia of Prader stage 3–4. Laparoscopy and cystoscopy confirmed the absence of vagina and
92 uterus. The patient’s blood testosterone level was within the reference range of age-matched
93 males, while gonadotropin levels were elevated. At 1 year of age, she underwent gonadectomy.
94 The right and left gonads were found to be immature testis-like tissues and SOX9- and
95 Forkhead box L2 (FOXL2)-positive ovotestis, respectively.

96 Patient 2 was raised as a male. At birth, he manifested male-type external genitalia
97 with hypospadias and bifid scrotum. Gonadal biopsy and laparoscopy at 6 months of age
98 confirmed the presence of testicular tissues and spermatic cord. Magnetic resonance imaging
99 indicated the absence of vagina and uterus. His gonadotropin and testosterone levels were
100 almost comparable to those of unaffected boys. At 9 years and 7 months of age, the patient had
101 descended testes of 1 mL in volume.

102

103 **Molecular analyses**

104 This study was approved by the Institutional Review Board Committee and performed after
105 obtaining informed consent. Detailed methods are described in the Supplemental Information.

106 Genomic DNA samples were obtained from patients 1 and 2. Twenty-eight genes
107 known or predicted to regulate gonadal development were analyzed by next-generation or
108 Sanger sequencing. We also analyzed copy-number alterations in the genome.

109 The population frequency of identified substitutions was analyzed using the Exome
110 Aggregation Consortium (ExAC) Browser, dbSNP, and the Human Genetic Variation Browser
111 (HGVB). The functional consequences of these mutations were predicted by Polyphen-2 and
112 MutationTaster, and the three-dimensional structure of mutated NR5A1 was predicted by
113 PyMOL. When possible, DNA samples of the parents were also analyzed.

114

115 ***In vitro* functional assays**

116 Detailed methods are available in Supplemental Information. We performed luciferase reporter
117 assays for wildtype NR5A1 and p.R92W. Briefly, Chinese hamster ovary-K1 cells were

118 transiently transfected with expression vectors for *NR5A1*, *SOX9*, and *NR0B1*, a reporter vector
119 containing *SOX9* TESCO, and an internal control vector. Relative luciferase activity was
120 measured 48 hours after transfection by the dual luciferase method.

121

122

123 **Results**

124 **Molecular analyses**

125 The same heterozygous substitution (c.274C>T, p.R92W) in the A-box motif of the *NR5A1*
126 DNA-binding domain was detected in patients 1 and 2 (Fig. 1A and B). This substitution was
127 not found in databases. This substitution was scored “probably damaging” and “disease causing”
128 by Polyphen-2 and MutationTaster, respectively. Protein modeling predicted that the mutation
129 induces conformational changes at the DNA-binding site (Fig. 1C).

130 Patient 1 carried additional substitutions in *FOXL2* (c.1045C>G, p.R349G) and
131 *WWOX* (c.550C>T, p.L184F), the allele frequencies of which in the ExAC Browser are
132 32/111,232 and 6/120,756, respectively (Fig. S1). Both substitutions were scored “probably
133 damaging” and “disease causing”. Patient 2 had no additional mutations in tested genes.
134 Copy-number alterations were not detected.

135 In patient 1, the substitutions in *NR5A1* and *FOXL2* were inherited from the father,
136 while the *WWOX* substitution was transmitted from the mother. In patient 2, the *NR5A1*
137 substitution was absent from the mother, indicating paternal or *de novo* origin.

138

139 ***In vitro* functional assays**

140 Both wildtype *NR5A1* and the p.R92W mutant activated *SOX9* TESCO in cooperation with
141 *SOX9*. While *NR0B1* repressed the TESCO activation by wildtype *NR5A1* in a dose dependent
142 manner, it did not affected transactivating activity of the p.R92W mutant (Fig. 1D).

143

144 **Discussion**

145 We detected identical *NR5A1* mutations in two unrelated 46,XX individuals with testicular
146 tissues. The p.R92W mutation affected the functionally important A-box motif of the
147 DNA-binding domain (7), and has not been identified in the general population. *In silico*
148 analysis suggested that p.R92W is “probably damaging” and causes protein conformational
149 changes. These data indicate that p.R92W is a pathogenic mutation, rather than a benign
150 polymorphism. Testicular formation in patients 1 and 2 can be explained by assuming that
151 p.R92W is a gain-of-function mutation that triggers *SOX9* overexpression, which is known to
152 induce the testicular development of immature 46,XX gonads (2). Indeed, *in vitro* assays
153 demonstrated that p.R92W is resistant to the NR0B1-induced suppression on *SOX9* TESCO
154 activity. The absence of p.R92W in the patients’ mothers is consistent with the possible
155 association between this mutation and 46,XX DSD. It is noteworthy that a homozygous
156 mutation in the same codon, p.R92Q, has been identified in an individual with 46,XY gonadal
157 dysgenesis and adrenal insufficiency (8), suggesting the functional importance of the arginine
158 residue at the 92nd position. Differences in the clinical manifestation of p.R92Q and p.R92W
159 possibly reflect differences in the transactivating activity of these mutants. Indeed, *in silico*
160 analysis predicted a structural difference between the mutants (Fig. 1C). Nevertheless, we
161 cannot exclude the possibility that DSD in our patients developed independently of p.R92W.
162 Further studies are necessary to clarify the phenotypic consequences of this mutation.

163 Notably, patient 1 carried additional rare “probably damaging” polymorphisms in
164 *FOXL2* and *WWOX*. While maternal inheritance of the *WWOX* polymorphism argues against its
165 association to 46,XX DSD, the paternally transmitted *FOXL2* substitution may have affected
166 gonadal development. Indeed, *FOXL2* is known to interact with *NR5A1* (9), and multiple
167 mutations in *FOXL2* have been reported to increase the risk of 46,XX testicular DSD (10).
168 However, the clinical significance of *FOXL2* substitutions seems limited, if any, because
169 nucleotide changes in the *FOXL2* coding region were not found in patient 2, who had a more
170 severe phenotype than patient 1.

171 In summary, this study provides the first indication that specific mutations in *NR5A1*
172 may underlie testicular development in 46,XX individuals. This notion needs to be validated in
173 future studies.

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177

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- 212

213 **Figure legends**

214 **Fig. 1.**

215 (A) The *NR5A1* mutation identified in patients 1 and 2. The mutated nucleotide is indicated by
216 an arrow. This mutation was scored “probably damaging” by Polyphen-2.

217 (B) Position of p.R92W. Black and white boxes indicate the coding and non-coding exons of
218 *NR5A1*, respectively. This mutation affected the A-box motif (blue box) in the
219 DNA-binding domain (DBD). HD, hinge domain; LBD, ligand binding domain.

220 (C) Three-dimensional protein modeling of p.R92W and a known R92Q mutation. NR5A1 and
221 target DNA are illustrated in pink and blue, respectively. Amino acids at the 92nd codon are
222 highlighted in red. The p.R92W and p.R92Q mutations probably induce conformational
223 changes at the DNA-binding site.

224 (D) Representative results of luciferase assays using the *SOX9* TESCO reporter. Expression
225 vectors for *NR5A1* and *SOX9* were transfected into CHO-K1 cells, along with the reporter
226 vector and various doses of *NR0B1* expression vector (6.25, 25, 100, 400 ng/well). Results
227 are expressed as mean \pm standard deviation. WT, wildtype NR5A1; MUT, the p.R92W
228 mutant.

Table 1. Clinical features of patients 1 and 2.

	Patient 1				Patient 2		
Physical findings at birth							
External genitalia	ambiguous external genitalia (Prader stage 3-4)				male-type genitalia with hypospadias and bifid scrotum		
Gonad	not palpable				palpable		
Histology	testis-like (right), ovotestis (left)				testis		
Uterus	absent				absent		
Hormonal findings							
Age at exam ^a	days 6 and 13 ^b		1 month		1-5 months ^c		14.8 years
	basal	stimulated	basal	stimulated	basal	stimulated	basal
LH (mIU/mL) ^d	9.1 [0.3-1.9 (M), 0.2-0.7 (F)]	...	...	...	0.5 [0.1-0.4 (M, F)]	6.0 [0.4-6.0 (M), 1.6-4.8 (F)]	14.0 [0.5-3.1 (M), 1.3-33.4 (F)]
FSH (mIU/mL) ^d	13.6 [0.8-3.0 (M), 1.8-8.6 (F)]	...	...	...	2.7 [0.6-3.0 (M), 2.1-6.1 (F)]	9.4 [6.3-15.6 (M), 14.5-21.9 (F)]	32.0 [0.9-6.7 (M), 6.3-8.1 (F)]
Testosterone (ng/dL) ^e	...	...	164 [115-404 (M), 0-15 (F)]	566 [>200 (M)]	124 [115-404 (M), 0-15 (F)]	424 [>200 (M)]	140 [119-349 (M), 21-67 (F)]
AMH (ng/mL)	12.6 [55.6 ± 21.3 (M), 1.0 ± 0.9 (F)]	...	...	...	...	...	...
E ₂ (pg/mL) ^f	21 [96 ± 44 (M), 31 ± 32 (F)]	...	...	...	10 [46 ± 46 (M), 33 ± 37 (F)]	10 [No reference data]	...
ACTH (pg/mL)	47 [24 ± 11 (M), 26 ± 12 (F)]	...	...	...	...	...	21 [23 ± 6 (M), 22 ± 17 (F)]
Cortisol (µg/dL) ^g	13.4 [12.4 ± 5.3 (M), 12.8 ± 7.1 (F)]	46.7 [38.2 ± 4.4 (M), 10.0 ± 8.1 (F)]	...	...	17.2 [12.4 ± 5.3 (M), 12.8 ± 7.1 (F)]	29.3 [38.2 ± 4.4 (M), 40.0 ± 8.1 (F)]	7.7 [9.5 ± 2.9 (M), 10.1 ± 2.8 (F)]
17-OHP (ng/mL) ^g	...	...	...	...	1.7 [<20.0 (M, F)]	3.9 [<16.6 (M, F)]	...

AMH, anti-Müllerian hormone; E₂, estradiol; 17-OHP, 17-hydroxyprogesterone.

Conversion factors to the SI unit: LH, 1.0 (IU/L); FSH, 1.0 (IU/L); testosterone, 0.0347 (nmol/L); AMH, 7.14 (pmol/L); E₂, 3.671 (pmol/L); ACTH, 0.22 (pmol/L); cortisol, 27.59 (nmol/L) and 17-OHP, 3.03 (nmol/L).

^a Reference ranges for age-matched male (M) and female (F) children are shown in brackets.

^b LH, FSH, AMH and E₂ were measured at day 6, while ACTH and cortisol were measured at day 13.

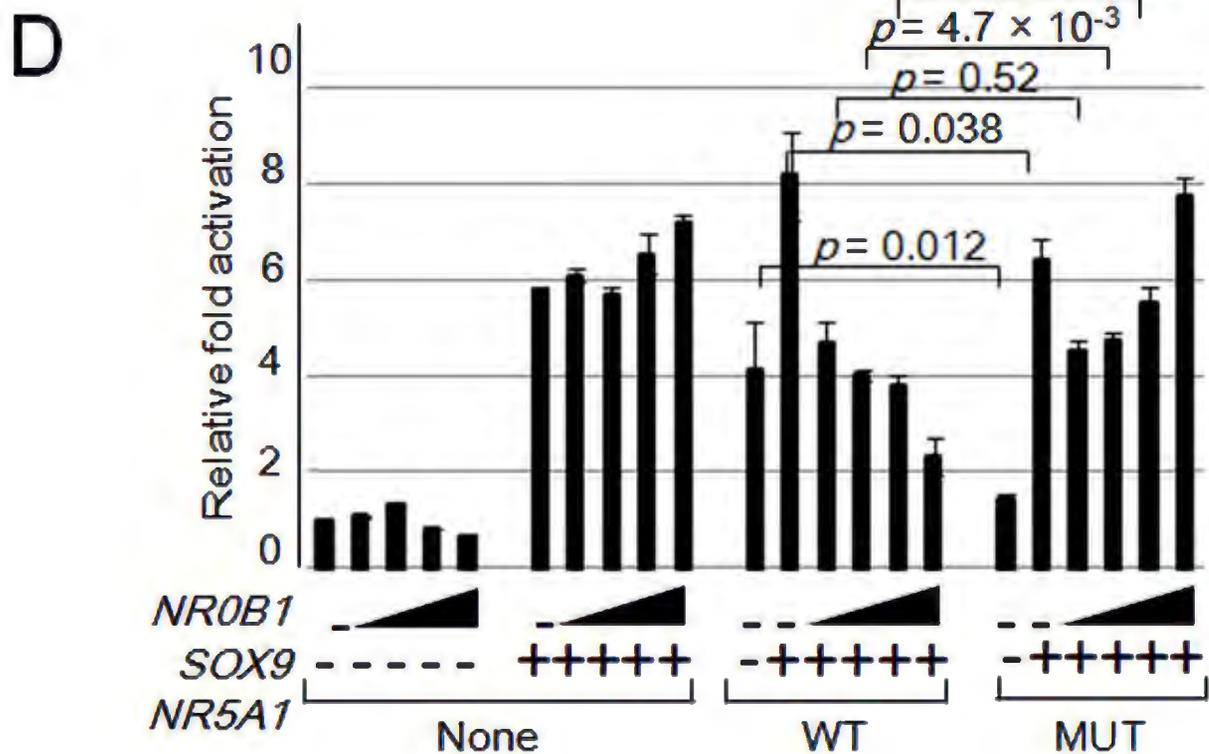
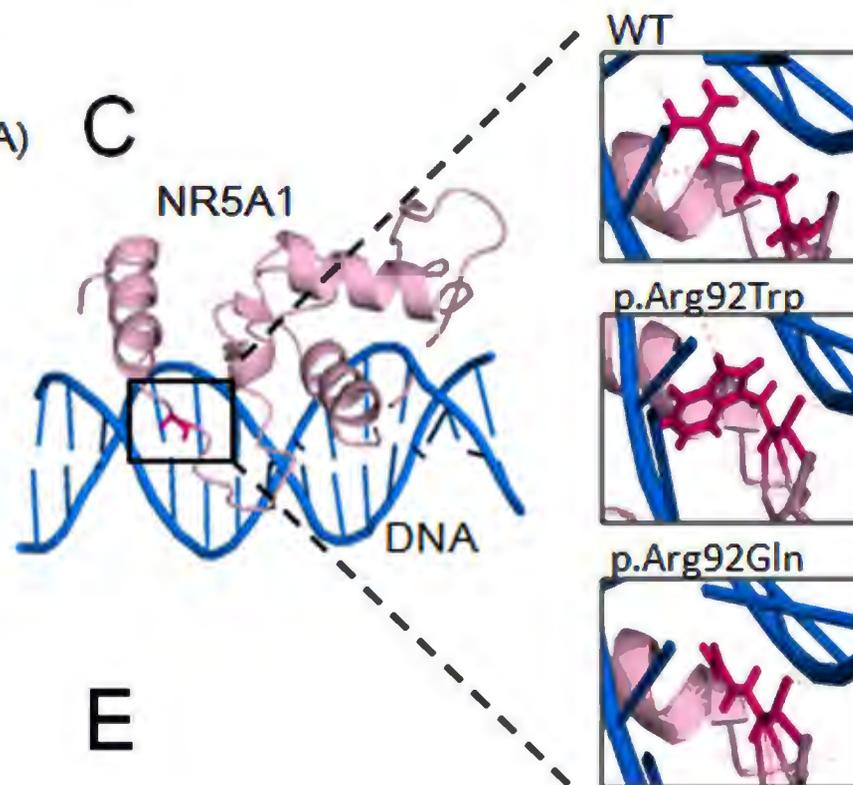
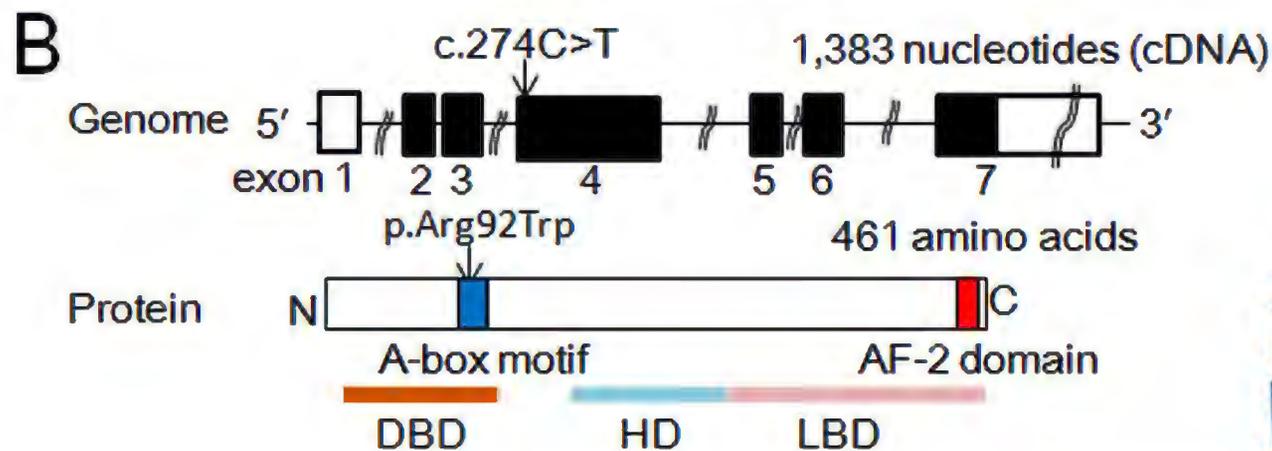
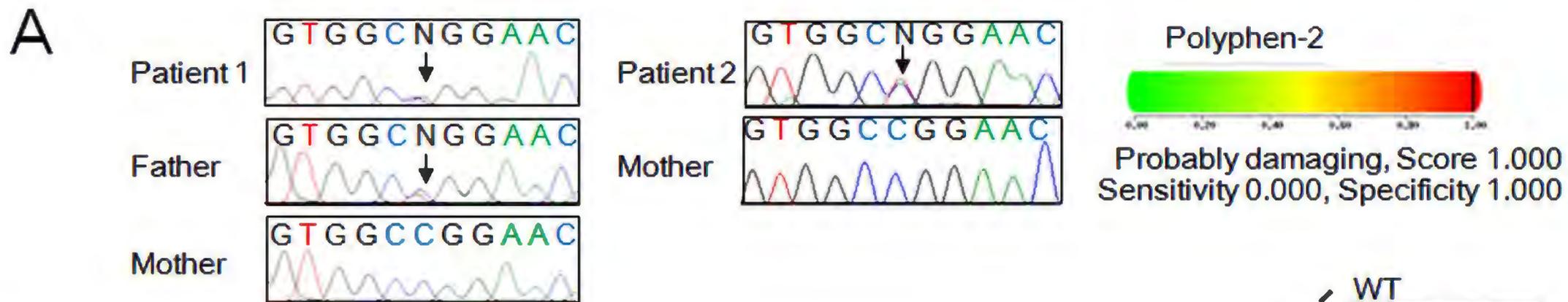
^c LH and FSH were measured at 5 months of age, testosterone and E₂ were measured at 2 months of age, and cortisol and 17-OHP were measured at 1 month of age.

^d Gonadotropin releasing hormone stimulation test (100 µg/m², max. 100 µg bolus i.v.; blood sampling at 0, 30, 60, 90, and 120 minutes).

^e Human chorionic gonadotropin stimulation test (750 U, i.m. for 3 consecutive days; blood sampling on days 1 and 4).

^f Human menopausal gonadotropin stimulation test (100 U, i.m. for 3 consecutive days; blood sampling on days 0 and 4).

^g Human ACTH stimulation test (250 µg/m², i.v.; blood sampling at 30 and 60 minutes).



1 SUPPORTING INFORMATION

3 Subjects and Methods

4 **Subjects**

5 Patients 1 and 2 were unrelated patients identified by genital abnormalities at birth. These
6 patients manifested no additional clinical features. Patient 1 was conceived by *in vitro*
7 fertilization. Both patients were born at 41 weeks gestation as the sole child of
8 non-consanguineous Japanese parents, and had no family history of disorders of sex
9 development (DSD). G-banding analysis confirmed a 46,XX karyotype. PCR for *SRY*
10 yielded no amplification products.

12 **Ethical approval**

13 This study was approved by the Institutional Review Board Committee at the National
14 Center for Child Health and Development and performed after obtaining written informed
15 consent from the participants or their parents.

17 **Sequence analysis**

18 Genomic DNA samples were obtained from patients 1 and 2, as well as from the parents of
19 patient 1 and the mother of patient 2. Exome sequencing was performed using the All Exome
20 v5 Kit (Agilent Technologies, Palo Alto, CA, USA) and the HiSeq 1500 sequencer (Illumina,
21 San Diego, CA, USA). Sequencing data were analyzed by BWA 0.6.2
22 (<http://bio-bwa.sourceforge.net/>) and SAMtools 0.1.18 software
23 (<http://samtools.sourceforge.net/>). In this study, we analyzed protein-altering mutations and
24 splice-site variations in genes that have previously been associated with human sex
25 development [Bashamboo and McElreavey, 2013; Ono and Harley, 2013; Eggers et al.,
26 2014; Baxter et al., 2015].

27 Nucleotide alterations identified in patients 1 and 2 were analyzed *in silico*. We

28 examined the population frequency of the substitutions in the Exome Aggregation
29 Consortium (ExAC) Browser (<http://exac.broadinstitute.org/>), dbSNP
30 (<http://www.ncbi.nlm.nih.gov/snp/>), the 1000 Genomes Browser
31 (<http://ncbi.nlm.nih.gov/variation/tools/1000genomes/>), and Human Genetic Variation
32 Browser (HGVB; <http://www.genome.med.kyoto-u.ac.jp/SnpDB>). DNA samples obtained
33 from eight healthy Japanese females were used as control. Nucleotide substitutions whose
34 frequency in the general population is more than 1.0% were excluded as polymorphisms. In
35 addition, mutations shared by our control samples or by the mothers of patients 1 or 2 were
36 considered as non-pathogenic. The functional consequences of the substitutions were
37 predicted by Polyphen-2 (<http://genetics.bwh.harvard.edu/pph2/>), MutationTaster
38 (<http://www.mutationtaster.org/>), and SIFT (<http://sift.jcvi.org/>), by using the default
39 parameters. Three-dimensional structures of mutants were predicted by PyMOL
40 (<http://www.pymol.org>). Putative pathogenic mutations were confirmed by Sanger
41 sequencing. Primer sequences are available upon request.

42 To assess the pathogenicity of an *NR5A1* mutation identified in patients 1 and 2, we
43 performed sequence analysis of 200 healthy Japanese controls (100 males and 100 females).
44 The samples were obtained from the Human Science Research Resources Bank (Tokyo,
45 Japan; present distributor, National Institute of Biomedical Innovation, Osaka, Japan).
46 Furthermore, to examine whether the *NR5A1* mutations in patients 1 and 2 share a common
47 genetic origin, we genotyped several single nucleotide polymorphisms in the *NR5A1* locus in
48 the patients and their family members.

49

50 **Submission of mutation data to a database**

51 An *NR5A1* substitution identified in this study was submitted to the DNA Data Bank of
52 Japan (<http://www.ddbj.nig.ac.jp/index-j.html>; accession number, LC037393).

53

54 **Copy-number analysis**

55 Copy-number changes in the genome of patients 1 and 2 were analyzed by array-based
56 comparative genomic hybridization using a catalog human array (4×180 k format; Agilent
57 Technologies). We referred to the Database of Genomic Variant
58 (<http://dgv.tcag.ca/dgv/app/home>) to exclude benign copy-number polymorphisms.

59

60 **Plasmids**

61 Expression vectors for wildtype human *NR5A1* and *FOXL2* were purchased from Kazusa
62 DNA Research Institute (Kisarazu, Chiba, Japan). An expression vector for the mutant
63 *NR5A1* and *FOXL2* were generated by mutagenesis using the PrimeSTAR Mutagenesis
64 Basal Kit (Takara Bio, Otsu, Shiga, Japan). An expression vector for *NROB1* and a reporter
65 vector containing the *SOX9* testis enhancer sequence core element (TESCO) were generated
66 in our previous studies [Okuhara et al., 2008; Sekido and Lovell-Badge, 2008]. An
67 expression vector for human *SOX9* was purchased from OriGene Technologies (MD, USA).
68 The pRL-null vector (Life Technologies, CA, USA) was used as an internal control for
69 transfection.

70

71 **Luciferase assays**

72 Transactivation activity of wildtype and mutant *NR5A1* on *SOX9* TESCO was determined
73 by luciferase reporter assays. Chinese hamster ovary (CHO)-K1 cells and murine Leydig
74 tumor cells (MLTC1) (ATCC, VA, USA) were seeded in 12-well plates (1.0×10^5 cells/well)
75 and transiently transfected with 100 ng *NR5A1* expression vector, 100 ng *SOX9* expression
76 vector, 500 ng *SOX9* TESCO reporter vector, and 100 ng pRL-null control vector, along with
77 increasing doses of the *NROB1* expression vector (6.25, 25, 100, and 400 ng/well).

78 Lipofectamine 3000 (Life Technologies) was used for transfection. Relative luciferase
79 activity was measured 48 hours after transfection, using the Dual Luciferase Reporter Assay
80 System (Promega, MD, USA). Luciferase activity was measured in triplicate in a single
81 assay and all assays were repeated three times. Results are expressed as the mean \pm standard

82 deviation, and statistical significance was determined by *t*-test. *P*-values less than 0.05 were
83 considered significant.

84 We also analyzed the effects of wildtype *FOXL2* and the p.Arg349Gly mutant on
85 NR5A1- and SOX9-induced *SOX9* TESCO activity. In this experiment, CHO cells were
86 transfected with expression vector for *FOXL2* (100 ng/well), along with *NR5A1* expression
87 vector (100 ng/well), *SOX9* expression vector (100 ng/well), *SOX9* TESCO reporter vector
88 (500 ng/well), and pRL-null control vector (100 ng/well). Relative luciferase activity was
89 measured as described above.

90

91

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Supp. Table S1. *In silico* functional prediction of *NR5A1*, *FOXL2* and *POR* substitutions

Gene	cDNA	Protein	MutationTaster ^a		Polyphen-2 ^b		SIFT ^c	
			Score	Prediction	Score	Prediction	Score	Prediction
<i>NR5A1</i>	c.274C>T	p.Arg92Trp	0.999	disease causing	1.000	probably damaging	0.00	damaging
<i>FOXL2</i>	c.1045C>G	p.Arg349Gly	0.999	disease causing	0.999	probably damaging	0.02	damaging
<i>POR</i>	c.1370G>A	p.Arg457His	0.999	disease causing	1.000	probably damaging	0.00	damaging

In silico analyses were performed by using the default parameters.

^aMutationTaster (<http://www.mutationtaster.org/>). Current version: MutationTaster2, GRCh37/Ensembl 69.

^bPolyphen-2 (<http://genetics.bwh.harvard.edu/pph2>), Current version: 2.2.2, GRCh37. Scores between 0.909 and 1, between 0.447 and 0.908 and below 0.446 denote probably damaging, possibly damaging and benign, respectively.

^cSIFT (http://sift.jcvi.org/www/SIFT_chr_coords_submit.html). Current version: Aug. 2011; GRCh37/Ensembl 63. Scores of less than 0.05 were assessed as damaging.

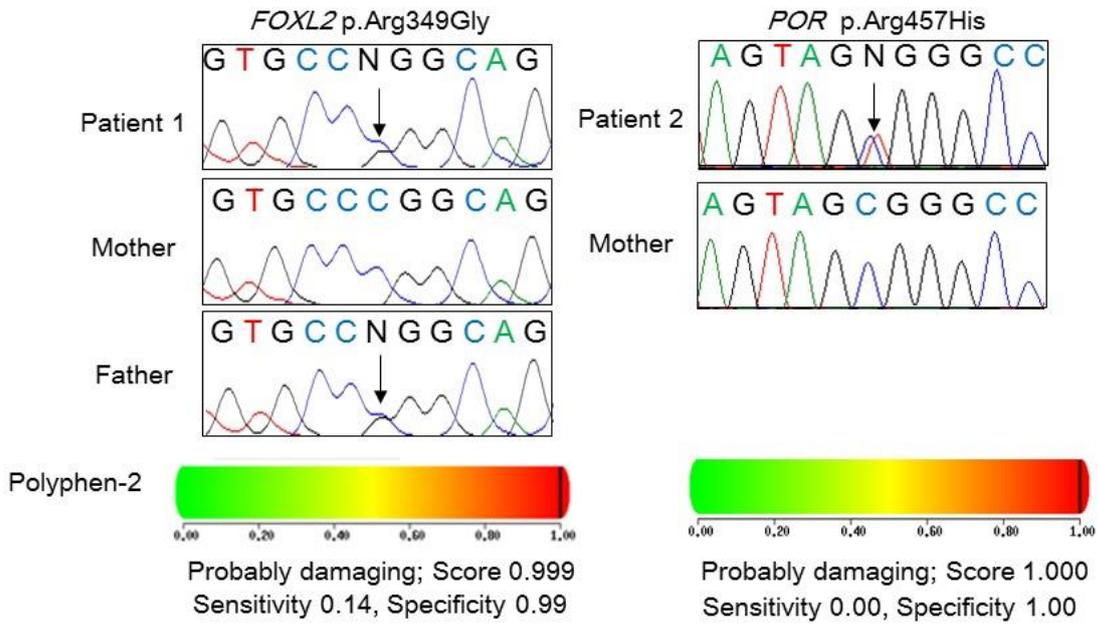
Supp. Table S2. Genotypes of single nucleotide polymorphisms in the *NR5A1* locus

Genomic position^a	dbSNP ID	Region	Patient 1	Mother of patient 1	Father of patient 1	Patient 2	Mother of patient 2
chr9:127244955	rs915034	UTR	A/A	A/A	N.A.	G/A	A/A
chr9:127245412	rs7037254	intronic	C/C	C/C	C/T	C/C	C/C
chr9:127253308	N.D.	intronic	A/A	A/A	A/A	C/A	A/A
chr9:127255448	rs2297605	intronic	G/A	G/A	G/A	A/A	A/A
chr9:127255611	rs76274669	intronic	G/C	C/G	G/G	G/G	G/G
chr9:127262802	rs1110061	exonic	C/G	G/C	C/C	C/C	C/C
chr9:127262965	N.D. ^b	exonic	A/G	G/G	A/G	A/G	G/G
chr9:127263084	rs1889311	intronic	G/G	G/G	G/G	G/G	G/G
chr9:127265286	rs115601896	intronic	C/C	C/C	C/C	C/C	C/C
chr9:127265775	rs76584717	intronic	G/A	A/G	G/G	G/G	G/G

N.A., not analyzed; N.D., no data; UTR, untranslated region.

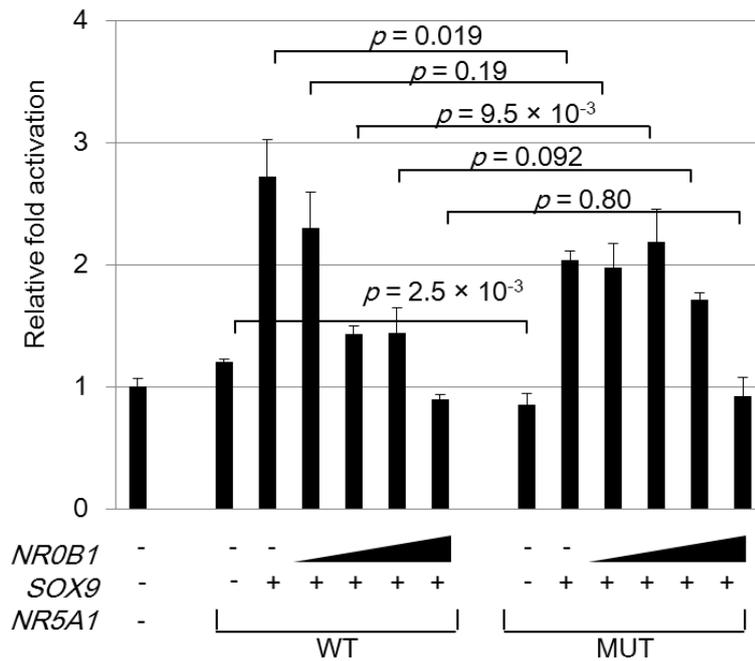
^a Physical position referred to Human Genome (GRCh37/hg19).

^b p.Arg92Trp



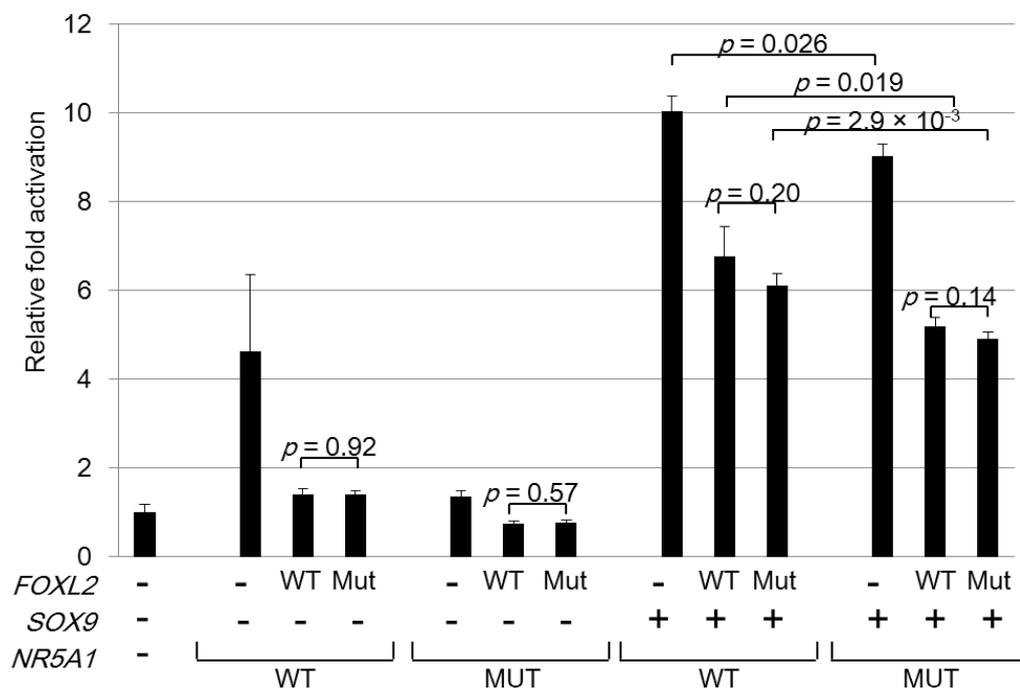
Supp. Fig. S1. Substitutions of *FOXL2* and *POR*.

Mutated nucleotides are indicated by black arrows. The p.Arg457His mutation in *POR* has been linked to fetoplacental androgen overproduction, but not to testicular development in genetic females.



Supp. Fig. S2. Representative results of luciferase assays using murine Leydig tumor cells (MLTC1).

Expression vectors for *NR5A1* and *SOX9* were transfected into the cells, along with the *SOX9*TESCO reporter vector and various doses of *NR0B1* expression vector (6.25, 25, 100, and 400 ng/well). Results are expressed as mean \pm standard deviation. WT, wildtype *NR5A1*; MUT, the p.Arg92Trp mutant.



Supp. Fig. S3. Representative results of luciferase assays using *FOXL2*.

Expression vectors of wildtype *FOXL2* or the p.Arg349Gly mutant (100 ng/well) were transfected into CHO cells, along with the *SOX9*TESCO reporter vector and the expression vectors for *NR5A1* and *SOX9*.

WT, wildtype *NR5A1* or *FOXL2*; MUT, p.Arg92Trp of *NR5A1* or p.Arg349Gly of *FOXL2*.