## **1** Supplemental Text

## 2 OVERLAP OF EWAS RESULTS AND PUBLISHED GWAS AND EWAS

3 To further examine the role of candidate genes in metabolic syndrome, we queried published GWAS 4 results in the GWAS catalog (1) to determine if any of our candidate genes had been previously bookmarked a 5 candidate gene in a GWAS for cardiovascular or metabolic traits. Overall, we found 7 candidate genes associated 6 with EWAS hits in the current study have been previously associated with metabolic or cardiovascular. For 7 example, we found that LINC01317 is associated with insulin sensitivity index (MATSUDA) using EWAS, and a 8 GWAS to Glomerular filtration rate reported a significant association with a SNP (rs10495809) in an intron of 9 LINC01317 (2). CPEB4 is associated OGTT plasma insulin levels, insulin sensitivity index (MATSUDA), and 10 insulin resistance index (HOMAIR) in the current EWAS, and was previously reported as a bookmark gene for a 11 SNP ((s7705502) reported in a GWAS to waist-to-hip ratio adjusted for body mass index (3). CPEB4 is also a 12 strong *cis*-eQTL in adipose tissue (Table1,  $p=2.4 \times 10^{-174}$ ), making it an excellent candidate gene associated with 13 diabetes in humans. Although the traits associated with the candidate genes are different in the current EWAS and 14 published GWAS, these findings lend additional support to the involvement of these candidate genes in diabetes 15 traits. Results for all candidate genes are summarized in Table S2.

In addition, to published GWAS associations, four of the candidate genes have been previously shown to influence diabetes and/or obesity, including the fatty acid synthase gene *FASN* and the transcription factor *RXRA*, a well-known regulator of metabolism. The mismatch repair genes *MSH2* and *MSH6* were previously linked to BMI in humans (4), and in the current study they are associated with BMI, waist circumference, and percent fat mass.

A recent EWAS study examined association of BMI and DNA methylation levels measured from blood using methylation arrays, in a human population of 10,774 individuals (5). They identified 278 in CpG sites associated with BMI at ( $p < 1 \times 10^{-7}$ ), distributed across 207 loci, and replicated 187 of these. The published EWAS and the current study both examine BMI as a trait, however we used both different cell-types (blood in the published work, and adipose tissue in our study), and different methods of measuring methylation levels (microarrays versus bisulfite sequencing in our study). Hence to be able to compare our EWAS results with this published study, we focused on the overlap of the nearest candidate gene to each locus, and found that *SBNO2* 

28	was associated with BMI in the published EWAS by Wahl and colleagues, and was associated with both BMI and
29	body weight. Additionally, the disparity in sample size (201 vs 10,774) suggest the current study is underpowered
30	to detect all overlapping signals.

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