

**Supplemental Table 1:** *ADIPOR1* haplotype frequencies and association analysis in cases with T2DM and controls with NGT.

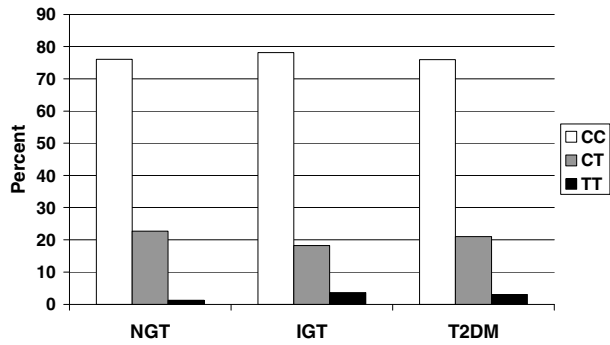
rs6666089	rs2275737	rs1342387	rs7539542	<b>Haplotype Frequency</b>			
				<b>T2DM</b>	<b>NGT</b>	<b>Hap-Score</b>	<b>p-value<sup>†</sup></b>
<b>Alleles</b>							
<b>C</b>	<b>A</b>	<b>A</b>	<b>C</b>	0.344	0.418	-1.71	0.088
<b>C</b>	<b>A</b>	<b>A</b>	<b>G</b>	0.239	0.254	-0.43	0.667
<b>T</b>	<b>G</b>	<b>G</b>	<b>C</b>	0.142	0.126	0.59	0.556
<b>C</b>	<b>G</b>	<b>G</b>	<b>C</b>	0.029	0.015	1.04	0.298
<b>C</b>	<b>G</b>	<b>G</b>	<b>G</b>	0.241	0.177	1.90	0.057

\* Haplotypes with estimated frequencies > 0.01 in case and control subjects are shown. Redundant SNPs ( $r^2 = 1$ ) and rare SNPs (MAF < 0.05) were removed from the haplotype analysis. T2DM risk alleles are shaded. P-values < 0.05 are shown in bold.

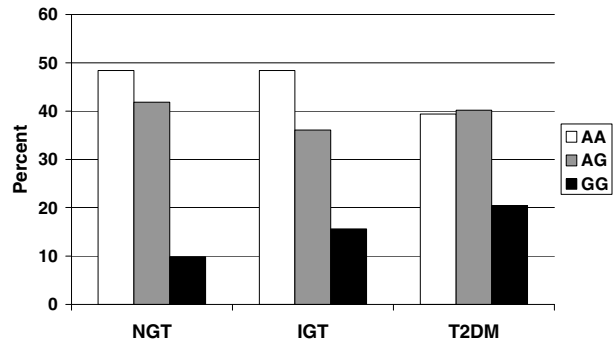
<sup>†</sup> Global p-value = 0.33

**Supplemental Figure 1: ADIPOR1 SNP Genotype Frequencies in T2DM and IGT Cases and NGT Controls.**

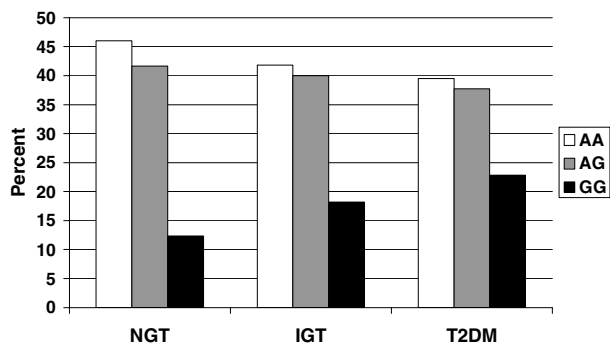
(a.) rs6666089



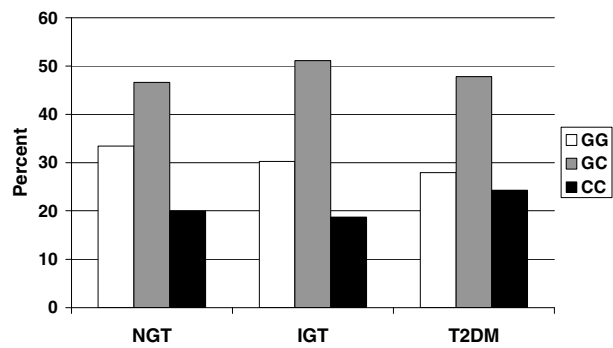
(b.) rs2275737\*



(c.) rs1342387\*



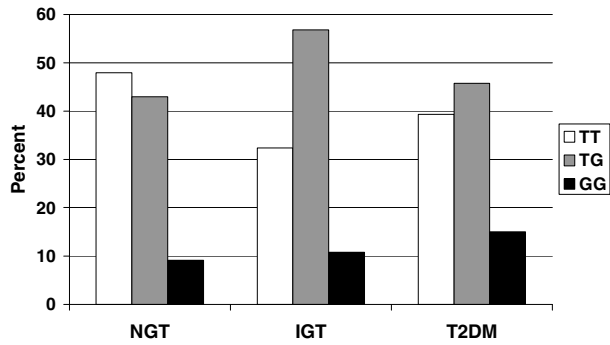
(d.) rs7539542



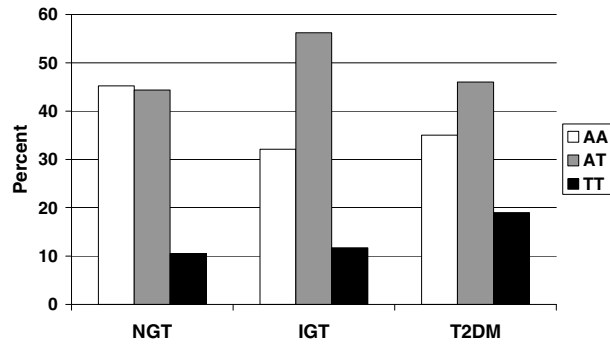
\* SNPs with  $p < 0.05$  in the case/control analysis (T2DM/IGT vs. NGT).

**Supplemental Figure 2: ADIPOR2 SNP Genotype Frequencies in T2DM and IGT Cases and NGT Controls.**

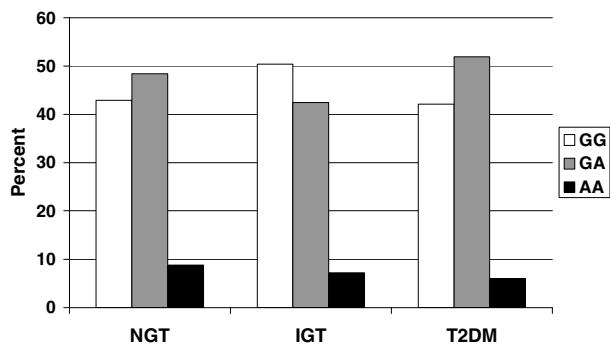
(a.) rs1029629\*



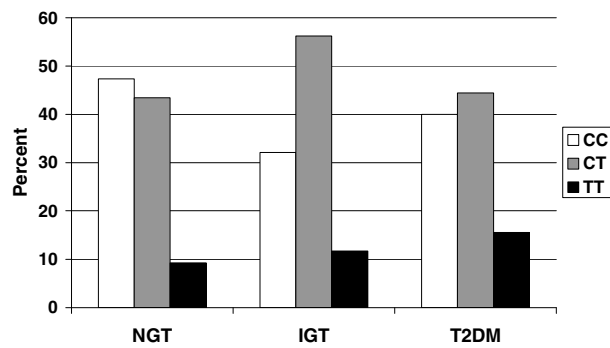
(b.) rs11061971\*



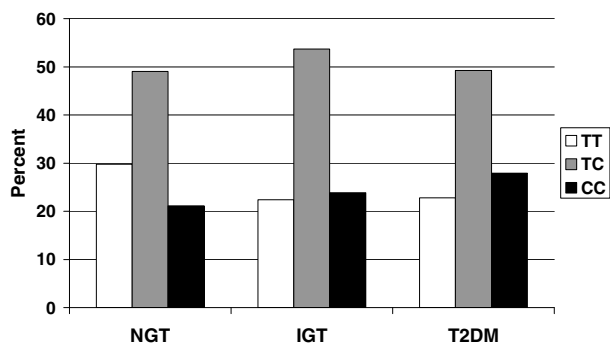
(c.) rs730032



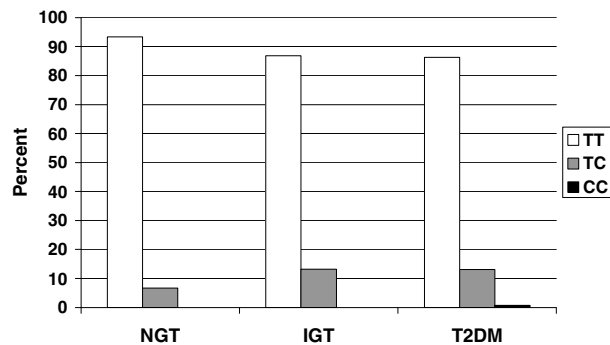
(d.) rs12342\*



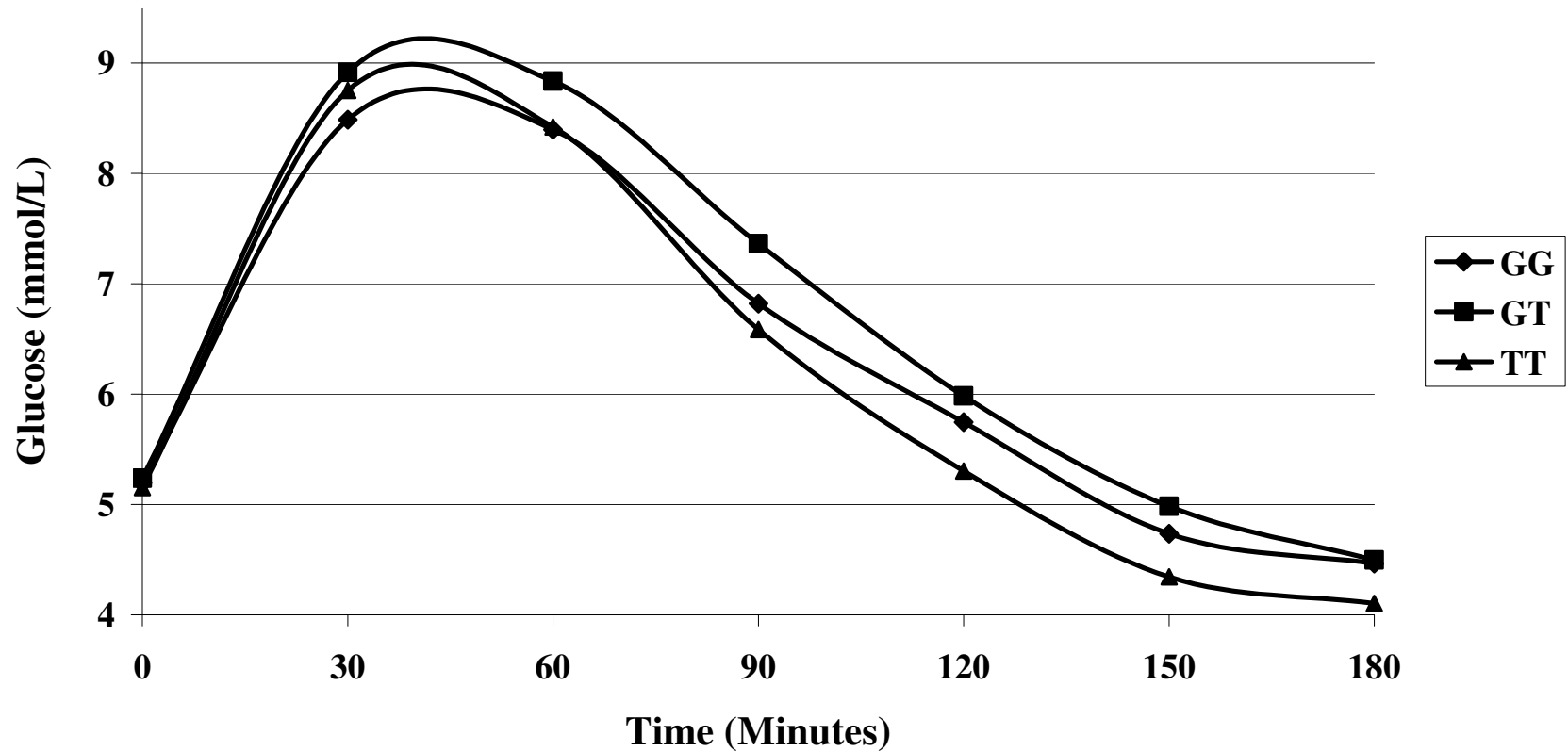
(e.) rs1044471\*



(f.) AR2-8f\*



\* SNPs with  $p < 0.05$  in the case/control analysis (T2DM/IGT vs. NGT).



**Supplemental Figure 3:** Mean plasma glucose levels at 30-minute intervals during a 3-hour 75-gram oral glucose tolerance test (OGTT) according to SNP rs1029629 genotype groups. Carriers of the G risk allele exhibited significantly higher plasma glucose levels at each 30-minute interval from 90 minutes to 180 minutes ( $p = 0.005 - 0.016$ ) and total glucose area under the curve during the OGTT ( $p = 0.021$ ). There was no association with plasma insulin during the OGTT