## **Supplementary Material**

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3	A candidate regulatory variant at the <i>TREM</i> gene cluster associates with decreased
4	Alzheimer's disease risk, and increased TREML1 and TREM2 brain gene expression
5	
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33	Supplementary Methods
34	IGAP AD-risk meta-analysis

AD-risk association results shown in this study were obtained from the International Genomics of Alzheimer's Project (IGAP) stage 1 AD-risk GWAS meta-analysis [1]. The IGAP AD-risk meta-analysis is a large two-stage study based upon genome-wide association studies (GWAS) on individuals of European ancestry. In stage 1, IGAP used genotyped and imputed data on 7,055,881 single nucleotide polymorphisms (SNPs) to meta-analyze four previously-published GWAS datasets consisting of 17,008 Alzheimer's disease cases and 37,154 controls (The European Alzheimer's disease Initiative – EADI, the Alzheimer Disease Genetics Consortium – ADGC, The Cohorts for Heart and Aging Research in Genomic Epidemiology consortium – CHARGE, The Genetic and Environmental Risk in AD consortium – GERAD). In stage 2, 11,632 SNPs were genotyped and tested for association in an independent set of 8,572 Alzheimer's disease cases and 11,312 controls. Finally, a meta-analysis was performed combining results from stages 1 & 2.

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#### Mayo Clinic WG-DASL eQTL dataset

48	Total RNA, utilized in the array-based Illumina WG-DASL discovery cohort (Table 1)
49	was isolated from frozen brain tissue using the Ambion RNAqueous kit and assessed for RNA
50	quality and quantity using the Agilent RNA 6000 Nano Chip and Agilent 2100 Bioanalyzer.
51	Only samples with an RNA integrity number (RIN) score $\geq 5$ were used. All subjects were from
52	the Mayo Clinic Brain Bank and underwent neuropathological evaluation by DWD. All ADs had
53	a Braak score of $\geq$ 4.0 and non-ADs a Braak score of $\leq$ 2.5. Many of the non-ADs had unrelated
54	pathologies. All ADs had a definite diagnosis according to the National Institute of Neurological
55	and Communicative Disorders and Stroke and the Alzheimer's Disease and Related Disorders
56	Association (NINCDS-ADRDA) criteria [2].
57	Expression measures were generated as described previously [3]. Briefly, samples were
58	randomized across plates and chips prior to array processing. Internal replicates were included
59	for quality control purposes. PCR and array processing was conducted at the Mayo Clinic
60	Medical Genome Facility Gene Expression Core in accordance with the manufactures' protocols.
61	Raw probe data was exported from GenomeStudio (Illumina Inc) and the lumi package of
62	Bioconductor [4, 5] was used for background subtraction, variance stabilizing transformation and
63	quantile normalization.
64	Although there are seven RefSeq genes at the TREM locus (TREM1, TREML1, TREM2,
65	TREML2, TREML3P, TREML4 and TREML5P) (Fig. 1), TREML3P and TREML5P are non-
66	coding pseudogenes for which there are no probes on the WG-DASL array. Only transcripts

- 67 whose expression was detected above background in  $\geq$  50% of the samples tested (**Table S1**)
- 68 were evaluated for their associations with *TREM* locus variants (**Table 2**). The location of the
- 69 WG-DASL probes relative to the transcripts is shown in Fig. 2. The probes were determined to

be complementary to sequences lacking known polymorphisms based on the human genome
assembly from March 2006 (NCBI36/hg18).

72

#### Mayo Clinic RNAseq dataset

Temporal cortex RNAseq data from 84 LOAD and 48 non-AD brains from the Mayo 73 Clinic Brain Bank that were not part of the Mayo Clinic WG-DASL eGWAS cohort but whose 74 75 neuropathological diagnosis followed the same criteria (**Table 1**), were employed for replication 76 of the associations that were detected with the WG-DASL gene expression measurements. Total 77 RNA, utilized for the RNAseq replication cohort was extracted using Trizol® reagent and cleaned using Qiagen RNeasy columns with DNase treatment. Samples were randomized prior to 78 the transfer of 40 (TCX) or 50 (CER) ng/ul of RNA to the Mayo Clinic Medical Genome Facility 79 80 Gene Expression and Sequencing Cores for library preparation and sequencing. The TruSeq RNA Sample Prep Kit (Illumina, San Diego, CA) was used for library preparation. The library 81 82 concentration, size distribution and RIN were measured on an Agilent Technologies 2100 Bioanalyzer. Only samples with a RIN score >5 were used. Sequencing was performed on the 83 Illumina HiSeq2000 using 101 base-pair (bp), paired end sequencing, with triplicate 84 multiplexing of barcoded samples (3 samples per flowcell lane). Base-calling was performed 85 using Illumina's RTA 1.18.61 or RTA 1.17.21.3. FASTQ sequence reads were aligned to the 86 87 human reference genome using TopHat 2.0.12 [6] and Bowtie 1.1.0 [7], and Subread 1.4.4 was 88 used for gene counting [8]. FastQC was used for quality control (QC) of raw sequence reads, and RSeQC was used for QC of mapped reads. Raw read counts were normalized using 89 90 Conditional Quantile Normalization (CQN) via the Bioconductor package; accounting for 91 sequencing depth, gene length, and GC content. RNAseq data for this cohort is available at the Sage Synapse, AMP AD Knowledge Portal 92

93 (<u>https://www.synapse.org/#!Synapse:syn2580853/wiki/66722</u>), under synapase ID syn3163039
94 (Mayo RNAseq).

95	Genotypes for rs9357347 were obtained using a TaqMan® SNP genotyping assay,
96	C2814743_10. Genotyping was performed at the Mayo Clinic in Jacksonville using an ABI
97	PRISM 7900HT Sequence Detection System with 384-Well Block Module from (Applied
98	Biosystems, Foster City, California). The genotype data was analyzed using the SDS software
99	version 2.2.3 (Applied Biosystems).

100

#### 101 Religious Orders Study and the Rush Memory and Aging Project (ROS/MAP)

#### 102 **RNAseq dataset**

RNA was isolated from frozen dorsolateral prefrontal cortex tissue of ROS/MAP subjects 103 [18, 19] using the miRNeasy Mini Kit and RNase-Free DNase Set (Qiagen, Germantown, MD). 104 RNA concentration and quality were determined using a Nanodrop (Thermo Fisher Scientific, 105 Wilmington, DE) and Bioanalyzer (Agilent Technologies, Santa Clara, CA), respectively. Only 106 107 samples with a RIN score >5 were used for library construction, which was assembled using 50ng/ul of RNA for the strand-specific dUTP method. The library was read using Illumina HiSeq 108 with 101 base pair paired-end reads and a goal coverage of >85 million paired-end reads. FPKM 109 110 (Fragments per Kilobase of Exon Per Million Fragments Mapped) were quantile normalized with Combat correcting for batch. RNAseq data for this cohort is available at the Sage Synapse, AMP 111 AD Knowledge Portal (https://www.synapse.org/#!Synapse:syn2580853/wiki/66722), under 112 synapase IDs syn3388564 (ROS/MAP RNAseq). 113

114	Genotypes for rs9357437 were obtained from three subsets of subjects. Genotypes for the
115	first two subsets were generated in 2009 on the Affymetrix Genechip 6.0 platform (Affymetrix,
116	Inc, Santa Clara, CA, USA) at the Broad Institute's Center for Genotyping or the Translational
117	Genomics Research Institute. The third subset was genotyped in 2012 on the Illumina
118	HumanOmniExpress platform (Illumina, Inc, San Diego, CA, USA) at the Children's Hospital of
119	Philadelphia. All three data sets underwent the same quality control (QC) analysis (genotype call
120	rate > 95%, Hardy Weinberg Equilibrium > 0.001). Using Beagle software (version: 3.3.2),
121	dosage data was imputed for all genotyped samples who passed QC using the 1000 Genomes
122	Project (2011, Phase 1b) as a reference
123	
124	Determination of linkage disequilibrium
125	Linkage disequilibrium of variants at the TREM locus (Fig. 3) was evaluated in the Mayo
126	Clinic AD-risk GWAS HapMap2 imputed dataset (815 AD, 1218 controls) using Haploview 4.0
127	[9]. TREM2 AD-risk missense variants rs142232675 (p.D87N) and rs75932628 (p.R47H) were
128	not present in the Mayo GWAS HapMap2 imputed dataset, but were directly genotyped in the
129	Mayo Clinic samples with TaqMan® assays, and were included to show their LD with variants
130	that associate with AD-risk in the IGAP meta-analysis. Sixteen variants located within 100kb of
131	a <i>TREM</i> gene and that had an AD-risk p≤0.0015 in the IGAP stage 1 meta-analysis are included,
132	in addition to two rare missense TREM2 coding variants [rs142232675 (p.D87N), and
133	rs75932628 (p.R47H)] and 5 common TREM locus SNPs with prior reports of AD-risk
134	(rs3747742) [10] or endophenotype (rs7759295, rs6910730, rs6922617, rs6916710) [11, 12]

#### 136 **Supplementary Results**

#### 137 Assessment of potential collider conditioning bias

- 138 Since the primary goal of this study was to estimate the effect of genetic variants on gene
- 139 expression, rather than their effect on disease status, we combined ADs and non-ADs in the
- 140 linear regression analysis and included diagnosis as a covariate. The diagnosis covariate was
- 141 coded as the presence or absence of AD. However, adjusting for diagnosis status could
- 142 potentially introduce a collider conditioning bias if both the genotype and the expression levels
- 143 are associated with disease status [13]. Therefore, we have also analyzed the combined set of
- 144 AD+nonAD, without adjustment for disease status, in order to determine if the effect of genotype
- 145 on expression disappears or remains in the latter analysis. **Table S2**, shows results for the two
- 146 types of analyses that were performed in each of the three datasets (Mayo WG-DASL, Mayo
- 147 RNAseq and ROS/MAP RNAseq): (1) AD and nonAD combined while adjusting for diagnosis,
- 148 (2) AD and nonAD combined not adjusting for diagnosis. Overall, the results from analyses 1
- and 2 are very similar, suggesting that there is no real impact of a collider effect.
- 150

#### 151 Effect of RIN on percent detection and rs9357347 eQTL association

- 152 **Fig. S6** shows *TREML1* and *TREM2* detection percentage stratified by RIN, and demonstrates
- that neither *TREML1* nor *TREM2* detection percentage is affected by RIN. **Table S3** shows
- results of the rs9357347 eQTL associations in the Mayo WG-DASL dataset when stratifying by
- samples above and below the median RIN of 6.5 (**Table S3**). These results indicate that RIN
- does not significantly impact the magnitude of the rs9357347 eQTL associations, as the

157	estimates of the beta coefficients overlap with those observed in the analysis not stratified by
158	RIN (Table S2). Although the significance of the association is lessened in the stratified
159	analysis, this is likely due to the smaller sample size of the stratified groups compared to the
160	sample size of the combined analysis.
161	
162	Association of rs9357347 with Braak stage
163	Given the association of rs9357347 with AD-risk, we tested the hypothesis that this
164	variant could also show an association with Braak stage, as the latter is an important criterion for
165	the neurophathological diagnosis of AD [14]. Implementing an ANOVA model in R that
166	included age-at-death, sex and APOE ε4 dose (0, 1 or 2 alleles), in the two larger datasets (Mayo
167	WG-DASL and ROS/MAP RNAseq), we determined that rs9357347 does not significantly
168	contribute to the variance in Braak stage in either of these two cohorts ( $p=0.91$ and $p=0.27$ ,
169	respectively). In addition, we implemented linear regression analysis in R, again using the two
170	larger datasets to estimate the effect of each copy of the rs9357347 minor allele on Braak stage,
171	including age-at-death, sex and APOE ε4 dose in the model. As shown in <b>Table S4</b> , we did not
172	detect a significant association of rs9357347 with Braak stage in either cohort.
173	
174	Association of rs9357347 with cognition
175	We also evaluated the association of rs9357347 with measures of global cognitive decline
1/5	we also evaluated the association of 187557547 with measures of global cognitive deenne
176	and global cognition at the last evaluation before death in the ROS/MAP cohort. In this dataset,
177	global cognition is a variable for overall cognitive function measured by the raw scores from 19
178	different tests that are converted to z scores and averaged. Global cognitive decline is a

179	longitudinal cognitive phenotype based on repeated measures of global cognition, as previously
180	described [15, 16]. The analysis was performed using linear regression analysis implemented in
181	R, under an additive model for rs9357347, and adjusting for age-at-death, sex and APOE $\varepsilon$ 4
182	dose. Neither global cognitive decline nor global cognition at last evaluation shows an
183	association with rs9357347 in this cohort (Table S5).
184	
185	Association of age with TREML1 and TREM2 expression
186	As the WG-DASL cohort was overall younger than the two RNAseq cohorts, we assessed
100	its the web Drible conort was overall younger than the two Rivised conorts, we assessed
187	the association of the age covariate on TREML1 and TREM2 gene expression levels in the linear
188	regression model described in the Material & Methods section 2.4. Age was not significantly
189	associated with either TREML1 or TREM2 expression in the Mayo WG-DASL cohort (p>0.05).
190	On the other hand, both in the Mayo RNAseq and ROS/MAP RNAseq cohorts, TREML1 and
191	TREM2 expression levels appeared to be slightly increased with age, albeit the magnitude of the
192	effect sizes were modest, with beta coefficients equivalent to approximately a 1.01 and 1.03-fold
193	change in expression levels (Mayo RNAseq: TREML1 p=0.085, beta=0.01; TREM2 p=0.026,
194	beta=0.02. ROS/MAP RNAseq: <i>TREML1</i> p=2.0x10 <sup>-3</sup> , beta=0.04; <i>TREM2</i> p=4.4x10 <sup>-5</sup> ,
195	beta=0.03). Since TREML1 and TREM2 gene expression levels appear be increased with age, it
196	is possible that this might have led to a decrease in power to detect an association of rs9357347-
197	C with increased levels of these genes in the two older cohorts.
198	
199	Association of diagnosis with TREML1 and TREM2 expression

200	To assess if diagnosis is associated with TREML1 and/or TREM2 gene expression levels, linear
201	regression analyses were performed in R in each of the three datasets, adjusting for all other
202	covariates included in the eQTL analyses described in the Materials and Methods section 2.4, as
203	well as rs9357347 minor allele dose. The box plots in <b>Fig. S5</b> show the direction of the change ir
204	expression between AD and nonAD subjects, and indicate the significance of the association for
205	each test. We observe a consistent trend of higher TREML1 and TREM2 expression in AD versus
206	nonADs, although some of these associations do not reach statistical significance. The trend
207	toward higher TREML1 and TREM2 expression in AD subjects could be a reflection of
208	microglial activation and/or proliferation known to occur in AD brains.
209	
210	
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#### **Supplementary Table**

#### Table S1. Percent detection of *TREM* locus transcripts.

			Ma C	yo WG-DA erebellun	ASL: n <sup>a</sup>	Mayo WG-DASL: Temporal Cortex <sup>b</sup>		Mayo Clinic RNAseq: Temporal Cortex <sup>c</sup>	ROS/MAP RNAseq: DFPC <sup>d</sup>	
Symbol	Ensembl Gene ID	WG-DASL Probe ID	AD + non- AD	AD	nonAD	AD + non- AD	AD	Non- AD	AD + non-AD	AD + non-AD
TREM1	ENSG00000124731	ILMN_1688231	0.00	0.00	0.00	0.25	0.00	0.51	18.18	66.99
TREML1	ENSG00000161911	ILMN_1690783	100.00	100.00	100.00	100.00	100.00	100.00	100.00	97.84
TREM2	ENSG0000095970	ILMN_1701248	40.91	43.59	37.29	98.25	99.50	96.95	100.00	100.00
TREML2	ENSG00000112195	ILMN_1740864	17.38	17.44	17.51	6.27	10.40	2.03	8.33	24.75
TREML4	ENSG00000188056	ILMN_2205322	6.15	4.62	7.91	2.26	2.97	1.52	2.27	15.13

The percentage of samples with detectable expression of *TREM* family transcripts in each of the expression datasets studied. For the WG-DASL dataset (a,b) the corresponding WG-DASL probe is indicated. Only *TREML1* and *TREM2* expression are detectable above background in at least 50% of the Mayo WG-DASL samples tested (a,b), in at least one tissue; c: A detection threshold >-1, for cqn normalized expression levels was used to determine percent detection; d: percent detection was calculated as the proportion of subjects who express > 0 FPKM, DFPC = dorsolateral prefrontal cortex. The WG-DASL array lacked probes for the two *TREM* pseudogenes; therefore they were not measured in the Mayo WG-DASL cohort. Expression levels were not available for the *TREM* pseudogenes in

the ROS/MAP dataset. Based on the Mayo RNAseq dataset, the percent detection of TREML3P and TREML5P in temporal cortex are

15% and 5% respectively.

#### Table S2. Analyses to assess the potential of introducing collider conditioning bias in the

			TREML1			TREM2		
Dataset	Group	N	beta	SE	p-value	beta	SE	p-value
Mayo WG-DASL:	All (W/Dx) <sup>a</sup>	380	0.088	0.032	6.28E-03	0.090	0.045	4.61E-02
Temporal Cortex	All (Wo/Dx) <sup>b</sup>	380	0.083	0.033	1.32E-02	0.088	0.045	5.33E-02
Mayo Clinic	All (W/Dx) <sup>a</sup>	132	-0.030	0.108	7.82E-01	0.084	0.128	5.13E-01
RNAseq: Temporal Cortex	All (Wo/Dx) <sup>b</sup>	132	-0.023	0.111	8.40E-01	0.102	0.145	4.86E-01
ROS/MAP RNAseq:	All (W/Dx) <sup>a</sup>	494	0.089	0.114	4.36E-01	0.124	0.060	3.77E-02
DFPC	All (Wo/Dx) <sup>b</sup>	494	0.089	0.114	4.35E-01	0.125	0.060	3.81E-02

#### linear regression model due to adjustment for diagnosis.

For each of the three datasets, linear regression analysis was run in a: AD and non-AD

combined, with diagnosis included as a covariate; b: Analysis of AD and non-AD combined,

without adjustment for diagnosis. N = sample size. SE= standard error. DFPC = dorsolateral

prefrontal cortex. Given that all expression measures were on a log2 scale, fold-change for the

beta coefficients =  $2^{beta}$ .

#### Table S3. Association of the TREM locus candidate regulatory variant, rs9357347, with

Gene Symbol	RIN group	N	beta	SE	p-value
	RIN < 6.5	188	0.087	0.042	0.043
IREIVILI	RIN > 6.5	192	0.084	0.046	0.069
TOCMO	RIN < 6.5	188	0.110	0.063	0.084
I KEIVIZ	RIN > 6.5	192	0.075	0.065	0.250

#### TREML1 and TREM2 gene expression stratified by RIN.

Data shown for Mayo WG-DASL temporal cortex (AD+Non-AD) dataset. Samples were

stratified into two groups representing those with a RIN below the median RIN of 6.5 and those

with a RIN above 6.5. N = sample size. SE= standard error. Given that all expression measures

were on a log2 scale, fold-change for the beta coefficients =  $2^{beta}$ .

#### Table S4. Association of rs9357347 with Braak stage.

Dataset	N	beta	SE	p-value
Mayo WG-DASL: Temporal Cortex	399	-0.139	0.160	0.387
ROS/MAP RNAseq: DFPC	492	0.053	0.081	0.515

The two largest cohorts were evaluated: Mayo WG-DASL and ROS/MAP RNAseq. The variant was tested for association with Braak stage using linear regression under an additive model and including age-at-death, sex and *APOE*  $\epsilon$ 4 dose as covariates. In this model, the beta coefficient is interpreted as the change in Braak score associated with each copy of the minor allele. N = sample size. SE= standard error. DFPC = dorsolateral prefrontal cortex.

#### Table S5. Association of rs9357347 with cognition.

Phenotype	N	beta	SE	p-value
Global cognitive decline	470	-0.007	0.007	0.320
Global cognition at last visit	493	-0.058	0.071	0.418

Measures of cognition that were available in the ROS/MAP cohort were tested for association with rs9357347 using linear regression under an additive model, including age-at-death, sex and *APOE*  $\varepsilon$ 4 dose as covariates. N = sample size. SE = standard error. Z scores of the cognitive scores were analyzed, thus these beta coefficients can be interpreted as changes in z-score associated with each copy of the minor allele.

### **Supplementary Figures**

Fig. S1. Spearman correlation plots for *TREML1* and *TREM2* brain expression levels measured by WG-DASL vs. RNAseq approaches.



(A) *TREML1* and (B) *TREM2* temporal cortex gene expression residuals (adjusted for covariates) are plotted for RNAseq vs. WG-DASL values. The Spearman correlation coefficient is shown above the scatter plot and the correlation p-value is shown inside the plot. The RNAseq and DASL residuals show a highly significant positive correlation.

# Fig. S2. Box plots of rs9357347 genotype associations with *TREML1* and *TREM2* brain gene expression levels.



Gene expression residuals obtained in R adjusted for covariates [*APOE*  $\epsilon$ 4 dosage, age at death, diagnosis, sex, PCR plate, RIN, (RIN-RINmean)<sup>2</sup>] were plotted for each rs9357347 genotype. Each circle represents an individual gene expression residual; the horizontal line within the box is the median; the box represents the interquartile range (IQR); the whiskers represent the range of the data points within 1.5 × IQR below the 1<sup>st</sup> quartile and 1.5 × IQR above the 3<sup>rd</sup> quartile (anything outside of this range is called an outlier). The x-axis indicates the number of minor alleles. The minor (C) allele of rs9357347 is associated with increased brain expression of both *TREML1* and *TREM2*.

#### IGAP AD risk 100 4 0 TREML1 eQTL ♦ $\diamond$ 0.8 rs9357347 $\diamond$ $\land$ 0.6 80 Recombination rate (cM/Mb) 3 0.4 0.2 -log<sub>10</sub>(p-value) 60 2 40 1 20 0 0 Regulome rs879491 rs12665606 rs9471543 Score <3 rs9357347 APOBEC2→ ←TREML2 TREM1 ADCY10P1 TREM2 TREML4→ NCR2→ ←OARD1 REML1 TREML3P TREML5P NFYA

15 41.2 Position on chr6 (Mb) 41.25

41.3

41.35

#### Fig. S3. Regional association plot showing AD-risk and TREML1 eQTL p-values at the

#### TREM locus.

41.05

41.1

41.15

On this plot each variant is depicted as both, a circle denoting its IGAP stage 1 meta-analysis pvalue, and a diamond denoting its *TREML1* eQTL p-value. All variants at the *TREM* locus that either achieved a p-value  $\leq 0.0015$  in the IGAP stage1 meta-analysis or that had a *TREML1* pvalue < 0.05 in our eQTL analysis of temporal cortex gene expression measured by WG-DASL mircroarrays are shown, with p-values indicated by the scale on the left y-axis as  $-\log_{10}$ (p-value). The putative regulatory variant, rs9357347, is represented by the purple circle/diamond. The colors of all other circles and diamonds correspond to the colors on the r<sup>2</sup> scale shown at the top right corner of the plot, and denote the LD of each variant with rs9357347. The values on the yaxis on the right side of the plot correspond to the recombination rates across this region as shown by the blue line. Variants that have Regulome scores <3 are shown directly below the plot. Gene locations across the targeted genomic region (*TREM* gene +/-100 kb: chr6:41016999-41354457) are shown below the plot relative to the variant positions according to the February 2009 human genome assembly (GRCh37hg19). The regional association plot was generated using LocusZoom (http://locuszoom.sph.umich.edu/locuszoom/).



#### Fig. S4. Regional association plot showing AD-risk and TREM2 eQTL p-values at the



TREM locus.

On this plot each variant is depicted as both, a circle that denotes its IGAP stage 1 meta-analysis p-value, and an "X" denoting its TREM2 eQTL p-value. All variants at the TREM locus that either achieved a p-value  $\leq 0.0015$  in the IGAP stage1 meta-analysis or that had a *TREM2* pvalue < 0.05 in our eQTL analysis of temporal cortex gene expression measured by WG-DASL mircroarrays are shown, with p-values indicated by the scale on the left y-axis as  $-\log_{10}(p-value)$ . The putative regulatory variant, rs9357347, is represented by the purple circle/X. The color of all other circles and Xs correspond to the colors on the  $r^2$  scale shown at the top right corner of the plot, and denote the LD of each variant with rs9357347. All other symbols are described in Fig. **S3**.

Fig. S5. Box plots of gene expression residuals for *TREML1* and *TREM2* in AD and nonAD subjects, for each of the three cohorts investigated.



A and B: Expression measure residuals for *TREML1* (A) and *TREM2* (B) in the Mayo WG-DASL dataset, adjusted for rs9357347 minor allele dose, age-at-death, sex, *APOE* ε4 dose, RIN, (RIN-RINmean)<sup>2</sup> and PCR plate. *TREML1* (C) and *TREM2* (D) in the Mayo Clinic RNAseq dataset, adjusted for rs9357347 minor allele dose, age-at-death, sex, *APOE* ε4 dose, RIN, (RIN-RINmean)<sup>2</sup> and flowcell. *TREML1* (E) and *TREM2* (F) in the ROS/MAP RNAseq dataset, adjusted for rs9357347 minor allele dose, age-at-death, sex, *APOE* ε4 dose, RIN, (RIN-RINmean)<sup>2</sup>.



# and *TREM2* across groups of subjects defined by **RIN** value.

Fig. S6. Bar charts of percentage of subjects with detectable gene expression for TREML1

Subjects were binned according to RIN value and the proportion of subjects in each bin that met the detection threshold was calculated. A and B: Expression detection percentage for each RIN bin for *TREML1* (A) and *TREM2* (B) in the Mayo WG-DASL dataset. C and D: Expression detection percentage for each RIN bin for *TREML1* (A) and *TREM2* (B) in the Mayo Clinic RNAseq dataset. E and F: Expression detection percentage for each RIN bin for *TREML1* (A) and *TREM2* (B) in the ROS/MAP RNASseq dataset.