

## **Additional Supplementary Methods**

**Donor Clinical information.** Pancreatic tissue and isolated islets from a 33-year-old Caucasian male (BMI 25.8 kg/m<sup>2</sup>) diagnosed with type 1 diabetes (T1D) at age 16 were procured in collaboration with the Institute for the Advancement of Medicine (IIAM) during organ donation post head trauma secondary to a motorcycle accident. Based on the redacted medical record, the individual's diabetes was treated with insulin (A1C of 8.9%) and described as poorly controlled; he was reported to experience "tingling in feet and hands." He had concurrent hypertension diagnosed at age 16, a kidney infection at age 20, and a family history of diabetes (mother, maternal aunt, cousins, and grandmother). During the terminal hospital admission of four days, the donor was in the intensive care unit on respiratory support and treated with corticosteroids, antibiotics, and vasopressors. His blood glucose ranged from 105-582 mg/dL and he was treated with intravenous insulin. Renal (Cr 1.07 mg/dL) and hepatic (AST 26 u/L, ALT 24 u/L, ALP 53 u/L) function were normal. He was pronounced brain dead and organs were procured for transplantation. Blood samples collected at the time of organ donation showed the donor carried high-risk HLA haplotypes for T1D (HLA Class II DR4, DQA1 03; DR4-DQ8), had detectable C-peptide (0.4 ng/mL), and was negative for T1D-associated autoantibodies (GAD65, mIAA, ZnT8, ICA512).

**Human Pancreatic Islet Procurement.** Pancreata and islets from normal donors and the case donor were obtained through a partnership with the International Institute for Advancement of Medicine (IIAM), National Disease Research Interchange (NDRI),

Integrated Islet Distribution Program (IIDP), and Network for Pancreatic Organ Donors with Diabetes (nPOD). For most donors, including the one outlined in this report, islets and tissue specimens were procured from the same organ as described (1). Human islets and tissue obtained for all studies are described in **Table S1**. For the reported donor, the pancreas had normal weight (75.4 g), unusual for 17 years of T1D as observed by our group (adult ( $\geq 18$  yrs of age) control:  $84.2 \pm 4.6$ g,  $n=20$  versus adult with  $\geq 10$  yrs duration T1D:  $45.6 \pm 2.7$ g,  $n=20$ ; \*\*\*\*,  $p < 0.0001$  two-tailed Student's *t*-test) and others (2, 3), and the islet-enriched digestion fraction contained 54,200 islet equivalents (IEQs) with 70% purity. The Vanderbilt University Institutional Review Board declared studies on de-identified human pancreatic specimens does not qualify as human subject research. Donor information was provided by IIDP for islets accepted from this organization. A redacted medical record was provided for the de-identified case received in collaboration with IIAM (**Table S1**).

**DNA sequencing.** DNA was extracted from snap-frozen donor tissue using Wizard Genomic DNA purification kit (Promega, A1120) and the sample was sequenced using a custom designed next-generation sequencing (NGS) targeted panel that includes 148 genes implicated in monogenic forms of diabetes (neonatal diabetes and MODY), insulin resistance, lipodystrophy, obesity, rare syndromic forms of diabetes, and diabetes candidate genes (4). All variants were interpreted according to the guidelines of the American College of Medical Genetics. The pathogenic variant identified by NGS in this donor was classified as described (5) and was confirmed by Sanger sequencing. All sequencing results for the case donor are listed in **Table S2**.

**Immunohistochemical Analysis.** Immunohistochemical analysis of the pancreas was performed on serial 5  $\mu\text{m}$  cryosections from multiple blocks from head, body and tail regions as described (6). Primary antibodies to all antigens and their concentrations are listed in **Table S3** and were visualized using the appropriate secondary antibodies listed in **Table S4**. Digital images were acquired with a Zeiss LSM510 META laser scanning confocal microscope (Carl Zeiss) or Fluorescent ScanScope (Aperio). Apoptosis was assessed by TUNEL stain (Millipore, S1675).

**Assessment of pancreatic islet function *in vitro*.** Function of islets from this donor and normal controls (**Table S1**) were studied in a dynamic cell perfusion system at a perfusate flow rate of 1 mL/min (7). The effluent was collected at 3-minute intervals using an automatic fraction collector. Insulin and glucagon concentrations in each perfusion fraction and islet extracts were measured by radioimmunoassay (insulin, RI-13K, Millipore; glucagon, GL-32K, Millipore). Area under the curve (AUC) above baseline hormone release was calculated with the trapezoidal method by GraphPad Prism 7.0.

**$\beta$  and  $\alpha$  cell sorting by flow cytometry for RNA-sequencing.** As described previously (1), human islets were dispersed using 0.025% trypsin and sorted for  $\alpha$  and  $\beta$  cells using primary and secondary antibodies characterized previously by our group and others and used to isolate high-quality RNA from islet cells (8, 9) (**Tables S3** and **S4**). Appropriate single color compensation controls were run alongside samples. Prior to sorting, propidium iodide (0.05  $\mu\text{g}/100,000$  cells; BD Biosciences) was added to

samples for non-viable cell exclusion. Flow analysis was performed using an LSRFortessa cell analyzer (BD Biosciences), and a FACSAria III cell sorter (BD Biosciences) was used for FACS. Analysis of flow cytometry data was completed using FlowJo 10.1.5 (Tree Star).

**RNA-Sequencing.** Sorted  $\alpha$  and  $\beta$  cells (5,000-125,000) were added to 200  $\mu$ L lysis/binding solution in the RNAqueous micro-scale phenol-free total RNA isolation kit (Ambion) as previously described (1). RNA integrity was evaluated (Agilent 2100 Bioanalyzer – control  $\alpha$  cells:  $8.36 \pm 0.22$  RIN, and *HNF1A*<sup>+T260M</sup>  $\alpha$  cells: RIN 8.3; control  $\beta$  cells:  $7.86 \pm 0.67$ , and *HNF1A*<sup>+T260M</sup>  $\beta$  cells: RIN 7.40) and high-integrity total RNA was amplified (Ovation system; NuGen Technologies) per standard protocol as described previously (6). Amplified cDNA was sheared to target 200bp fragment size and libraries were prepared using NEBNext DNA Library Prep (New England BioLabs). 50bp Paired End (PE) sequencing was performed on an Illumina HiSeq 2500 using traditional Illumina methods (10) to generate approximately 50 million reads per sample. Raw reads were mapped to the reference human genome hg19 using TopHat v2.1 (11). Aligned reads were then imported onto the Avadis NGS analysis platform (Strand life Sciences) and filtered based on read quality followed by read statistics to remove duplicates. Transcript abundance was quantified using the TMM (Trimmed Mean of M-values) algorithm (12, 13) as the normalization method.

**Cell lines.** A non-islet cell line, HeLa, and pancreatic islet cell line, MIN6, were cultured in a monolayer under conditions described previously (14).

**Site Directed Mutagenesis.** Point mutation of HNF1 $\alpha$ -T260M expressing plasmid was generated by QuickChange II Site-Directed Mutagenesis Kit (Agilent) based on a Myc-tagged human HNF1 $\alpha$  expressing plasmid (Addgene, FR\_HNF1A).

**Electrophoretic Mobility Shift Assay (EMSA) and Western Blot.** HeLa or MIN6 cells were transfected with either wildtype (WT) or mutant (T260M) Myc-tagged HNF1 $\alpha$  plasmid. Forty-eight hours post transfection, nuclear extract preparation and DNA binding reactions were performed as described (15). Briefly, 10 $\mu$ g of nuclear extract and 400fmol (150000-200000cpm) of <sup>32</sup>P labeled double strand DNA probe (WT Oligo: 5'-TCGACTTGTTAATAATTCACCAGAG-3') were mixed with a 20 $\mu$ l reaction system containing 10 mM HEPES (pH 7.9), 10% glycerol, 120 mM NaCl, 2 mM DTT, 1 mM of EDTA and 0.8 $\mu$ g of poly(dI-dC). The nuclear extract was pre-incubated in buffer for 20 min on ice with antibody as appropriate then the <sup>32</sup>P labeled DNA probe was added and incubated for an additional 20 min on ice. The un-labeled DNA oligo competitors were added together with the probe at 20-fold molar excess (Comp Oligo: 5'-TCGACTTGCGGACGACGGCACCAGAG-3'). EMSA reactions were separated on 5% or 6% native acrylamide gels in 0.5% Tris borate-EDTA buffer (TBE) at 200 V for 1.5 h. The protein:DNA complexes were visualized by autoradiography. Western blot analysis was performed as described (16). Primary antibodies used in EMSA and western blots are listed in **Table S3**.

**Luciferase Reporter Assays.** HeLa cells were co-transfected with the WT or site mutant (*MAFA* R3 M2G<sup>-7816</sup>) of the mouse *MAFA* Region 3 (R3) enhancer driven pFox-Prl-Firefly Luciferase plasmid (15), the phRL-TK Renilla luciferase internal control plasmid, and CMV-driven HNF1A<sup>WT</sup> and/or HNF1A<sup>T260M</sup> expression plasmids. Transcriptional activity was evaluated 48-hrs after transfection using a dual-luciferase assay according to the manufacturer's protocol (Promega). Each transfection was repeated at least three times. Firefly luciferase measurements were normalized to the Renilla internal control (phRL-TK). HNF1A<sup>WT</sup> and HNF1A<sup>T260M</sup> were produced at similar levels (**Figure S2G**).

**Quantification of nuclear protein expression.** Protein expression of nuclear factors in  $\alpha$  and  $\beta$  cells was quantified using MetaMorph 7.1 imaging software (Molecular Devices) using manual cell counting (1) where an average of 216.25 $\pm$ 99  $\alpha$  cells and 763 $\pm$ 140  $\beta$  cells were counted per normal donor (n=7 donors, **Table S1**) for each transcription factor, and 382  $\alpha$  cells and an average of 1169 $\pm$ 318  $\beta$  cells were counted for the *HNF1A*<sup>+T260M</sup> (n=1 donor) for each transcription factor.

**Quantification of islet cell mass.** To quantify endocrine cell area, 1-2 entire pancreatic sections from four blocks of the head, body, and tail regions of the donor pancreas and normal controls (n=7 donors, **Table S1**) were imaged using a Fluorescent ScanScope (Aperio). The ratio of hormone-positive cells for each hormone (insulin, glucagon, or somatostatin) over the total number of cells discovered by DAPI nuclear stain was

measured using imaging software Cytonuclear v3 algorithm (Indica Labs) and represented the fraction of total pancreatic parenchyma for each hormone (i.e. hormone-positive area). Donor islet density and size did not differ from controls. Cells calculated as double-positive for hormone were excluded in this analysis. Endocrine cell mass was determined as a product of the fraction of hormone-positive area and the measured pancreas weight taken before islet isolation (1g weight = 1cm<sup>3</sup> volume).

**Structural Analysis.** The X-ray structure of human HNF1A protein (PDB ID-1IC8) was retrieved from the PDB database (<https://www.rcsb.org/>). PyMOL Molecular Graphics System (Schrodinger, LLC; <https://sourceforge.net/projects/pymol/>) was used to visualize the DNA-protein complex to analyze interactions between the WT protein, mutant protein (T260M), and DNA.

**RNA-sequencing Analysis.** Genes with normalized expression values less than 25 were removed prior to differential expression analysis between controls and *HNF1A*<sup>+T260M</sup>  $\alpha$  or  $\beta$  cells. Fold change (cutoff  $\geq \pm 1.5$ ) was calculated based on p-value estimated by z-score calculations (cutoff 0.05) as determined by Benjamini Hochberg false discovery rate (FDR) correction of 0.05. Differentially expressed genes were further analyzed through Ingenuity Pathway Analysis (IPA, Qiagen) and Gene Ontology (GO) analysis using DAVID v6.8 (17).

**Statistics.** Values are shown as mean  $\pm$  standard error of the mean (SEM) for control samples. Data from a sample size of n=1 for the *HNF1A*<sup>+T260M</sup> donor precluded formal

statistical analysis. Two-tailed Student's t test was used for analysis of statistical significance for two-group comparison between controls and long-standing T1Ds when assessing pancreatic weight. A p-value less than 0.05 was considered significant.



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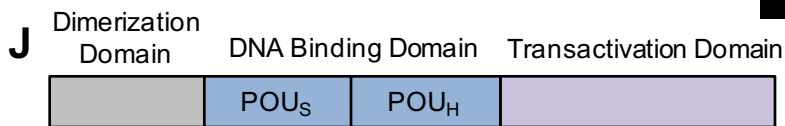
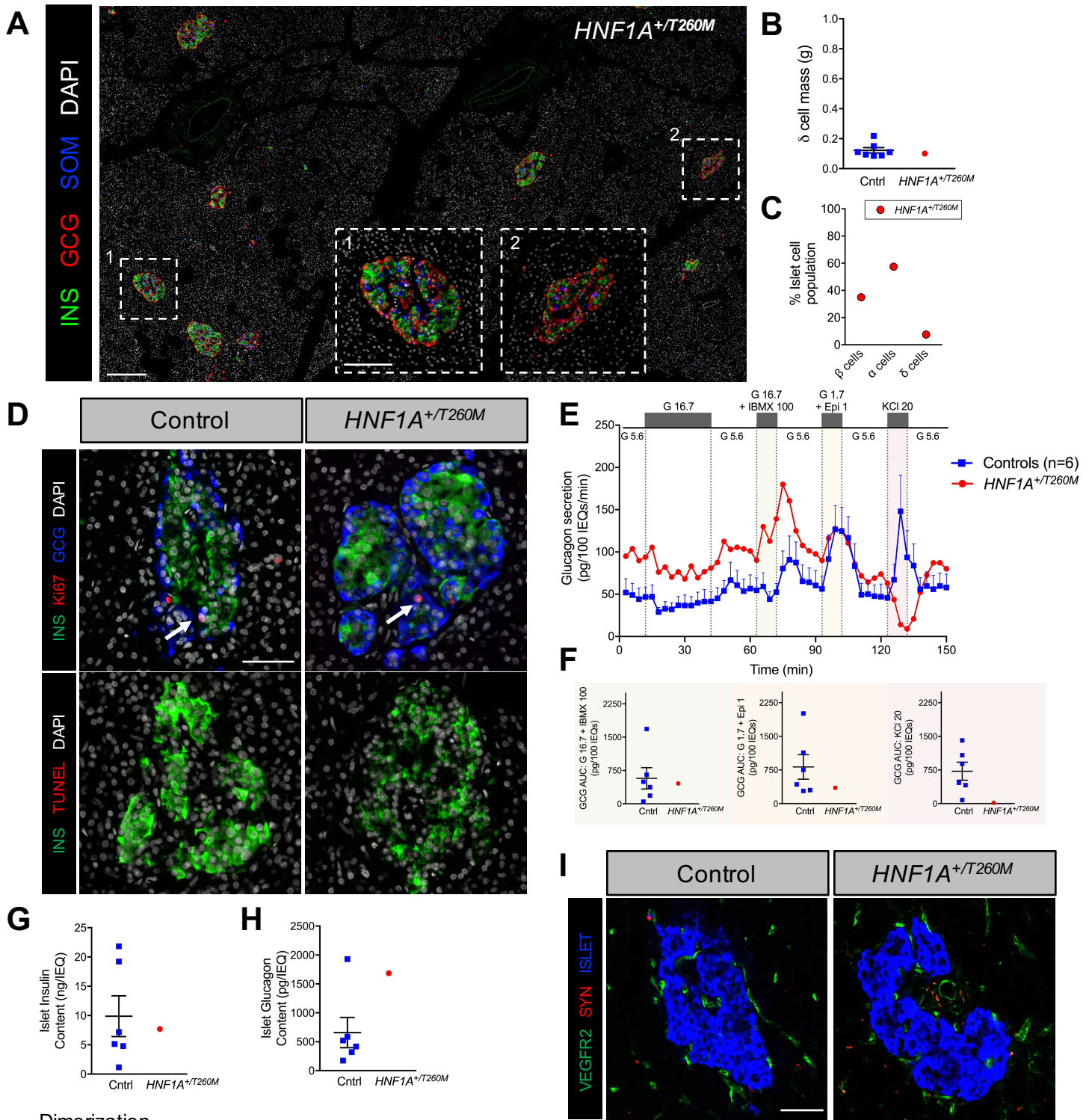
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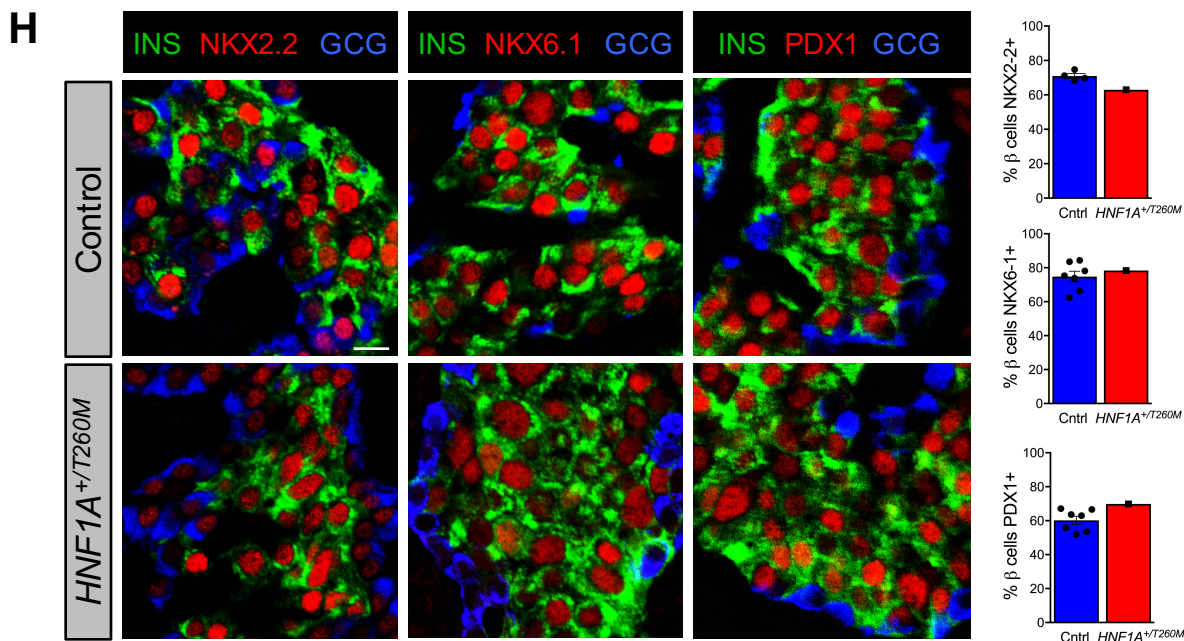
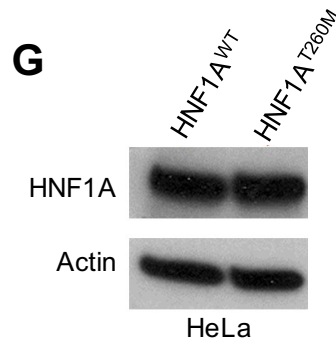
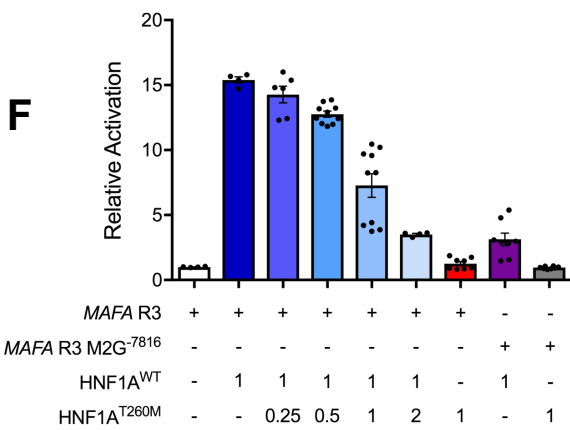
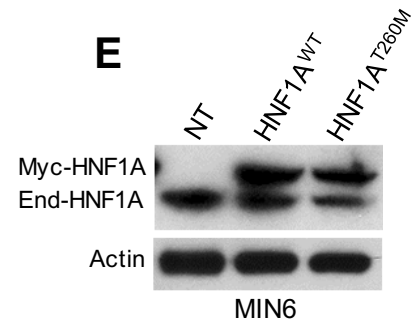
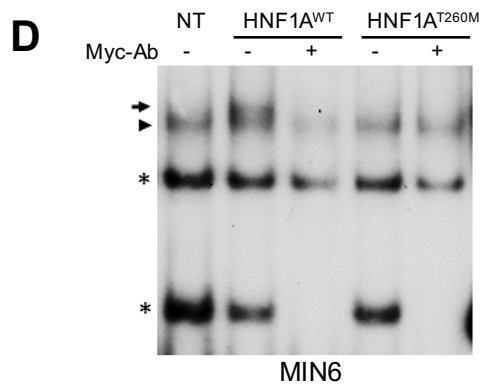
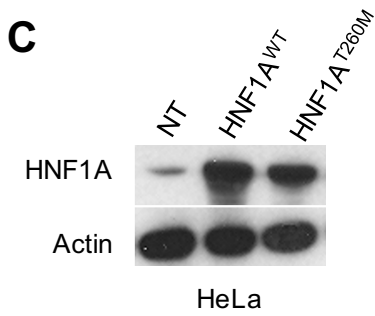
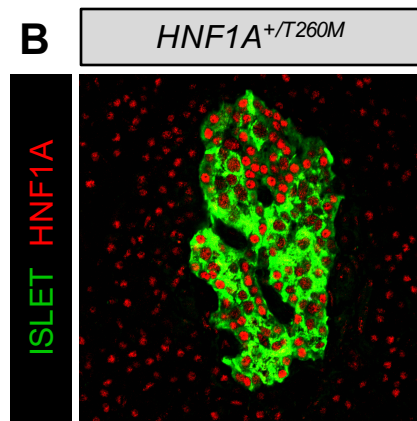
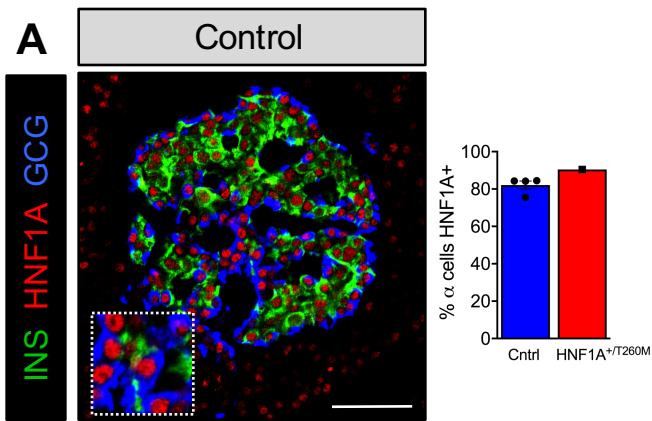
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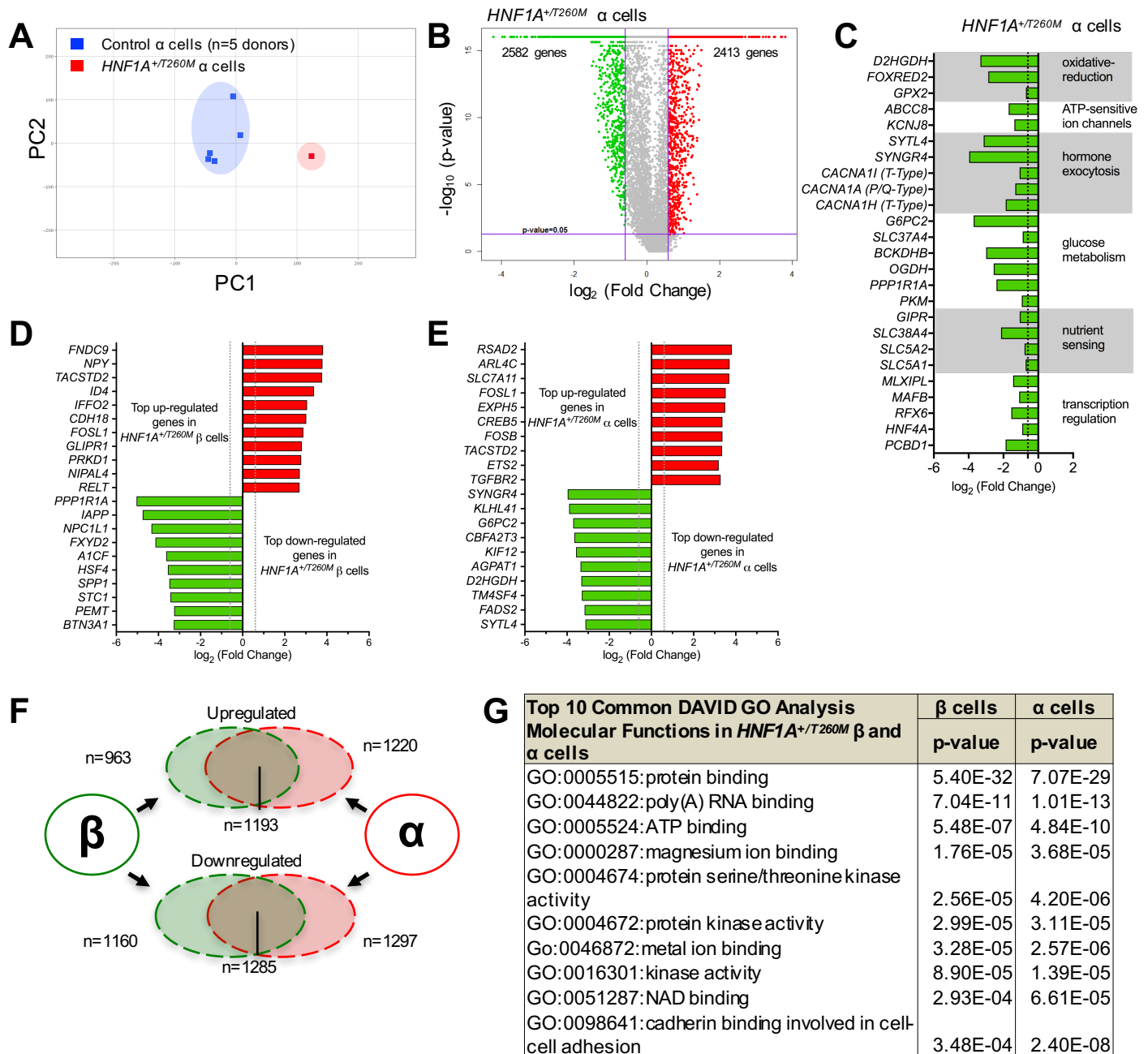
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<i>Homo sapiens</i>	GLGSNLV <b>T</b> EVRYVYNW
<i>Mus musculus</i>	GLGSNLV <b>T</b> EVRYVYNW
<i>Lupus familis</i>	GLGSNLV <b>T</b> EVRYVYNW

**Figure S1. Immunohistochemical and functional analysis of *HNF1A*<sup>+T260M</sup> pancreas.** (A) Pancreatic tissue section of *HNF1A*<sup>+T260M</sup> donor stained for insulin (INS), glucagon (GCG), and somatostatin (SOM) and counterstained with nuclear marker DAPI. All islets identified in this donor were insulin+. Scale bar is 250  $\mu$ m. Boxed and numbered islets represent islet heterogeneity. Magnified images of each islet in insets show islet #1 has more insulin-positive cells than islet #2. Scale bar for insets is 100  $\mu$ m. (B)  $\delta$  cell mass was calculated as described in **Figure 1**. (C) Endocrine cell populations in dispersed isolated islets from *HNF1A*<sup>+T260M</sup> donor contained 34.9%  $\beta$  cells, 57.4%  $\alpha$  cells, and 7.6%  $\delta$  cells. Normal control islets collected by this method had a range of 53.4 $\pm$ 2.6%  $\beta$  cells, 38.5 $\pm$ 2.7%  $\alpha$  cells, and 7.5 $\pm$ 0.9%  $\delta$  cells (18). (D) The native pancreatic tissue from *HNF1A*<sup>+T260M</sup> donor was assessed for proliferative marker Ki67 and apoptotic signal TUNEL. Scale bar is 50  $\mu$ m. Arrow depicts Ki67+ islet cells. (E) The same islets shown in **Figure 1C** were simultaneously analyzed for glucagon secretion and normalized to overall islet cell volume (expressed as islet equivalents, IEQs). As in **Figure 1**, **F** depicts integrated glucagon release as area under the curve from basal glucagon release for indicated secretagogues (corresponding to shaded color-matched regions of perfusion trace). Insulin (**G**) and glucagon (**H**) content in control and *HNF1A*<sup>+T260M</sup> islets were in the range of normal. (I) Normal innervation (synapsin) and vasculature (VEGFR2) were observed in islets (detected by insulin and glucagon) in donor. SYN – synapsin. Scale bar is 50  $\mu$ m. (J) HNF1A protein domain architecture and conservation of the T260 residue across species. Results of the control samples are expressed as mean  $\pm$  standard error of the mean.



**Figure S2. Expression and functional characterization of HNF1A<sup>T260M</sup> variant.** (A) Example of control staining for **Figure 2A** with quantification of HNF1A protein expression in  $\alpha$  cells. Scale bar represents 50  $\mu$ m and applies to **B**. (B) HNF1A nuclei associated with hormone-positive endocrine cells in donor islets, marked here with insulin, glucagon, somatostatin, and ghrelin on the same channel. (C) Corresponding western blot of HeLa cells without transfection and transfection with either wildtype (WT) or T260M mutant Myc-tagged HNF1A from **Figure 2B**. EMSA of HNF1A<sup>WT</sup> or HNF1A<sup>T260M</sup> transfected MIN6 cells confirmed the effects of the mutant protein on DNA-binding in an immortalized  $\beta$  cell line (D) with corresponding western blot (E). Specific elimination of the Myc-tagged HNF1A-DNA complex with Myc antibody (arrow) was observed only in WT transfected MIN6 cells, but not in Myc-tagged HNF1A<sup>T260M</sup> expressing conditions. The endogenous HNF1 $\alpha$ -DNA complex remained. Arrow – Myc-tagged HNF1A-DNA complex; arrow head – endogenous HNF1A-DNA complex in MIN6 cells; asterisk – nonspecific complexes; Myc-HNF1A – Myc-tagged HNF1A; End-HNF1A – Endogenous HNF1A of MIN6 cells; NT – non-transfected cells. (F) HNF1A<sup>T260M</sup> reduced MAFA R3-driven reporter activity in a dose and *cis*-element site dependent manner in HeLa cells. MAFA R3 M2G<sup>-7816</sup> – MAFA R3 site mutation. (G) Immunoblot analysis of HeLa cells transfected only with HNF1A<sup>WT</sup> or HNF1A<sup>T260M</sup>, which corresponds to the darkest blue and red bar conditions of panel F. (H) Analysis of native pancreatic tissue from HNF1A<sup>+T260M</sup> donor for expression of  $\beta$  cell-enriched transcription factors. HNF1A<sup>+T260M</sup>  $\beta$  cells expressed  $\beta$  cell markers NKX2.2, NKX6.1, and PDX1 similar to controls (n=7 donors; ages 8-55yrs). Scale bar represents 10  $\mu$ m and corresponds to all panels in H. Images represent one of three replicates. Results of the control samples are expressed as mean  $\pm$  standard error of the mean.



**Figure S3. Transcriptome analysis of purified *HNF1A*<sup>+/T260M</sup>  $\beta$  and  $\alpha$  cells by RNA-sequencing.** (A) PCA plot and (B) volcano plot of *HNF1A*<sup>+/T260M</sup>  $\alpha$  cells as described in main Figure 3. (C) Graph represents down-regulation of *HNF1A* associated-targets in  $\alpha$  cells from the *HNF1A*<sup>+/T260M</sup> donor. Graphs represent most significantly up- and down-regulated genes in the *HNF1A*<sup>+/T260M</sup>  $\beta$  cells (D) and  $\alpha$  cells (E) compared to controls (n=5 donors; ages 26-55yrs). The same set of control donor islets were used for  $\alpha$  and  $\beta$  cell transcriptomic analysis and are also published elsewhere (1, 9). (F) Venn diagrams depict the number of genes up- and down-regulated in *HNF1A*<sup>+/T260M</sup>  $\alpha$  and  $\beta$  cells highlighting approximately 50% overlap of up- and down-regulated genes between cell types. (G) Table represents the top 10 common Molecular Functions in *HNF1A*<sup>+/T260M</sup>  $\beta$  and  $\alpha$  cells identified by DAVID GO term analysis. Corresponding p-values, Ensembl Gene IDs and process GO accession numbers are listed in Tables S5 and S6.

**Table S1. Demographic and source information of all donors**

<b>Donors</b>	<b>Age (years)</b>	<b>Ethnicity/ Race</b>	<b>Gender</b>	<b>BMI</b>	<b>Cause of Death</b>	<b>Tissue/Islet Sources*</b>
<b>Normal Controls for Islet Perifusion</b>	8	African American	M	17.2	Anoxia	NDRI
	16	African American	M	23.2	Head Trauma	IIAM
	19	Caucasian	M	21.2	Anoxia	NDRI
	19	Caucasian	M	20.1	Head Trauma	NDRI
	52	African American	M	29.2	Stroke	TDS
	55	African American	F	24.2	Stroke	TDS
<b>Normal Controls for Histology</b>	8	African American	M	17.2	Anoxia	NDRI
	10	Caucasian	M	19.3	Head Trauma	NDRI
	19	Caucasian	M	21.2	Anoxia	NDRI
	19	Caucasian	M	20.1	Head Trauma	NDRI
	20	Hispanic/ Latino	M	19.4	Head Trauma	IIAM
	24	Caucasian	M	35.5	Head Trauma	IIAM
	35	Caucasian	M	26.8	Head Trauma	IIAM
	55	African American	M	35.6	Stroke	IIAM
<b>Normal Controls for RNA-seq</b>	26	Hispanic/Latino	F	35.9	Anoxia	IIDP
	35	Caucasian	F	23.6	Anoxia	IIDP
	49	Caucasian	F	31.6	Stroke	IIDP
	50	African American	M	30.2	Stroke	IIDP
	55	Caucasian	M	27.8	Stroke	IIDP
<b>HNF1A/ MODY3 Donor</b>	33	Caucasian	M	25.6	Head Trauma	IIAM

\*All NDRI, IIAM, and TDS islets were isolated by Rita Bottino at Allegheny Health Network in Pittsburgh, PA, USA. NDRI – National Disease Research Interchange; IIAM – International Institute for the Advancement of Medicine; IIDP – Integrated Islet Distribution Program; TDS – Tennessee Donor Services



**Table S2. DNA sequencing of donor for variants associated with monogenic diabetes.**

Donor	Gene	Chr	Transcript	Nucleotide	Amino Acid Change	dbSNP ID	MAF	POLY Score
<b>HNF1A/ MODY3</b>	<i>ALMS1</i>	2	NM_015120.4	c.2041C>T	p.Arg681*	-	0	0
	<i>DYRK1B</i>	19	NM_004714.1	c.*9C>G	-	rs370237703	0	0
	<i>FBN1</i>	15	NM_000138.4	c.5343G>A	p.Val1781Val	rs140649	0.003	0
	<i>HNF1A</i>	12	NM_000545.6	c.779C>T	p.Thr260Met	rs886039544	0	1
	<i>IFIH1</i>	2	NM_022168.3	c.1491G>A	p.Thr497Thr	-	0	0
	<i>INS</i>	11	NM_000207.2	c.-414C>A	-	-	0	0
	<i>KCNJ11</i>	11	NM_000525.3	c.-179C>T	-	-	0	0
	<i>LRBA</i>	4	NM_006726.4	c.217-10del	-	-	0	0
	<i>PCNT</i>	21	NM_006031.5	c.1754G>A	p.Arg585Gln	-	0	0
	<i>PTEN</i>	10	NM_000314.4	c.579G>A	p.Leu193Leu	-	0	0
	<i>SLC29A3</i>	10	NM_018344.5	c.300+10del	-	-	0	0
	<i>WFS1</i>	4	NM_006005.3	c.2052G>A	p.Ala684Ala	rs71539668	0.002	0

Chr – Chromosome, MAF – Minor allele frequency; DNA isolated from pancreatic samples of donor was subjected to DNA sequencing covering coding regions and splice junctions of 148 genes associated with monogenic diabetes (4). \*nonsense mutation

**Table S3. Sources and concentrations of primary antibodies**

Antigen	Host Species	Working Dilutions			Vendor	Catalog #
		Cryo-sections	Western Blot; EMSA	Flow Cytometry		
CD45	Rabbit	1:100	-	-	Dako	A0452
Glucagon	Rabbit	1:200	-	-	Cell Signaling	2760
Glucagon	Mouse	1:500	-	-	Abcam	ab10988
Glucagon-Pacific Blue	Mouse	-	-	1:600	Sigma-Aldrich	G2654
Insulin-647	Rabbit	1:65	-	-	Cell Signaling	9008
Insulin	Guinea pig	1:1000	-	-	Dako	A0564
Insulin	Chicken	-	-	1:10	Gallus Immunotech	ABI
Ghrelin	Mouse	1:1000	-	-	Abcam	57222
VEGFR2	Goat	1:200	-	-	R&D Systems	AF644
Synapsin-1,2	Rabbit	1:2000	-	-	Synaptic Systems	106 002
Ki67	Mouse	1:5000	-	-	Dako	M7240
HNF1A	Rabbit	1:500	-	-	Abcam	Ab204306
HNF1A	Mouse	-	1:2000	-	Thermo Fisher	GT4110
HNF1A	Rabbit	-	N/A; 1:40	-	Proteintech	22426-1-AP
c-Myc	Mouse	-	1:2000; 1:40	-	Santa Cruz	9E10
$\beta$ -Actin	Rabbit	-	1:4000	-	Cell Signaling	4967
NKX2.2	Mouse	1:100	-	-	Developmental Studies Hybridoma Bank	74-5A5
NKX6.1	Rabbit	1:2000	-	-	BCBC/Palle Serup	N/A
PDX1	Rabbit	1:5000	-	-	C. V. E. Wright*	N/A
Somatostatin	Goat	1:500	-	-	Santa Cruz	sc-7819
Somatostatin-AlexaFluor 488	Mouse	-	-	1:200	LS Bio	LS-C169129-100
HIC3-2D12 (Hpa3)	Mouse	-	-	1:200	Gift from Dr. Philip Streeter**	N/A
HIC0-4F9 (Hpi1) - Biotin	Mouse	-	-	1:100	Novus	NBP1-18872B
CD39L3	Mouse	-	-	1:100	Gift from Jean Sévigny <sup>#</sup>	N/A

BCBC – Beta Cell Biology Consortium, N/A – not applicable; \*Vanderbilt University, Nashville, TN, USA;

\*\*Oregon Health & Science University, Portland, OR, USA; <sup>#</sup>Laval University, Québec, Canada

**Table S4. Sources and concentrations of secondary antibodies**

Host Species	Primary Ab Species	Fluorophore/ Chromogen	Working Dilutions		Vendor	Catalog #
			Cryo-sections	Flow Cytometry		
Donkey	Chicken	APC	-	1:25	Jackson Immuno-Research	703-136-155
Donkey	Goat	Cy5	1:200	-	Jackson Immuno-Research	705-605-003
Donkey	Goat	Cy2	1:500	-	Jackson Immuno-Research	705-225-147
Donkey	Guinea pig	Cy2	1:500	-	Jackson Immuno-Research	706-225-148
Donkey	Guinea pig	Cy5	1:200	-	Jackson Immuno-Research	706-175-148
Donkey	Rabbit	Cy3	1:500	-	Jackson Immuno-Research	711-165-152
Donkey	Mouse	Cy5	1:200	-	Jackson Immuno-Research	715-175-151
Donkey	Mouse	Cy3	1:500	-	Jackson Immuno-Research	715-165-150
Goat	Mouse	PE	-	1:1000	BD Bio-sciences	550589
Goat	Mouse	Streptavidin BV421	-	1:500	BD Bio-sciences	563259
Goat	Mouse	APC	-	1:500	BD Bio-sciences	550826

**Table S5. DAVID Gene Ontology of *HNF1A*<sup>+T260M</sup> β cells (excel)**

**Table S6. DAVID Gene Ontology of *HNF1A*<sup>+T260M</sup> α cells (excel)**

**Table S7. Top 10 Significant IPA Canonical Pathways of *HNF1A*<sup>+T260M</sup> β and α cells (excel)**