



Reproductive Technologies, Inc.

THE SPERM BANK OF CALIFORNIA

INTERVIEW NOTES: 5330

Donor 5330 is a tall, dark haired man with striking features. He has large, beautiful, light brown eyes, with long eyelashes and thick, well-groomed eyebrows. His shoulder-length dark brown hair is straight and shiny with a bit of a natural wave. His nose is straight and even, and his square jaw is covered in a light beard. He wore a heather gray knit sweater with an athletic puffy vest and dark wash jeans. He looks strikingly similar to the 90's actor Matthew Lawrence, right down to the smile. Donor 5330 has a deep, powerful voice and is friendly, engaging and motivated. He is intelligent, humble, kind, and philosophically-minded.

5330 grew up in Northern California with two older brothers. The boys spent their time playing chess and exploring different subjects, as well as running through the woods and camping. He comes from a family of *lifelong learners* who put great value on education. Donor 5330 describes having deep, intellectual conversations with his mother at a young age, and calls himself a *total bookworm*. He says he wasn't a great reader early on, but in 2nd grade something *just clicked*, and he became obsessed with reading as much as he could. His mother was very proud of him as a boy. They enjoyed reading the same books, and she did her best to support him in pursuing his own interests.

Donor 5330's grandfather was a huge influence on his life. He was a scientist, first and foremost. Everything he did was approached *very scientifically*, even his gardening techniques. 5330 says that his grandfather taught him *big words*, and from him, 5330 inherited his thirst for scientific knowledge. This naturally led to an interest in general science and science fiction.

5330's love of science and science fiction fed his fascination with outer space, *Star Trek*, and later as an adult, Elon Musk and his *SpaceX* programs. *SpaceX* has the ultimate goal of enabling people to live on other planets. He was disheartened in 3rd grade when he realized that many space exploration programs would be never be funded, and that the reality of his exploring outer space may not ever happen.

The dream of space travel continued to motivate 5330 throughout his life. In college, he decided to study Economics as a way of becoming a part of creating an economic system that could eventually fund space travel. Although he now recognizes that although studying economics was great for developing an understanding of the world, he sees that his ideas were naïve, and that the world is complicated beyond his initial understanding.

After graduating with his first degree, he worked for a few years and then decided to return to school for a second Bachelor's degree in Electrical Engineering. He realized that the work he was involved in was only postponing his happiness, and he wanted to go to school to educate himself about how he might help create the world that he wants to see. He prides himself on being a very clear and objective thinker. He showed us a piece of paper that he carries around in his wallet, with dots on it that represent each of the days in a human life, to remind him to take advantage of each day he is alive.

These days, donor 5330 spends most of his free time outdoors, often hiking with his girlfriend. He continues to read voraciously. He plays the piano for musical expression and generally loves to be physically active. When asked about his goals for the future, donor 5330 said that, while *going to Mars would be awesome*, his more realistic goals are to work in the field of biomedical or electrical engineering. 5330 is a charming, intelligent, engaging and delightful addition to our donor program.

Interviewed by Lauren A. & Marisa S. 1/11/17



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DONOR PROFILE: 5330

The past and current personal and family medical history, physical examination, and laboratory test results determine that donor 5330 is eligible and approved for semen donation at THE SPERM BANK OF CALIFORNIA. This profile was prepared in April 2017 and updated in January 2018

- Identity-Release® Program: **Yes**
- Month/year of birth: **May 1991**
- Education: **BA in Economics**
- Current occupation: **Student**
- Ethnic origin: **Irish, Scottish, French, German, Swedish, English, Ashkenazi Jewish**
- Religion born into: **Christianity**
- Religion practicing: **Agnostic/Buddhist**

PHYSICAL CHARACTERISTICS

- Height: **6'3"**
- Weight: **204 lbs**
- Hair color: **Medium brown**
- Hair type: **Straight**
- Eye color: **Light brown**
- Complexion: **Fair/rosy**
- Body type: **Large**
- Blood group/Rh: **O+**
- Baby photo available: **Yes**
- Other distinguishing features: **Large eyes, deep voice**

FAMILY MEDICAL HISTORY

KEY: **D** donor **Ch** child **F** father **M** mother **S** sister **B** brother
Co cousin **A** aunt **U** uncle **MGF** maternal grandfather **MGM** maternal
grandmother **PGF** paternal grandfather **PGM** paternal grandmother

Allergies: **MGM: Allergies (seasonal) in childhood, treated with OTC meds, managed until death. MU1: Allergies (seasonal) at 13, treated with nasal spray, managed.**

Blood: **PGM: Non-Hodgkin's lymphoma at 84, treated with chemotherapy, in remission until death at 93.**

Gastrointestinal: **PU2: Colon cancer at 66, no treatment, cause of death at 67.**

Heart: **MGF: Cardiac arrhythmia at 75, no treatment, cause of death. PGF: Congestive heart failure at 77, no treatment, cause of death. PU1: High blood pressure at 50, no treatment, ongoing until death, Heart attack at 63, no treatment, cause of death.**

Metabolic/Endocrine: **M: Hypoglycemia at 12, diet change, managed.**

Muscles/Bones/Joints: **MGM: Osteoporosis at 72, treated with supplements, managed until death.**

Neurological: **B: Febrile seizures at 1, treated with medication, resolved until age 19. Seizure disorder at 19, treated with medication, managed. MGM: Alzheimer's disease, at 70, treated with medication ongoing until death.**

Sight/Sound/Smell: **D: Right eye: 20/40, Left eye 20/25.**

Skin: **B: Psoriasis at 19, treated with topical medication, managed. MGF: Psoriasis at 34, treated with topical medication, managed. PA: Skin cancer (nose) basal cell at 55, treated with surgical removal, resolved.**

Cancer (see above): **PU2: Colon cancer**

Other: **PGM: Lupus at 80, treatment not known, outcome: managed until death**

DONOR LAB RESULTS

Chlamydia: **Not Detected**
HIV 1 & 2: **Non-Reactive**
Hepatitis B: **Non-Reactive**
Urinalysis: **Normal**

Gonorrhea: **Not Detected**
CMV total antibody: **Negative**
Hepatitis C: **Non-Reactive**
Chem panel: **Normal**

Syphilis: **Non-Reactive**
HTLV 1 & 2: **Non-Reactive**
CBC: **Normal**

GENETIC SCREENING RESULTS: ALL TEST VALUES IN NORMAL RANGE

Genetic screening tests can significantly reduce, but never completely eliminate, the chance that a person is a carrier for a particular disorder.

Cystic Fibrosis: (> 500 mutations) **No mutation detected**
Spinal Muscular Atrophy (SMA): **Two copies of SMN1 detected**
Hemoglobinopathies/Thalassemia: **No abnormal hemoglobin detected (including sickle hemoglobin);
No evidence of thalassemia**

Bloom Syndrome: **No mutation detected**
Canavan Disease: **No mutation detected**
Familial Dysautonomia: **No mutation detected**
Fanconi Anemia Group C: **No mutation detected**
Gaucher Disease: **No mutation detected**
Niemann-Pick Disease Type A: **No mutation detected**
Mucopolysaccharidosis Type IV: **No mutation detected**
Tay-Sachs Disease: (73 mutations) **No mutation detected**

DONOR NARRATIVE: 5330

The content of this narrative has not been altered by TSBC staff. It reflects the original written work of the Donor

Describe your personality: introvert, extrovert, funny, serious, goal-oriented, curious, shy, etc.

Growing up, I was a bookish kid and spent significant time with my Grandfather who was an academic. This instilled in me a relentless intellectualism, curiosity, and independence which are the same traits I value in my friends and relationships. Being a natural introvert, I'm reticent with my emotions and try to channel them towards productive ends. When pursuing a goal, I determine the most efficient plan and then methodically carry it out. While I am open to changing my approach if new information is available, I would just as easily finish what I started through sheer willpower regardless of any difficulties. Despite being withdrawn, I'm naturally confident, passionately enjoy sharing ideas with others, and have a quirky sense of humor when I get to know someone.

What are your interests and talents?

I enjoy learning in all formats, whether that means taking classes, reading articles and books, or having discussions with friends. I'm most passionate about existential subjects such as physics, cosmology, and philosophy, but being a science fiction buff, I have a natural interest in all aspects of science and technology. I regularly enjoy challenging myself physically via long distance running, weight training, rowing, longboarding, and yoga. I'm a nature enthusiast and try to hike or backpack as often as possible. Music is an important part of my life and when I'm not listening to anything I'll be playing the piano or guitar. I love chess, cooking, drinking coffee and tea, photography, dabbling with electronics, and great movies.

What are some of your goals and ambitions in life? Where do you see yourself in 5 or 10 years?

My goals in life are to always be learning, and contribute in some capacity to the advancement of our species. Given my interests and skills, I would like to be in a place where I can be working with the state of the art in whatever field I end up, whether that may be space exploration, biotechnology, or artificial intelligence. Simply put, I need to be mentally stimulated and know that the work I'm doing is meaningful.

How would you describe your skills and interests in the following areas?

Math: Skilled. I was always adept growing up, but lacked proper motivation to put in the work. Since then I've developed a deep appreciation for math.

Mechanical: I built models as a kid, but my interests were generally more abstract which is why I was drawn to Electrical Engineering.

Athletic: Due to my bookish tendencies, I didn't develop a love for athletics or exceptional hand-eye-coordination as a child. I started distance running in my teens, and with further maturity and muscle development, I've learned to enjoy physical challenges.

Musical, Artistic, Creative: As a teen, I began playing both piano and guitar since a most of family seems to play an instrument. In high school I became interested in photography and eventually turned my closet into a dark room. Despite the proliferation of digital cameras, I love the process of shooting film, working in the darkroom, and taking the time to develop each picture.

Language (what languages besides English do you speak?): Unfortunately none, although a few semesters of Mandarin in college allow me to order dim-sum at the authentic spots deep in Chinatown.

Writing: Due to reading as much as I do, I used to write all kinds of short stories when I was younger. Since then, my time has become more constrained and interests have drifted. However, I help edit friends' screenplays and enjoy the challenge of focusing on just one sentence, and perfectly rephrasing it to articulate some subtle point.

Literature: Since 2nd grade, I have been an obsessive reader of all genres. Although I enjoy the modern and nuanced art of great movies, I think the written word is still the most powerful form of storytelling. I've spent too many nights reading until three in the morning because I couldn't put down what I was reading. Like photography, I think there's something to be said for reading physical books; the feel of a well-worn spine, the smell of them, and marking up a passage so the next time you read it you can step into the past and see your thought process.

Science: Science has always come easily to me since it was impressed on me by my scientist grandfather. It is the purest form of curiosity, attempting to understand and explore the surrounding world. Whatever I end up doing, I hope my career sits at the forefront of science and engineering.

Please list a few of your favorite:

Movies: Blade Runner, Lost in Translation, Interstellar, The Royal Tenenbaums, Glengarry Glen Ross, Birdman, The Martian

Books/Authors: Iain M Banks (the culture series), Frank Herbert, Isaac Asimov, Philip K Dick, Michael Crichton, Walter Isaacson

Albums/Musicians/Performances: Led Zeppelin, Creedence Clearwater Revival, The Isley Brothers, Pink Floyd, Outkast

What are a few of your reasons for becoming a sperm donor?

Primarily, becoming a donor allows me to maximize my time for schoolwork. However, I also fundamentally believe in the cause. From my experience, the greatest contributing factor to what makes a “good person”, is their home, whether they come from a loving and supportive family. If any individuals care for each other but are prevented by biology, I would be glad and privileged to help support them in creating a family.

You have joined the Identity-Release® Program . What appeals to you about this program?

I think most people have an innate curiosity about themselves and where they come from. Genetics are only a small part of this equation, however, if an individual is interested in self exploration, they should be free to pursue the knowledge they want.

Is there anything else you would like to share with participating families and offspring?

It's seems the importance of finding purpose is understated today. Defining what matters to oneself provides clarity when approaching the constant barrage of distractions that pervades our life. While happiness isn't always attainable, validation through persistent hard work is. It is my hope that any offspring is taught to value relentless critical thinking, the fulfillment of constant diligence, and to embrace their natural curiosity. I have the utmost faith that with these tools and support, a child will be successful whatever they pursue.



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HEALTH PROBLEMS DONOR 5330

FAMILY MEMBER	HEALTH PROBLEM	TREATMENT/RESOLUTION
Brother	Febrile seizures	Age at onset/diagnosis: 18 months Treatment: Medication Outcome: Resolved until age 19
	Seizure disorder	Age at onset/diagnosis: 19 Treatment: Medication Outcome: Managed
	Psoriasis	Age at onset/diagnosis: 19 Treatment: Topical medication Outcome: Managed
Mother	Hypoglycemia	Age at onset/diagnosis: 12 Treatment: Diet change Outcome: Managed
Maternal Grandfather	Psoriasis	Age at onset/diagnosis: 34 Treatment: Topical medication Outcome: Managed
	Cardiac arrhythmia	Age at onset/diagnosis: 75 Treatment: None Outcome: Cause of death at 75
Maternal Grandmother	Allergies <i>Seasonal</i>	Age at onset/diagnosis: Childhood Treatment: OTC meds Outcome: Managed until death
	Alzheimer's disease	Age at onset/diagnosis: 70 Treatment: Medication Outcome: Ongoing until death
	Osteoporosis	Age at onset/diagnosis: 72 Treatment: Supplements Outcome: Managed until death

Paternal Grandfather	Congestive heart failure	Age at onset/diagnosis: 77 Treatment: None Outcome: Cause of death
Paternal Grandmother	Lupus <i>Autoimmune disorder</i>	Age at onset/diagnosis: 80 Treatment: Not known Outcome: Managed until death
	Non-Hodgkin's Lymphoma	Age at onset/diagnosis: 84 Treatment: Chemotherapy Outcome: Resolved/remission until death at 93
Maternal Uncle #1	Allergies <i>Seasonal</i>	Age at onset/diagnosis: 13 Treatment: Nasal spray Outcome: Managed
Paternal Aunt	Skin cancer, nose <i>Basal cell</i>	Age at onset/diagnosis: 55 Treatment: Surgery Outcome: Resolved
Paternal Uncle #1	High blood pressure	Age at onset/diagnosis: 50 Treatment: None Outcome: Ongoing until death
	Heart attack	Age at onset/diagnosis: 63 Treatment: None Outcome: Cause of death at age 63
Paternal Uncle #2	Colon cancer	Age at onset/diagnosis: 66 Treatment: None Outcome: Cause of death at age 67

The above family medical history information has been self-reported by the donor. We work with each donor to obtain as complete and accurate information as possible, but we are unable to completely rule out the existence of other health information that is not known, or that remains unreported to us.

As a board certified genetic counselor, I have reviewed this donor's family medical history for identifiable patterns of inheritance that may place the donor or his biological offspring at increased risk for certain health problems. ("Increased risk" is risk that is greater than the risk in the general population).

Upon review of the available family medical history information from this donor, two family members are reported to have psoriasis, which in some families has a familial component. The donor does not report psoriasis.

Otherwise, the risk for similar health problems occurring in offspring is not expected to exceed the risk in the general population.

Cynthia Kane, M.S., C.G.C.
Genetic Counselor