Reproductive Technologies, Inc.

THE SPERM BANK OF CALIFORNIA

INTERVIEW NOTES: 5989

Donor 5989's calm demeanor and reserved personality were apparent during his interview. He was dressed in a blue Minnesota Twins hoodie paired with blue jeans and running shoes. His medium brown hair had a few grey strands while being cut shorter on the sides and grown out a bit more on the top. It looked like it would be wavy if it was longer. His facial hair was slightly grown in showing the ability to grow a full beard and moustache. His full lips and nose were proportional to his face while his blue eyes were framed by full, brown brows and lashes.

Donor 5989 grew up in a small town in a farming community in the Midwest. He said it was cold and pretty flat. He lived with both parents and a younger and older brother. He was also close to his grandparents who owned farmland in the area. Growing up, both of donor 5989's parents were teachers. He credits his love of books and reading to his dad being a librarian and being around a variety of genres. One of his favorite series to read growing up was Harry Potter.

In school, the subjects that he preferred were math and science but didn't have a subject that he really disliked. Donor 5989 liked being active when he was younger and participated in many seasonal sports. He would play tennis, football, soccer, basketball and even hockey depending on the time of year. He still plays tennis and rock climbs in his spare time now. As lover of old movies, he mentioned recently watching Videodrome and enjoying it.

After graduating from college, donor 5989 was working a variety of jobs until his friend offered him the opportunity to work with wind turbines. This experience allowed him to grow within the company and be able to be relocated to California. He worked there up until recently when he was able to acquire a new job and position as an engineering technician with a laboratory.

Donor 5989 likes to meal prep weekly, stating it is not the "funnest" thing but does help keep him on track throughout the week. He likes to prepare risotto and dishes like beef stroganoff. Though when it comes to cooking at home, he prefers just making something simple like toast and eggs.

Donor 5989 and his family are still close although he has moved while all of his family is still in the Midwest. He visits home multiple times a year and speaks to his older brother often. Donor 5989 told a sweet story of how his family has a tradition of vacationing with family friends. His grandfather reconnected with a high school classmate who lived in California. They decided to get together and chose Glacier National Park as it was meeting in the middle, geographically speaking. This was over 30 years ago and now there are three generations who are good friends and vacation together.

We believe that donor 5989 is a great addition to our program and are glad to have him!

Interviewed by Kenya C. and Simone W. on 12/15/23

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DONOR PROFILE: 5989

The past and current personal and family medical history, physical examination, and laboratory test results determine that donor 5989 is eligible and approved for semen donation at THE SPERM BANK OF CALIFORNIA. This profile was prepared in February 2024.

PERSONAL INFORMATION

- Identity-Release® Program: **Yes**
- Month/year of birth: **May/1994**
- Education: **B.S. in Biology**
- Current occupation: **Engineering Technician**
- Ethnic origin: **French, German, Irish, Norwegian, Swedish**
- Religion born into: **Lutheran**
- Religion practicing: **None**

PHYSICAL CHARACTERISTICS

- Height: **6' 2.5"**
- Weight: **174 lbs**
- Hair color: **Medium brown**
- Hair type: **Straight**
- Eye color: **Blue**
- Complexion: **Fair, creamy**
- Body type: **Slim**
- Blood group/Rh: **O+**
- Baby photo available: **Yes**
- Other distinguishing features: **None**

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

Breast Cancer: **MA: Breast cancer HER2 at 50, treated with surgery, chemotherapy, and radiation, metastasized in liver and brain, treatment is ongoing. PA#1: Breast cancer at 66, treated with surgery, chemotherapy, and radiation, recovered.**
Heart: **D: Heart murmur at birth, no treatment, resolved. MGF: Stroke at 59, treated with physical therapy, full recovery. MU#1: Heart valve repair at 60, treated with surgery, resolved. PGM: Congestive heart failure at 80, treated with surgery, resolved. Heart attack at 83, treated with surgery, recovered. High blood pressure at unknown age, treated with medication and dietary changes, managed. High cholesterol onset unknown,**

treated with medication and dietary changes, managed. PGF: High blood pressure, onset unknown, treated with medication and dietary changes, managed. PA#2: Heart attacks at 36 and 62, treated with stents, recovered. PU: Heart attack at 50, treated with dietary changes, recovered. Heart complications, onset unknown, treatment unknown, death at 70.
Mental Health: **MCo#1: Depression, onset unknown, treated with medication, managed. Anxiety, onset unknown, treated with medication, outcome unknown. ADHD at 10, treated with medication, managed.**
Metabolic/Endocrine: **MGF: Type II diabetes at 59, treated with dietary changes, managed. MU#1: Type II diabetes at 60, treated with dietary changes, managed.**
Neurological: **MCo#1: Autism spectrum disorder at 5, no treatment, high functioning. PGM: Migraines onset unknown, treated with medication as needed, managed. Alzheimer's at 83, treated with assisted living until her death at 87. PCo#2: Migraines, onset unknown, treated with medication as needed, managed.**
Respiratory (Lungs): **Chronic obstructive pulmonary disease (COPD) at 74, treated with a nebulizer, inhaler, and oxygen, managed until death at 77.**
Sight/Sound/Smell: **D: R: 20/13, L: 20/15. MGF: Glaucoma at 60, treated with eye drops, ongoing. PGF: Color blindness at 22, no treatment, managed.**
Skin: **MGF: Skin cancer (basal cell) at 84, treated with radiation, treatment is ongoing.**
Urinary: **MGF: Kidney disease-renal veins wrapped around kidney at 23, treated with unsuccessful surgery, loss of kidney. MU#1: Kidney disease-renal veins wrapped around kidney, treated with minor surgery, resolved.**
Cancer (see above): **MA: Breast cancer HER2. PA#1: Breast cancer.**
Other: **D: Osgood-Schlatter Disease (common cause of knee inflammation) at 13, no treatment, resolved by 17. B#2: Rhabdomyosarcoma at 3, treated with chemotherapy, surgery, and radiation, complete remission (now 26). PCo#1: SIDS at 3 months, no treatment, death at 3 months.**

Donor Lab Results

Chlamydia: **Not Detected**	Gonorrhea: **Not Detected**	Syphilis: **Non-Reactive**
HIV 1 & 2: **Non-Reactive**	CMV total antibody: **Negative**	
Hepatitis B: **Non-Reactive**	Hepatitis C: **Non-Reactive**	HTLV 1 & 2: **Non-Reactive**
Urinalysis: **Normal**	Chem panel: **Normal**	CBC: **Normal**

Genetic Screening Results

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

Expanded carrier screening for 525 autosomal recessive conditions was completed by Invitae and reported on 12/26/2023. The results were **POSITIVE** for **Canavan disease, Hereditary hemochromatosis type 1, and TSHR-related conditions.** Donor is a carrier for these conditions.

It is strongly recommended that recipients who use this donor's sperm undergo carrier screening for these specific conditions.

Hereditary hemochromatosis, type 1 is an autosomal recessive adult-onset condition with variable presentation and penetrance. The specific mutation the donor carries is associated with mild-moderate disease and when clinical features are present there is good treatment. Carrier screening for the HFE gene is available and recommended to recipients considering this donor. Recipients who are carriers for HFE-related conditions should have genetic counseling to best assess the risk for a child affected with hemochromatosis, type 1.

Testing was negative for the remainder of genes screened.

Disease	Result	Residual risk to be a carrier (based on European ancestry)
Canavan disease (ASPA)	POSITIVE	n/a
TSHR-related conditions	POSITIVE	n/a
Hereditary hemochromatosis type 1 (HFE)	POSITIVE	n/a

Cystic Fibrosis	Negative	1 in 4,400
Spinal Muscular Atrophy	Negative: 2 copies exon 7 c.*3+80T>G variant not detected	1 in 880
HBB Hemoglobinopathies & Thalassemia	Negative	1 in 4,800
Alpha Thalassemia	Negative	Reduced

Please refer to the donor's Invitae expanded carrier test report for more information on the testing completed and the donor's results.

DONOR NARRATIVE: 5989

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,

I am an introverted extrovert. I keep to myself mostly but I can be very entertaining at a party. I'm funny when I want to be, and serious all other times. I do not set concrete goals for myself. I prefer to go where the next opportunity takes me.

What are your interests and talents?

Any sport you can think of, I am at least ok. I always have at least one book that I am reading. I love classic and foreign movies, and I collect CDs.

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

I really want to see as much of the world as I can. My job allows me to travel easily. In 5 years I see myself doing the same work, but being promoted, hopefully to a work from home position.

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

Math: I have passable skills as it relates to my job.
Mechanical: I have passable skills as it relates to my job.
Athletic: I have played 4 sports (Soccer, Baseball, Basketball, Tennis) competitively at different times in my life.
Musical, Artistic, Creative: I did stand-up open mics for 3 years.
Language (what languages besides English do you speak?): Conversational Spanish
Writing: I have passable communicative writing skills as well as scientific writing skills.
Literature: I am an avid reader.
Science: I helped with several grant research projects during my undergraduate degree.

Please list a few of your favorite:

Movies: 12 Angry Men, No Country for Old Men, Jurassic Park, Annie Hall, Goodfellas
Books/Authors: Catch 22 by Joseph Heller, The Grapes of Wrath by John Steinbeck, Cat's Cradle by Kurt Vonnegut, Ball Four by Jim Bouton, 1984 by George Orwell
Albums/Musicians/Performances: Nebraska by Bruce Springsteen, Double Nickels on the Dime by The Minutemen, London Calling by The Clash, Madvillainy by Madvillain, Nine Types of Light by TV on the Radio

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

I have a brother who became sterile after cancer treatment at a young age. I want to help people like him through this program.

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

I do not want to be the one that decides whether or not my offspring can find me. If they wish to find me they should have the option to do so.

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

My family is very close-knit and supportive of my decision to become a sperm donor. Any future offspring of mine would almost certainly be able to ask questions of myself, siblings, and parents.

THANKYOU

DATE: 12/5/23

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HEALTH PROBLEMS LIST DONOR 5989

DONOR

Problem/Diagnosis:Heart Murmur
Age of Onset: birth
Treatment:none
Outcome: cleared up on own

Problem/Diagnosis: Osgood-Schlatter Disease-common cause of knee inflammation in adolescents
Age of Onset: 13
Treatment: none
Outcome: resolved on own by age 17

BROTHER #2

Problem/Diagnosis: Rhabdomyosarcoma
Age of Onset:3
Treatment:Chemo/Surgery/Radiation
Outcome: Complete Remission

MATERNAL GRANDFATHER

Problem/Diagnosis:Stroke
Age of Onset:59
Treatment:Physical Therapy
Outcome: Full Recovery

Problem/Diagnosis: Type 2 Diabetes
Age of Onset:59
Treatment:Dietary Restrictions
Outcome: Managed

2115 MILVIA ST BERKLEY, CA 94704 THESPERMBANKOFCA.ORG 510.841.1858

Problem/Diagnosis: Kidney Disease-renal veins wrapped around kidney

Age of Onset:23

Treatment: Surgery(Failed)

Outcome: Loss of Kidney

Problem/Diagnosis: Skin Cancer (Basal Cell)

Age of Onset:84

Treatment: Radiation

Outcome: Ongoing treatment

Problem/Diagnosis: Glaucoma

Age of Onset:60

Treatment:Eye Drops

Outcome: Ongoing

MATERNAL AUNT

Problem/Diagnosis: Breast Cancer HER2

Age of Onset: 50

Treatment: Surgery/chemo/radiation

Outcome: Metastasized in liver and brain, ongoing treatment

MATERNAL UNCLE #1

Problem/Diagnosis: Heart valve repair

Age of Onset:60

Treatment:Surgery

Outcome: Recovered

Problem/Diagnosis: Type 2 Diabetes

Age of Onset: 60

Treatment: Dietary Restrictions

Outcome: Managed

Problem/Diagnosis: Kidney Disease-renal veins wrapped around kidney

Age of Onset: 25

Treatment: minor surgery

Outcome: problem resolved with surgery

MATERNAL COUSIN #1

Problem/Diagnosis: Depression
Age of Onset:Unknown
Treatment:Medication
Outcome: ongoing

Problem/Diagnosis: Anxiety
Age of Onset:Unknown
Treatment:Medication
Outcome: Unknown

Problem/Diagnosis: Autism Spectrum Disorder
Age of Onset: 5
Treatment: none
Outcome: High Functioning

Problem/Diagnosis: ADHD
Age of Onset:10
Treatment:Medication
Outcome: Managed

PATERNAL GRANDMOTHER

Problem/Diagnosis: Congestive Heart Failure
Age of Onset: 80
Treatment: surgery
Outcome: Recovered

Problem/Diagnosis: Heart Attack
Age of Onset:83
Treatment:Surgery
Outcome: Recovered

Problem/Diagnosis: High blood pressure
Age of Onset: Unknown
Treatment: Medication/Diet
Outcome: managed

Problem/Diagnosis: Migraines
Age of Onset: Unknown
Treatment: Meds as needed
Outcome: Managed

Problem/Diagnosis: High Cholesterol
Age of Onset: Unknown
Treatment:Medication/Diet
Outcome: Managed

Problem/Diagnosis: Alzheimer's
Age of Onset: 83
Treatment: Assisted living until 87
Outcome: Deceased at 87 from Alzheimer's

PATERNAL GRANDFATHER

Problem/Diagnosis: High Blood Pressure
Age of Onset: Unknown
Treatment:Medication/Diet
Outcome: managed

Problem/Diagnosis: Color Blindness
Age of Onset: 22
Treatment: N/A
Outcome: continued

Problem/Diagnosis: COPD
Age of Onset: 74
Treatment: Nebulizer/inhaler/oxygen
Outcome: Died at 77

PATERNAL AUNT #1

Problem/Diagnosis: Breast Cancer
Age of Onset: 66
Treatment: Chemo/radiation/surgery
Outcome: Recovered

PATERNAL AUNT #2

Problem/Diagnosis: Heart Attack (2)
Age of Onset:36, 62
Treatment: Stents at both ages
Outcome: Recovered

PATERNAL UNCLE

Problem/Diagnosis: Heart Attack

Age of Onset: 50
Treatment: Dietary Restrictions
Outcome: Recovered

Problem/Diagnosis: Heart Complications

Age of Onset: unknown
Treatment: unknown
Outcome: Death at age 70

PATERNAL COUSIN #1

Problem/Diagnosis: SIDS

Age of Onset: 3 months
Treatment: none
Outcome: Deceased at 3 months

PATERNAL COUSIN #2

Problem/Diagnosis: Migraines

Age of Onset: Unknown
Treatment: Medication as needed
Outcome: Managed

CONCLUSION

The 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. 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).

As reported, Donor 5989 family history is notable for cancer, heart problems, kidney disease, and autism spectrum disorder as well as ADHD. There does not appear to be a personal or familial medical health history that would confer an increased risk beyond the general population risk, however. The donor's maternal aunt was diagnosed with metastatic breast cancer at age 50 but has not had any genetic testing that would indicate increased risk to other family members. The donor's brother also had a rhabdomyosarcoma at 3 years old. A paternal aunt of Donor 5989 has had two heart attacks, the first at age 36. Two of the donor's relatives, his maternal uncle and maternal grandfather, both had corrective surgeries in their 20s for renal veins that were wrapped around the kidney. Lastly, the donor has a maternal cousin with multiple mental health conditions including autism spectrum disorder, ADHD, depression, and generalized anxiety disorder.

Rhabdomyosarcoma: Rhabdomyosarcoma is the most common of soft tissue sarcomas in children. These tumors develop from muscle or fibrous tissue and can grow in any part of the body. They may have an underlying genetic cause, but the exact causes of rhabdomyosarcoma are unknown. Children with certain rare genetic disorders have a higher risk of developing rhabdomyosarcoma, but these are dominant conditions and would likely have presented in other family members. Given the family's overall medical history, the risk for offspring to also be affected by this type of cancer is likely similar to what is seen in the general population.

Breast Cancer: Donor 5989 has a maternal aunt who was affected with metastatic breast cancer at age 50, which is considered early onset. There is a risk for her cancer to be associated with a hereditary cancer syndrome, however, as a great aunt to offspring of Donor 5989, this individual is a third degree relative and is related distantly enough that the risk for breast cancer is at or near the general population risk of 12% for women.
The donor also has a paternal aunt who was diagnosed breast cancer at age 66. Breast cancer when occurring at a later age, especially postmenopausal, is less likely to have an underlying genetic cause as most cancers occur sporadically as an accumulation of environmental factors.

Premature heart disease: Most heart disease occurring in people under the age of 50 is due to atherosclerosis secondary to lifestyle choices and genetic predisposition. Heart disease in one's 30s is considered early onset and, in some cases, may be due to genetic factors. The heart disease observed in his paternal aunt would be considered early onset and an underlying genetic etiology cannot be ruled out. As the aunt is a third degree relative to offspring of Donor 5989, the risk for a significant genetic predisposition to premature heart disease continues to be low. The risk to offspring of Donor 5989 is likely to be at or near n the general population risk.

Kidney Disease (Nutcracker Phenomenon): Donor 5989 reports that both his maternal uncle and maternal grandfather had corrective surgeries in their 20s for veins that were wrapped around the kidney. This is referred to as "nutcracker phenomenon," in which the renal vein is compressed usually between the abdominal aorta and superior mesenteric artery. Changes in blood vessel anatomy cause nutcracker syndrome. Sometimes these changes happen in the womb as blood vessels are forming and other times they happen due to growth spurts during adolescence or weight loss during adulthood. In some

cases, there's no known cause. This condition is considered sporadic and may be due to a combination of environmental conditions, lifestyle and genetics. Offspring of Donor 5989 are third degree relatives to those affected. The magnitude of risk for offspring to also be affected is not known, but is most likely low.

Attention Deficit Hyperactivity Disorder (ADHD) and Autism Spectrum Disorder (ASD): Donor 5989 has a maternal cousin with ASD and ADHD. It is possible that this cousin developed these conditions due to underlying genetic predisposition, however, this individual is a fourth degree relative to any offspring of Donor 5989. It is unlikely the risk for ASD or ADHD for offspring is increased over the general population risk due to the degree of relation to the affected individuals. The general population risk is estimated to be 2.8% for ASD and between 4-10% for ADHD.

Sincerely,

Sidonie Osborne, LGC
Licensed Genetic Counselor
San Francisco Genetic Counseling