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SCHED! LE L \(\) (Form 990 or 990-EZ)

Department of the Treasury

Transactions With Interested Persons

➤ Attach to Form 990 or Form 990-EZ.

➤ To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047

Open To Public Inspection

Name of the organization Employer identification number The VBS Group 1562993 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? 1 (a) Name of disqualified person (b) Description of transaction Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (b) Loan to or from (a) Name of interested person and purpose (c) Original (d) Balance due (g) Written the organization? principal amount by board or agreement? committee? From То Yes No Yes No No Total Part III Grants or Assistance Benefitting Interested Persons. To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the (c) Amount of grant or type of assistance organization **Business Transactions Involving Interested Persons.** To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (a) Name of interested person (b) Relationship between (c) Amount of (d) Description of transaction (e) Sharing of nterested person and the organization's organization revenues? Yes See Schedule O

SCHEDULE O

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization Employer identification number The VBS Group 1562993 54 Schedule L, Part IV, Business Transactions Involving Interested Parties ("VBS" below refers to Virginia Blood Services) 1. Mr. Freddy Cobb is a VBS Group Board member and officer of Cobb Office Technologies (COT). In the ordinary course of business during this tax year, VBS, a supported organization of The VBS Group, purchased \$142,908 of office equipment from COT and The VBS Group made maintenance payments to COT of \$28,164. The consideration was negotiated at arm's length and is at fair market value. 2. Mr. Dick Pierce is a VBS Group Board member and an officer of Rockingham Memorial Hospital (RMH). In the ordinary course of business during this tax year, VBS, a supported organization of The VBS Group, received \$1,640,434 of blood processing service fees from RMH and The VBS Group made lease payments to COT of \$62,250. The consideration was negotiated at arm's length and is at fair market value. 3. Dr. Pamela Clark is a VBS Group Board member and an officer of the University of Virginia Health Services Foundation. VBS, a supported organization of The VBS Group, paid the Foundation \$127,800 for medical director services in the ordinary course of business during this tax year. The consideration was negotiated at arm's length and is at fair market value.

Form 990, Part VI, Section A, line 10

A copy of the Form 990 with all required supporting schedules to be filed with the IRS is hand delivered to all Board members prior to filing. Board members are asked to review the return and provide management with their comments and questions. The Finance Committee members review the return in detail.

Form 990, Part VI, Section B, line 12c

All directors, officers, and key employees are required to submit a form annually disclosing any actual or possible

All directors, officers, and key employees are required to submit a form annually disclosing any actual or possible conflicts of interest. The forms are reviewed by the Governance Committee which determines whether a conflict exists. Any person deemed to have a conflict is prohibited from participating in deliberations and decisions regarding conflicted transactions.

ALC: N

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THE VBS GROUP 2825 EMERYWOOD PKWY RICHMOND VA 23294

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee

Date

SENIOR UP + CFO

Title