

**RURAL BUSINESS INVESTMENT PROGRAM**  
**U. S. SMALL BUSINESS ADMINISTRATION, INVESTMENT DIVISION**

409 Third Street, S.W. Washington, DC 20416 Tel: (202) 205-6510; Fax: (202) 205-6959

**RURAL BUSINESS INVESTMENT COMPANY (RBIC)**

**Request for Approval of Management Services Fees and Other Fees**

**7 CFR 4290.900**

*Instructions: Use this form to request **prior** approval from SBA for a Rural Business Investment Company (RBIC) ("you") or its Associate to charge management services fees or other fees to a Portfolio Concern before or during the term of a Financing, pursuant to 7 CFR 4290.900. Submit this form to SBA at the address shown above.*

RBIC Name:	
RBIC Number:	

**MANAGEMENT SERVICES FEES:**

Name of Portfolio Concern to be charged management services fees, upon SBA approval of this request:	
Describe the management services you or your Associate will provide to the Portfolio Concern.	
Who will provide these services to the Portfolio Concern, you, or your Associate?	
If by an Associate, identify the Associate:	
Have you or your Associate entered into, or will you or your Associate enter into, a written contract with the Portfolio Concern regarding these services? <i>(attach a copy of the executed or proposed contract)</i>	
Will the fees charged be only for management services you or your Associate actually perform for the benefit of the Portfolio Concern?	
On what basis will you or your Associate provide these services? <i>(e.g., hourly fee, project fee, etc.)</i>	
Does the rate you or your Associate will charge exceed the prevailing charge for comparable services by other organizations in the geographic area of the Portfolio Concern? <i>(be prepared to demonstrate the basis for your answer, upon SBA's request)</i>	

**FEES FOR SERVICE AS A BOARD MEMBER:**

Name of Portfolio Concern to be charged fees for service as a board member, upon SBA approval of this request:	
Describe the services you or your Associate will provide as members of the Portfolio Concern's board of directors.	
Who will provide these services to the Portfolio Concern, you, or your Associate?	
If by an Associate, identify the Associate:	
Will these fees exceed fees paid to other outside board members?	

If there will be no other outside board members besides you or your Associate, will these fees be reasonable when compared with amounts paid to outside directors of similar companies? <i>(be prepared to demonstrate the basis for your answer, upon SBA's request)</i>	
In what form will the Portfolio Concern's payment of these fees to you or your Associate take? <i>(e.g., cash, warrants, etc.)</i>	

**TRANSACTION FEES:**

Name of Portfolio Concern to be charged transaction fees, upon SBA approval of this request:	
Describe the transaction fees you or your Associate will charge to the Portfolio Concern.	
Who will charge these fees to the Portfolio Concern, you, or your Associate?	
If by an Associate, identify the Associate:	
In what form will the Portfolio Concern's payment of these fees to you or your Associate take? <i>(cash, notes, stocks, and/or options.)</i>	

The RBIC asks that SBA approve the RBIC or Associate charging the named Portfolio Concern(s) the described fees for management services, services as a member of the board, and/or services relating to transactions.

RBIC Name (typed)	
Signature of Authorized Representative	Date

SBA approves the RBIC's request, subject to the following conditions (if any):

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Name of SBA Representative	
Signature	Date

SBA is collecting this information on behalf of the U.S. Department of Agriculture (USDA) pursuant to a delegation of authority by USDA to SBA (7 CFR 4290.45) for the purpose evaluating a request by a RBIC for SBA's prior approval for the RBIC or its Associate to charge certain fees to Portfolio Concerns. The information collected on this form is required in order for SBA to adequately evaluate the RBIC's request.

**Please note:** The estimated burden for completing this form is 4 hours. You are not required to respond to this form unless it displays a current Office of Management and Budget (OMB) approval number. The information collected on this form will be kept confidential to the extent permitted by law. If you have questions or comments concerning this estimate or other aspects of this information collection, please contact the U.S. Small Business Administration, Chief, Administrative Information Branch, Washington, DC 20416 and/or Office of Management and Budget, SBA Desk Officer, Washington, D.C. 20503. OMB Approval 0570-0051. **Please do not send forms to OMB.**