

How to Complete the OCGA Outgoing Subaward & MCA Request Form:



UCLA OCGA OUTGOING SUBAWARD & MCA REQUEST FORM

ONCE COMPLETED, EMAIL THIS FORM WITH [ALL REQUIRED BACKUP DOCUMENTATION](#) TO: OCGAsubawards@research.ucla.edu

1. Use this form to request issuance of new or amended subawards or MCAs from OCGA's Outgoing Subawards Team (OST). The OST is responsible for:
1) outgoing subawards under grants/cooperative agreements handled by OCGA; and 2) outgoing MCAs under grants/cooperative agreements and contracts handled by OCGA. For information on outgoing subcontracts handled through Purchasing, visit: <https://purchasing.ucla.edu/bruinbuy-plus-hub>.

This is a request for:

(Mark the applicable checkbox below to hide form questions unrelated to the requested action.)

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| 2. <input type="checkbox"/> NEW SUBAWARD Req or PO# _____ Answer questions 1-7 below | <input type="checkbox"/> AMENDMENT to SUBAWARD Req or PO# _____ AMD# _____ Answer question A below | <input type="checkbox"/> NEW MCA (OST will generate MCA #) Answer questions 1-7 below | <input type="checkbox"/> AMENDMENT to MCA MCA# _____ AMD# _____ Answer question A below |
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- Are you requesting an outgoing subaward under a grant or cooperative Agreement or subgrant that was handled through OCGA? Or are you requesting an outgoing MCA under a grant, cooperative agreement, contract, subgrant or subcontract that was handled through OCGA? To confirm, check the **OCGA Award Snapshot** for the award that you're working on. Section III: Award Demographics in the OCGA Award Snapshot, should note the Award Type (i.e. 'Grant', 'Cooperative Agreement', etc.).
- Is this requested action for a new subaward or MCA or for an amendment to a current subaward or MCA? Check the appropriate box. When the appropriate box is checked, the form will conditionally remove sections that are not applicable to your chosen action.
 - For a **New Subaward** request: Add the requisition number from the requisition submitted via BruinBuy+ for this specific subaward. A requisition must be submitted via BruinBuy+ prior to submission of the Request Form to the OST. If a PO has already been received for this subaward, enter the PO instead of the requisition number. Once you've checked the **New Subaward** box and the requisition or PO number has been added, continue by answering questions 1 through 7.
 - For an **Amendment to Subaward**:
 - Add the Purchase Order/Subaward number of the current subaward or requisition number if a new BB+ PO has been requested.
 - Add the Amendment number for this requested action. *Ex. If the last amendment sent to the subrecipient by the Outgoing Subawards Team was amendment #1, then this next requested action would be for amendment #2.*
 - Once you've checked the **Amendment to Subaward** box and the requisition or PO number and amendment number have been added, continue by answering question A.
 - For a **New MCA** request: The OST will generate a subaward number internally, so a requisition or PO are not required. Once you've checked the **New MCA**, continue by answering questions 1 through 7.
 - For an **Amendment to MCA**:
 - Add the MCA number from the most recent MCA (the MCA number can be found at the top of page 1 of the MCA).
 - Add the Amendment number for this requested action. *Ex. If the last MCA amendment sent to the participating UC campus by the Outgoing Subawards Team was amendment #1, then this next requested action would be for amendment #2.*
 - Once you've checked the **Amendment to MCA** box and the MCA number has been added, continue by answering question A.

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| 3. | UCLA Full Accounting Unit (FAU): _____ Sponsor Award #: _____ | REMINDER: Fund must be active for requested period. |
| 4. | UCLA Principal Investigator: _____ | E-mail: _____ |
| 5. | Subrecipient's Legal Name/Sister-Campus: _____ | |
| 6. | Sub/Sister-Campus PI Name: _____ | E-mail: _____ |
| 7. | Sub/Sister-Campus Dept Financial Contact: _____ | E-mail: _____ |
| 8. | UCLA Dept Financial Contact: _____ | E-mail: _____ |

3. Add the basic fund/award information for this subaward/MCA:
 - UCLA Full Accounting Unit (FAU): The FAU information for this specific action. **Tip:** For a new *subaward*, the FAU tied to this action can be found on the submitted requisition. For an amendment request, does the FAU from the original subaward or MCA need to be updated (i.e. is the action being requested under a different fund number)? If so, enter the new FAU.
 - Sponsor Award #: So that the Outgoing Subawards Team knows which prime award action this subaward or MCA request falls under, be sure to note the award number of the prime award. For example, if this request is to allocate year 2 funding to the subrecipient or participating campus, you would note the prime award number that awarded year 2 funding to UCLA. *Or*, if this request is to allocate supplemental funding to the subrecipient or participating campus, you would note the prime award number and date of the award that awarded the supplemental funding to UCLA.
4. UCLA PI and UCLA PI e-mail: Enter the name of the UCLA PI to be named on this subaward or MCA, and the UCLA PI's e-mail address.
5. Add the Subrecipient's/Sister-Campus' Legal Name
6. Add the Subrecipient/Sister-Campus PI's name and e-mail
7. Add the contact information for the department contact for the Subrecipient/Sister-Campus (not central office) – this contact information is specific to the project.
8. UCLA Department Financial Contact: Enter the name and e-mail and of the department financial contact for this requested subaward/MCA agreement or amendment (i.e. the UCLA contact for subrecipient's/Sister-Campus' financial related questions, may also be cc'd on submission of subrecipient's/MCA's invoices).

New Subawards/MCAs:

9. 1. **Estimated overall Project Period** (i.e. actual start and estimated final end dates for the full Project Period): _____ - _____
2. **Estimated total funding for above full Project Period:** \$ _____
10. 3. **Actual end date for sub/sister campus' first Budget Period:** _____
4. **Actual amount to be awarded for above Budget Period:** \$ _____
11. 5. Is sub/sister-campus conducting a clinical trial? Yes No
6. Does the project involve the transfer of human subjects data between UCLA and sub/sister-campus? Yes No
If yes, a separate transfer agreement is likely needed from another UCLA central office
7. Will sub/sister-campus be providing:
 - Program income
 - Mandatory cost share, amount of: \$ _____*Line-item cost share/matching budget and justification should be included in request.*
9. **Estimated award information:** This section is for *estimated project information only* – what is *planned* for the **new** subaward or MCA. So, for the estimated overall project period start date and end date, these are the dates that are **planned** for the subaward or MCA. So, if it is planned that the subaward or MCA will run for 5 years, this is the area where you should make note of that. The estimated total funding should also reflect the **planned** overall amount of the subaward or MCA (ex. If you are only awarding the subaward or MCA \$25,000 at this time,

but plan to fund the subrecipient/sister-campus in the amount of \$100,000 for their work over the full project period, you would make note of the \$100,000 amount here.).

10. **Actual** award information: This is the area where you would add the dates and dollars for this specific action. So, if it is planned that your subaward or MCA will run for 5 years, but this action is only for the first year – you would note the end date of that first year here. If you are planning to provide \$100,000 for their work over the full project period, but at this time are only awarding the subrecipient or sister-campus \$25,000, you would note that \$25,000 here.

11. Other information regarding the subrecipient's/sister-campus' role in the project:

- Is the subrecipient or sister-campus expected to be conducting a clinical trial?
 - **If 'Yes' is marked for clinical trial, you will be prompted to complete clinical trial questions on page 2. The clinical trial questions on page 2 are included to provide the OST with information required to draft a clinical trial subaward or MCA.**
- If human subjects work is taking place under the project – will human subjects data be transferred between UCLA and the subrecipient/sister-campus?
- If the subrecipient/sister-campus is expected to provide program income, or mandatory cost share for this project, note that information here.

Amendments to Subawards/MCAs:

12 A. How is this subaward/MCA being amended?
(Check all that apply.)

New end date: _____

Added funding: \$ _____ *(Do NOT include carryforward.)*
 Continuation Supplemental Incremental

Approving sub/sister-campus carryforward, in the amount of: \$ _____ from year _____ to year _____

Change of Subaward PI to: _____

Mandatory Cost Share for this period: \$ _____

Other *(if needed, continue in Comments section (pg. 2)):*

12. When requesting an amendment to a current subaward or MCA, check the appropriate boxes to let the OST know how you're amending that subaward or MCA:

- **New end date:** Are you providing the subrecipient/sister campus with more time?
- **Added funding:** Are you providing the subrecipient/sister campus with more funding?
 - Is this continuation funding, supplemental funding or incremental funding?
- **Approving sub/sister-campus carryforward:** Will this amendment provide approval to the subrecipient/sister-campus for the use of **the subrecipient's or sister campus'** unobligated balance from a previous project year(s)?
- **Change of Subaward PI:** If there is a change to the subaward/MCA PI, name that person here.
- **Mandatory Cost Share:** If the subrecipient/sister-campus is expected to provide mandatory cost share for this project, note the amount of mandatory cost share for the requested amendment's related period.
- **Other:** If requesting an **Other** action, add detail here. If additional space is needed, use the **Comments** field on page 2.

13 **Backup Documentation:** For new subawards/MCAs, this is documentation that was **not** received by OCGA at proposal stage (ex. a Subrecipient Institutional Information Form (SIIF) for non-FDP Expanded Clearinghouse members, revised project budgets, etc.). For amendments, this is any documentation that was **not** received by OCGA or updated documentation (i.e. revised budget/justification, change to scope of work, etc.). Check the applicable box and select 'Attach' to add related documentation to this form or include as a separate attachment when submitting your e-mailed request to OCGAsubawards@research.ucla.edu.

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| <input type="checkbox"/> Letter of Intent <input type="button" value="Attach"/> | <input type="checkbox"/> Subrecipient Institutional Information Form (SIIF) <input type="button" value="Attach"/> | <input type="checkbox"/> Subrecipient Subject Use Approvals <input type="button" value="Attach"/> |
| <input type="checkbox"/> Scope of Work <input type="button" value="Attach"/> | <input type="checkbox"/> IDC rate agreement <input type="button" value="Attach"/> | <input type="checkbox"/> UCLA OCGA Award Snapshot issued with applicable period "Awarded/Fully-executed" <input type="button" value="Attach"/> |
| <input type="checkbox"/> Budget & Justification <input type="button" value="Attach"/> | <input type="checkbox"/> Subrecipient UG Audit/FAMQ <input type="button" value="Attach"/> | |
| <input type="checkbox"/> Other <input type="button" value="Attach"/> | <input type="checkbox"/> Fair & Reasonable Cost Analysis (For-Profit entities only) <input type="button" value="Attach"/> | |

13. **Backup Documentation:** Use this section to note which documents you are submitting with your request form. For new subawards/MCAs, backup documentation that should be submitted with your request form is any documentation that was **not** received by OCGA at proposal stage (ex. a Subrecipient Institutional Information Form (SIIF) for non-FDP Expanded Clearinghouse members, human or animal subject approvals, revised project budgets, etc.). **Please keep in mind that you need to review all subrecipient documents to ensure that they are complete. For example, if a Subrecipient Institutional Information Form was collected, make sure it is complete – this means collecting any additional documentation that may have been triggered by the Subrecipient Institutional Information Form, such as a copy of the institution’s indirect cost rate agreement, a link to the institution’s UG audit, or, if the institution doesn’t have annual UG audits, then a copy of the institution’s completed Financial Audit Management Questionnaire.** For amendments, this is any documentation that has **not** already been received by OCGA or any **updated** documentation (i.e. revised budget/justification, change to scope of work, etc.). Check the applicable box and select 'Attach' to add related documentation to this form. Use of the 'Attach' button will trigger your File Explorer to open for the selection of the related document. Any document successfully uploaded to the Request Form will then be available in the PDF 'Attachments' menu (paperclip icon on the left, click to open). If documentation cannot be submitted using this method, be sure to include your attachments separately when submitting your e-mailed request to OCGAsubawards@research.ucla.edu.

14 **NIH International Subrecipient Data Collection Requirement (This box to be checked for international subawards under NIH funding.)**

This request is for a subaward to an international subrecipient under NIH funding. The UCLA PI is aware: 1) that this outgoing subaward will include a NIH award term requiring all international subrecipients to provide "access to copies of all lab notebooks, all data, and all documentation that supports the research outcomes as described in the progress report(s)...no less than once per year"; 2) that the UCLA PI is responsible for collecting, documenting receipt of, reviewing and ensuring OCGA/NIH access to the above and retaining it for 3 years after submission of the final financial report. Additional UCLA guidance regarding [NOT-OD-23-182](#) requirements can be found on the [OST's webpage](#).

15 **Conflict of Interest:** UCLA PI certifies that a financial interest does/ does not exist between the Subrecipient and any of the UCLA Investigators under this project (i.e. any one responsible for the design, conduct, or reporting of the research), or any spouses or registered domestic partners, or dependent children of any of the UCLA Investigators. If a financial interest does exist, notify the OST at OCGAsubawards@research.ucla.edu.

16 **Signature:** I have reviewed the Subrecipient’s budget and believe all costs stated therein to be reasonable and appropriate for the work to be performed in Subrecipient’s statement of work. In the event this action represents an increment, continuation or no cost extension, I certify that the Subrecipient’s performance goals have been achieved. **If the Subrecipient’s performance goals are NOT being achieved, please do not sign/submit and instead notify the OST at OCGAsubawards@research.ucla.edu.**

| | | |
|--|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Signature of Principal Investigator or Authorized Representative** | Project Role | Date |

**This must be an individual with programmatic knowledge of the project such as a Co-PI or Co-I. Signature indicates approval of any info on page two.

14. **NIH International Subrecipient Data Collection Requirement:** If the subaward or subaward amendment that you are requesting is for an international subrecipient under NIH funding, please confirm that the UCLA PI is aware of the NIH data collection requirements. For further information on the new NIH data collection requirements,

you can reference: <https://ocga.research.ucla.edu/wp-content/uploads/UCLA-OCGA-Guidance-NIH-Data-Collection.pdf>

15. **Conflict of Interest** (to be filled out for new subaward AND subaward amendment requests): In this section, the Principal Investigator or Authorized Representative is certifying as to whether any financial conflict of interest exists between UCLA and the subrecipient. The PI or Authorized Representative should check the appropriate 'does' or 'does not' box, confirming whether a conflict of interest exists.
16. **Signature**: The final section of the Request Form, sign-off by the Principal Investigator or an Authorized Representative. This section must be completed with each Request Form. The Principal Investigator or Authorized Representative is confirming the review of the budget, and in the case of an amendment, certifying that the subrecipient's/sister-campus' performance goals are being met. An important reminder for this section, if your PI feels that the subrecipient's performance goals are not being met, please reach out to the Outgoing Subaward Team.

Page 2:

17 **COMMENTS:** Please add details about cost share/matching funds, anticipated income, special funding/reporting requirements and/or clarifications required by the above and/or below section(s). The Subaward will flow down all applicable sponsor terms, conditions and reporting; OST may add additional terms/reporting if risk is identified during the required OST risk assessment. If there are additional terms or reporting that the UCLA PI would like included, please describe them in the comments field below. They will be included as allowed by Sponsor, UC and FDP (if applicable) policy/procedure.

17. **Comments:** So that the OST has a better understanding of the subaward/MCA agreement or amendment request, if any additional details should be included regarding cost share, program income, etc., add that here. If you have any additional reporting requirements or terms that you would like to add to the subaward or MCA, make note of those here. The OST will review your requests and get in touch if there are any questions.