Budget

Contractor	s Annual Em	ultant Services ployment Repo to March 31, 201	
Contracting State Agency Name: Contract Number: C000401 Contract Term: 03/01/2011 to 0. Contractor Name: Public Resource Contractor Address: 39 Broadway, Description of Services Being Prov	2/28/2016 s Advisory Group, Suite 1210, New Y	Agency Business Un Agency Department Inc York, NY 10006	
Data Processing Computer I Engineering Architect Service Health Services Mental Heal	Research		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
13-2051-00 Financial Analyst	21.00	1,114.49	\$301,596.45
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	21.00	1,114.49	\$301,596.45
Grand Total	21.00	1,114.49	\$301,596.45

Name of person who prepared this report: Brenda Henry

Title: Preparer's Signature: 0.0 Date Prepared: 05/11/2016

Phone #: (212) 566 - 7800

Contractor's	Annual Em	ultant Services ployment Rep to March 31, 201	
Contracting State Agency Name: D Contract Number: C000405 Contract Term: 08/10/2011 to 08/ Contractor Name: Deloitte Consulting Contractor Address: 39 North Pearl S Description of Services Being Provid	9/2016 g LLP St 3 rd Fl., Alban	Agency Business U Agency Department by, NY 12207	ID: 1050000
Data Processing Computer Pro Engineering Architect Services Health Services Mental Health	search		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
During time period represented by this	0.00	0.00	\$0.00
report, no hours have been worked	0.00	0.00	\$0.00
and no amount has been paid to	0.00	0.00	\$0.00
Deloitte Consulting LLP under this	0.00	0.00	\$0.00
contract.	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	0.00	0.00	\$ 0.00
Grand Total	0.00	0	0

Name of person who prepared this report: Jeffrey Dickert

Title: Senior Manager

Preparer's Signature:

Date Prepared: 05/10/2016

Phone #: (518) 472-4995

New York State Consultant Services
Contractor's Annual Employment Report
Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: [Division of the Bu	ıdget	
Contract Number: C000410		Agency Business U	nit: DOB01
Contract Term: 8/10/2011 to 8/9/2	2016	Agency Department	ID: 1050000
Contractor Name: McKinsey & Com	oany, Inc. Washi	ngton D.C	
Contractor Address: 1200 19th Stree	t NW, Suite 1100), Washington, DC 20	036
Description of Services Being Provic	led: Consulting	Services	
	1 10 200 te		
Scope of Contract (Choose one that b	27 ³⁷		
		ining	
Data Processing Computer Pr	· · -	Other IT consulting	
Engineering Architect Service	_ , .	B Environmental	Services
Health Services Mental Health	11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		
Accounting Auditing Pa	aralegal 🗌 Leg	gal 🛛 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Engagement Partner	0.00	0.00	\$0.00
Project Manager	0.00	0.00	\$0.00
Senior Analyst	0.00	0.00	\$0.00
Associate Analyst	0.00	0.00	\$0.00
Analyst	0.00	0.00	\$0.00
Total this Page	0.00	0.00	\$ 0.00
Grand Total			

Name of person who prepared this report: Tony D'Emidio

Title: Partner

Preparer's Signature:

Date Prepared: 5/13/2016

Phone #: 202-662-0093

AC 3272-S (Effective 4/12)

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: D Contract Number: C000411 Contract Term: 04/01/2013 to 04/ Contractor Name: Public Financial M Contractor Address: Two Logan Squa Description of Services Being Provide	1/2014 anagement, Inc. are, Suite 1600,	Agency Business Ur Agency Department Philadelphia, PA 191	ID: 1050000
□ Data Processing □ Computer Pro □ Engineering □ Architect Services □ Health Services □ Mental Health	search		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
None	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	0.00	0.00	\$ 0.00
Grand Total	0.00	0.00	\$0.00

Name of person who prepared this report: John Cape

P

Title: Managing Director

Preparer's Signature:<_

Date Prepared: 05/10/201/6

Phone #: 215-567-6100

(Use additional pages, if necessary)

Page 1 of 1

FORM

AC 3272-S (Effective 4/12)			
FORM B			
Contractor's	Annual Em	ultant Services ployment Rep to March 31, 201	
Contracting State Agency Name: D Contract Number: C000413 Contract Term: 3/1/2012 to 2/29/2 Contractor Name: Hawkins Delafied Contractor Address: 28 Liberty Stree Description of Services Being Provid	& Wood LLP t, New York, NY	Agency Business Un Agency Department 10005	
Data Processing Computer Processing Computer Processing Architect Services Health Services Mental Health	search		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Lawyers 23-1011.00	11.00	253.30	\$110,370.00
Paralegal 23-2011.00	1.00	19.05	\$1,905.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00

0.00

0.00

12.00

12.00

(Use additional pages, if necessary)

Name of person who prepared this report: Stanley R. Kramer

Total this Page

Grand Total

Title: Partner

Preparer's Signature: Date Prepared: 5/16/2016 Phone #: 212-820-9470

0.00

0.00

272

272.35

Page of

\$0.00

\$0.00

\$112,275.00

\$112,275.00

New York State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 21, 2016

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: D	ivision of the Bu	ldget	
Contract Number: C000419		Agency Business Ur	nit: DOB01
Contract Term: 9/1/2012 to 8/31/2	2017	Agency Department	ID: 1050000
Contractor Name: McKinsey & Comp	any, Inc. Washii	ngton D.C	
Contractor Address: 1200 19th Street	NW, Suite 1100	, Washington, DC 20	036
Description of Services Being Provide	ed: Consulting S	Services	
Scope of Contract (Choose one that b	15553 1000 1000 1000 1000 1000 1000 1000		
		ining	
Data Processing Computer Pro	In the second	Other IT consulting	
Engineering Architect Services	s 🗌 Surveying	Environmental	Services
Health Services Mental Health	Services		
Accounting Auditing Pa	ralegal 🗌 Leg	al 🛛 Other Consul	ting
	Number of	Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
Engagement Partner	0.00	0.00	\$0.00
Project Manager	0.00	0.00	\$0.00
Senior Analyst	0.00	0.00	\$0.00
Associate Analyst	0.00	0.00	\$0.00
Analyst	0.00	0.00	\$0.00
Total this Page	0.00	0.00	\$ 0.00
Grand Total			

Name of person who prepared this report: Tony D'Emidio

Title: Partner

Phone #: 202-662-0093

Preparer's Signature: _____ Date Prepared: 5/13/2016

(Use additional pages, if necessary)

Page 1 of 1

Contractor's	Annual Em	ultant Services ployment Repo to March 31, 201	
Contracting State Agency Name: D Contract Number: C000420 Contract Term: 10/01/2012 to 09/ Contractor Name: Milliman, Inc. Contractor Address: 250 Washingtor Description of Services Being Provid	30/2017 n Ave Ext, Albany	Agency Business Un Agency Department NY 12203	
Data Processing Computer Pr Engineering Architect Services Health Services Mental Health	search		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Managing Consultant (FSA) 15- 2011.00	1.00	17.45	\$9,161.25
Sr. Actuary (FSA/ASA) 15-2011.00	2.00	3.50	\$1,302.00
Actuarial Analyst 15-2011.00	1.00	57.75	\$10,741.50
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	The second se	Negative weathing	00.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	100 C 10		
	0.00	0.00	\$0.00
	0.00 0.00 0.00 0.00	0.00 0.00	\$0.00 \$0.00
	0.00 0.00 0.00	0.00 0.00 0.00	\$0.00 \$0.00 \$0.00
Total this Page	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00

Name of person who prepared this report: Colleen Whalen

Title: Accounting Manager

alleen Whalen Preparer's Signature: Date Prepared: 05/12/2016

Phone #: 518-514-7108

(Use additional pages, if necessary)

Page | of |

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: D Contract Number: C000421 Contract Term: 9/17/2012 to 9/16/ Contractor Name: MAXIMUS CONSU Contractor Address: 1891 Metro Cent Description of Services Being Provide	JLTING SERVIC ter Drive, Restor	Agency Business Ur Agency Department ES INC n VA 20190	CANADA - A CANAD CARANAR, A CARADA
Scope of Contract (Choose one that be Analysis Evaluation Data Processing Computer Processing Engineering Architect Services Health Services Mental Health Accounting Auditing Pa	search		
	Number of	Number of Hours Worked	Amount Payable Under the Contract
Employment Category	Employees		
11-1011-00 Chief Executive	1.00	108.00	\$41,080.00
11-1021.00 General Operations Mgr	2.00	911.00	\$213,611.00
13-2011.01 Accountants	6.00	1,506.50	\$277,169.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	9.00	2,525.50	\$531,860.00
Grand Total	9.00	2,525.50	\$531,860.00

Name of person who prepared this report: Nelson H. Clugston

heln &

Title: Vice President

Phone #: (804) 323-3535

Preparer's Signature: ____ Date Prepared: 5/16/2016

New York State Consultant Services
Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: D Contract Number: C000426 Contract Term: 6/01/2013 to 12/3 Contractor Name: MAXIMUS CONSU Contractor Address: 1891 Metro Cen Description of Services Being Provide	1/2019 JLTING SERVIC Iter Drive, Restor ed: Statewide C	Agency Business U Agency Department CES INC n VA 20190	ID: 1050000
Scope of Contract (Choose one that b	est fits): search	ining	
Data Processing Computer Pro	ogramming	Other IT consulting	
Engineering Architect Services	s 🗌 Surveying) 🗌 Environmental	Services
Health Services Mental Health	Services		
🛛 Accounting 🗌 Auditing 🗌 Pa	ralegal 🗌 Leg	gal 🔄 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
11-1011-00 Chief Executive	1.00	130.25	\$45,588.00
11-1021.00 General Operations Mgr	1.00	253.00	\$64,515.00
13-2011.01 Accountants	3.00	442.00	\$81,530.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	5.00	825.25	\$191,633.00
Grand Total	5.00	825.25	\$191,633.00

Name of person who prepared this report: Nelson H. Clugston

Title: Vice President

Phone #: (804) 323-3535

Preparer's Signature: ____ Date Prepared: 5/16/2016

Contractor's	Annual Em	ultant Services ployment Repo to March 31, 201	
Contracting State Agency Name: D Contract Number: C000427 Contract Term: 08/01/2013 to 07/3 Contractor Name: KPMG LLP Contractor Address: 515 Broadway, A Description of Services Being Provide	31/2018 Albany, NY 1220	Agency Business Ur Agency Department 7	ID: 1050000
□ Data Processing □ Computer Pro □ Engineering □ Architect Services □ Health Services □ Mental Health	search		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
13-2011.00 - Accountants and Auditors	6.00	218.00	\$36,850.00
	0.00	0.00	\$0.00
	0.00	15271-20121	
	0.00	0.00	\$0.00
	0.00	0.00	and the second se
			\$0.00
	0.00	0.00	\$0.00 \$0.00
	0.00 0.00	0.00 0.00	\$0.00 \$0.00 \$0.00
	0.00 0.00 0.00	0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00
	0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
	0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
Total this Page	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Name of person who prepared this report: Marie Zimmerman

Title: Partner

Preparer's Signature: Marie Zummennen Date Prepared: 5/11/2016 Phone #: 518-427-4674

Contractor's	Annual Em	Iltant Services ployment Repo to March 31, 2016	ch l			
Contracting State Agency Name: D Contract Number: C000429 Contract Term: 8/1/2013 to 7/31/2 Contractor Name: Toski & Co., CPAs Contractor Address: 6390 Main Stree Description of Services Being Provide	s, P.C. et, Suite 200, Wil	Agency Business Ur Agency Department liamsville, New York	ID: 1050000			
Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Other Consulting						
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
13-2011.02 Auditors	Pricture as					
13-2011.02 Auditors	6.00	0.00	\$0.00			
13-2011.02 Additors	6.00 0.00	0.00 0.00	\$0.00 \$0.00			
13-2011.02 Additors						
	0.00	0.00	\$0.00			
	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00			
	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00			
Total this Page	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00			

Name of person who prepared this report: Douglas E. Zimmerman, CPA

Title: Managing Director

Preparer's Signature: 🏒

Date Prepared: 5/13/2016

Phone #: (716) 634-0700

New York State Consultant Services
Contractor's Annual Employment Report
Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: Division of the Budget Contract Number: C000430 Agency Business Unit: DOB01 Contract Term: 02/01/2014 to 01/31/2019 Agency Department ID: 1050000 Contractor Name: Public Resources Advisory Group, Inc. Contractor Address: 39 Broadway, Suite 1210, New York, NY 10006 Description of Services Being Provided: Financial Advisory Service Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting Number of Number of Amount Payable **Employment Category** Employees **Hours Worked** Under the Contract 13-2051-00 Financial Analyst 24.00 2,102.98 \$552,255.14 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 Total this Page 24.00 2,102.98 \$552,255.14 Grand Total 24.00 2,102 \$552,255.14

Name of person who prepared this report: Brenda Henry

Title: Controller

Preparer's Signature: <u>Secondo Meny</u> Date Prepared: 05/11/2016 Phone #: (212) 566 - 7800

New York State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016						
Contracting State Agency Name:Division of the BudgetContract Number:C000431Agency Business Unit:Contract Term:02/01/2014to01/31/2019Contractor Name:Public Financial Management, Inc.Contractor Address:40 Wall Street, 49th Floor, New York, NY 10005Description of Services Being Provided:Secondary Bond Sale Financial Advisory Services						
Scope of Contract (Choose one that best fits): Analysis Evaluation Data Processing Computer Programming Engineering Architect Services Health Services Mental Health Services Accounting Paralegal						
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
Financial Analysts	0.00	0.00	\$0.00			
-	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
Total this Page	0.00	0.00	\$ 0.00			
Grand Total	0.00	0	\$0.00			

Name of person who prepared this report: Tracey Keays

Title: Managing Director

Preparer's Signature:

Date Prepared: 05/10/2016

Phone #: 212-809-4212

Contractor's	Annual Em	Iltant Services ployment Rep to March 31, 201	
Contracting State Agency Name: D Contract Number: C000432 Contract Term: 02/01/2014 to 01/3 Contractor Name: Alvarez & Marsal F Contractor Address: 600 Madison Av Description of Services Being Provide restructuring services	Public Sector Ser enue, 8 th Floor, N	Agency Business Un Agency Department vices, LLC New York, NY 10022	ID: 1050000
Data Processing Computer Pro Engineering Architect Services Health Services Mental Health	search	Other IT consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Engagement Partner	0.00	0.00	\$0.00
Project Manager	0.00	0.00	\$0.00
Senior Analyst	0.00	0.00	\$0.00
Analyst	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	0.00	0.00	\$ 0.00
Grand Total	0.00	0	\$0.00

Name of person who prepared this report: Asta Roques

Title: Public Sector Operations Director Preparer's Signature: <u>Mar Maunguel S</u> Date Prepared: 05/11/2016

Phone #: 202-688-4271

Contractor's	Annual Em	ultant Services ployment Repo to March 31, 201	
Contracting State Agency Name: Div Contract Number: C000433 Contract Term: 02/01/2014 to 01/ Contractor Name: The Boston Consu Contractor Address: 430 Park Avenu Description of Services Being Provid Restructuring Services *Contract C000433 is a multiple-awa during the reporting period 04/01/15	31/2019 ulting Group, Inc. ie, New York, NY ed: Local Gover ird ordering contr	Agency Business Un Agency Department 7, 10022 nment Management,	ID: 1050000 Financial, and
Data Processing Computer Pr Engineering Architect Services Health Services Mental Health	search		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
13-1111.00 - Management Analysts	0.00	0.00	\$0.00
Total this Page	0.00	0.00	\$ 0.00

Name of person who prepared this report: Bryan Schuster Title:

Scutuster

Contracts & Procurement Manager Preparer's Signature: Phone #: (301) 771-2350

Date Prepared: 05/24/2016

		the survey of the survey	
Contractor's	Annual Em	Iltant Services ployment Repo to March 31, 2010	
Contract Number: C000434	gton Street, Suite	Agency Business Ur Agency Department n, Inc. e 400, Rochester, NY	ID: 1050000 14614
Data Processing Computer Pro Engineering Architect Services Health Services Mental Health	search		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
11-1011.00 Chief Executive	1.00	0.00	\$0.00
(Engagement Partner) 13-2011.01 Accountants	2.00	0.00	\$0.00
43-9111.00 Statistical Assistants	2.00	0.00	
(Analyst)	1.00	0.00	\$0.00
19-3011.00 Economists (Senior	1.00 3.00	0.00	
19-3011.00 Economists (Senior	200 2.20		\$0.00
19-3011.00 Economists (Senior	3.00	0.00	\$0.00 \$0.00
19-3011.00 Economists (Senior	3.00 0.00	0.00	\$0.00 \$0.00 \$0.00
19-3011.00 Economists (Senior	3.00 0.00 0.00	0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00
19-3011.00 Economists (Senior	3.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00
19-3011.00 Economists (Senior	3.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
	3.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
	3.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
19-3011.00 Economists (Senior	3.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
19-3011.00 Economists (Senior	3.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Name of person who prepared this report: Susan Barnes

Title: CFO

Preparer's Signature: Date Prepared: 05/10/2016

Phone #: 585-327-7050

AC 3272-S (Effective 4/12)

FORM B

Contractor'		Itant Services bloyment Rep to March 31, 201	
	1/31/2019 C burg Rd, West Ches vided: Local Goverr s provided on this o t best fits): Research	Agency Business Ur Agency Department ster, PA 19380 ment Management contract during the R	ID: 1050000 Financial and eport Period.
Accounting Auditing	Paralegal Lega	al Other Consul	
Employment Category	Employees	Hours Worked	Amount Payable Under the Contrac
	0.00	0.00	\$0.(
	0.00	0.00	\$0.
	0.00	0.00	50
	0.00	0.00	\$0.
	0.00	0.00	\$0.
	0.00	0.00	\$0.
	0.00	0.00	\$0.
	0.00	0.00	\$0.0
	0.00	0.00	\$0.0
		0.00	
	0.00		\$0.(
	0,00	0.00	\$0.
	0.00	0.00 0.00	\$0. \$0.
	0.00 00.00 00.00	0.00 0.00 0.00	\$0. \$0. \$0.
Total this Page Grand Total	0.00	0.00 0.00	\$0. \$0.

Name of person who prepared this report: Jennifer Wall

Title: Manager

Preparer's Signature: Date Prepared: 05/12/2015

profile

Phone #: 4156139576

(Use additional pages, if necessary)

Page 1 of 1

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: Division of the Budget Contract Number: C000438 Agency Business Unit: DOB01 Contract Term: 05/14/2014 to 06/30/2015 Agency Department ID: 1050000 Contractor Name: Hinckley, Allen & Snyder LLP Contractor Address: 30 South Pearl Street, Suite 901, Albany, NY 12207-3492 Description of Services Being Provided: n addition to those services outlined in the Contract, current services include continued subpoena compliance as necessary; continued advice and counsel to client as needed; continued communications with U.S. Attorney's office as needed; review relevant documents as necessary. Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Auditing Paralegal 🛛 Legal Other Consulting Number of Number of Amount Payable Employment Category Employees **Hours Worked** Under the Contract Lawyer 2.00 30.50 \$15,450.00 Paralegal 1.00 0.50 \$37.50 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 0.00 0.00 \$0.00 Total this Page 3.00 31.00 \$15,487.50 Grand Total

Name of person who prepared this report: Michael L. Koenig

Title: Partner

Phone #: 518-396-3110

Preparer's Signature: _____ Date Prepared: 05/11/2016

AC 3272-S (Effective 4/12)

FORM B

Contracting State Agency Name: Division of the Budget Contract Number: C000439 Agency Business Unit: DOB01 Contract Term: 08/10/2011 to 08/9/2016 Agency Department ID: 1050000						
Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Other Consulting						
Employment Category Number of Employees Number of Hours Worked Under the Contract						
N/A 0.00 0.00 \$0.00						
0.00 0.00 \$0.00						
0.00 0.00 \$0.00						
0.00 0.00 \$0.00						
0.00 0.00 \$0.00						
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0.00 0.00 \$0.00						
0.00 0.00 \$0.00						
Total this Page 0.00 0.00 \$ 0.00 Grand Total 0.00 0 \$ 0.00						

Name of person who prepared this report: Andrea Dane

Title: Contract Sr. Analyst Andrea Dame Preparer's Signature:

Date Prepared: 5/10/2016

Phone #: 512-732-5781

(Use additional pages, if necessary)

Page 1 of 1

New	York	State	Consu	Itant Sei	rvices
Contrac	tor's	Annu	al Emp	oloymer	nt Report
Report F	Period	: April 1	1, 2015	to March	31, 2016

Contracting State Agency Name: Division of the Budget Contract Number: T000027 Agency Business Unit: DOB01 Contract Term: 04/01/2015 to 03/31/2016 Agency Department ID: 1050000 Contractor Name: Bassett Lean Consulting LLC Contractor Address: 2 Oak Brook Blvd, Saratoga Springs NY 12866 Description of Services Being Provided: Lean Workshop Facilitation Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training Data Processing Computer Programming Other IT consulting Engineering Architect Services Surveying Environmental Services Health Services Mental Health Services Accounting Auditing Paralegal Legal Other Consulting Number of Number of **Amount Payable Employment Category** Employees **Hours Worked Under the Contract** 13 1111 00 1 00 272 00 ¢40000 00

13-1111.00	1.00	272.00	\$43823.22
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	272.00	\$ 0.00
Grand Total	1.00	272	\$43823.22

Name of person who prepared this report: Mark Bassett

Mach Courses

Title: GM Bassett Lean Consulting LLC

Phone #: 5182260276

Preparer's Signature:

Date Prepared: 05/24/2016 *

Contractor's	Annual Em	Iltant Services ployment Repo to March 31, 2016	
Contracting State Agency Name: D Contract Number: T000029 Contract Term: 3/1/2015 to 2/28/2 Contractor Name: Daniel Baugher Contractor Address: 150 Nassau Stre Description of Services Being Provide Promotional Principal Budget Examin	eet, #11D, N.Y., ed: Assist in adr	Agency Business Ur Agency Department N.Y. 10038 ninistration and scori	ID: 1050000
□ Data Processing □ Computer Pro □ Engineering □ Architect Services □ Health Services □ Mental Health	search		
	Manufacture		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Employment Category 13-1111.00 Management Analyst			
	Employees	Hours Worked	Under the Contract
	Employees 1.00	Hours Worked 70.00	Under the Contract \$10,465.05
	Employees 1.00 0.00	Hours Worked 70.00 0.00	Under the Contract \$10,465.05 \$0.00
	Employees 1.00 0.00 0.00	Hours Worked 70.00 0.00 0.00	Under the Contract \$10,465.05 \$0.00 \$0.00
	Employees 1.00 0.00 0.00 0.00	Hours Worked 70.00 0.00 0.00 0.00	Under the Contract \$10,465.05 \$0.00 \$0.00 \$0.00
	Employees 1.00 0.00 0.00 0.00 0.00	Hours Worked 70.00 0.00 0.00 0.00	Under the Contract \$10,465.05 \$0.00 \$0.00 \$0.00 \$0.00
	Employees 1.00 0.00 0.00 0.00 0.00 0.00	Hours Worked 70.00 0.00 0.00 0.00 0.00	Under the Contract \$10,465.05 \$0.00 \$0.00 \$0.00 \$0.00
	Employees 1.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 70.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$10,465.05 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
	Employees 1.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 70.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$10,465.05 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
	Employees 1.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 70.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$10,465.05 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
	Employees 1.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 70.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Under the Contract \$10,465.05 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
	Employees 1.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Hours Worked 70.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Under the Contract \$10,465.05 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
	Employees 1.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 70.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Under the Contract \$10,465.05 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Name of person who prepared this report: Daniel Baugher

Title: Consultant/Owner

DIMB fr Preparer's Signature: Date Prepared: 5/10/2016

Phone #: 212 962-0737

New	York	State	Cor	sult	ant	Ser	vic	es	
Contract	tor's	Annu	al E	mpl	loyn	nen	it F	Repo	rt

Report Period: April 1, 2015 to March 31, 2016

	the second se		
Contracting State Agency Name: N	YS Division of the	e Budget	
Contract Number: T130001		Agency Business Unit: DOB01	
Contract Term: 9/1/2013 to 8/31/2017		Agency Department ID: 1050000	
Contractor Name: Toski & Co., CPAs	s, P.C.		
Contractor Address: 6390 Main Street, Suite 200, Williamsville, New York 14221			
Description of Services Being Provided: Internal Control Audit			
Scope of Contract (Choose one that best fits):			
Analysis Evaluation Research Training			
Data Processing Computer Programming Other IT consulting			
Engineering Architect Services Surveying Environmental Services			
Health Services Mental Health		52.22	
Accounting Auditing Pa	aralegal 🗌 Leg	al 🗌 Other Consul	ting
	Number of	Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
13-2011.02 Auditors	6.00	0.00	\$0.00
13-2011.02 Auditors	6.00 0.00	0.00 0.00	\$0.00 \$0.00
13-2011.02 Auditors		11118-1111-111-111-111-11-11-11-11-11-11	A CONTRACTOR OF
13-2011.02 Auditors	0.00	0.00	\$0.00
13-2011.02 Auditors	0.00 0.00	0.00 0.00	\$0.00 \$0.00
13-2011.02 Auditors	0.00 0.00 0.00	0.00 0.00 0.00	\$0.00 \$0.00 \$0.00
13-2011.02 Auditors	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00
13-2011.02 Auditors	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00
13-2011.02 Auditors	0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
13-2011.02 Auditors	0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
13-2011.02 Auditors	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
13-2011.02 Auditors	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
13-2011.02 Auditors	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
13-2011.02 Auditors	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Name of person who prepared this report: Douglas E. Zimmerman, CPA

Title: Managing Director

Preparer's Signature:

Date Prepared: 5/13/2016

Phone #: (716) 634-0700