FORM A

New York State Consultant Services
Contractor's Planned Employment
From Contract Start Date Through the End of the Contract Term

State Agency Name: New York State's Office of General Services

State Agency Department ID: | Agency Business Unit:

Contractor Name: The Boston Consulting Group, Inc. | Contract Number:

Contract Start Date: 11/1/2025 | Contract End Date: 3/1/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Management Analysts	12.00	7,800.00	$2,700,000
	0.00	0.00	$0.00
	0.00	0.00	$0.00
	0.00	0.00	$0.00
	0.00	0.00	$0.00
	0.00	0.00	$0.00
	0.00	0.00	$0.00
	0.00	0.00	$0.00
	0.00	0.00	$0.00
	0.00	0.00	$0.00
	0.00	0.00	$0.00
	0.00	0.00	$0.00
	0.00	0.00	$0.00
	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	14.00	7,800.00	$2,700,000
Grand Total	14.00	7,800.00	$2,700,000

Name of person who prepared this report: Selin Zalma

Title: Managing Director and Senior Partner | Phone #: 917-916-9526

Preparer's Signature: _____

Date Prepared: 10/31/2025

(Use additional pages, if necessary)