

Department of Corrections and  
Community Supervision

3250226

**FORM B**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C00068GG**

**Agency Business Unit: DOC01**

**Contract Term: 10/01/22-09/30/27**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Pathways Renewed Inc.**

**Contractor Address: PO BOX 949 Kings Park, NY 11754**

**Description of Services Being Provided: Community Based Residential Program**

**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

<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours Worked</b>	<b>Amount Payable Under the Contract</b>
Counseling	1	9100	30,000
Administrative	1	9100	42,000
Manager	1	9100	67,000
Director	1	9100	21,000
<b>Total this page</b>			
<b>Grand Total</b>			<b>\$160,000</b>

**Name of person who prepared this report:**

**Title: Dr.Sylvia.A.Diaz**

**Phone # 631.830.7975**

**Preparer's Signature:**



**Date Prepared: 3/31/26**

**FORM 9**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

Report Period: April 1, 2025 to March 31, 2026

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C00074GG**

**Agency Business Unit: DOC01**

**Contract Term: 10/01/2025 to 09/30/2026**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Hope of Buffalo – Bissonette House**

**Contractor Address: Mailing Address 1001 E Delavan Ave #22, Buffalo, NY 14215**

**Description of Services Being Provided: Reentry and Transitional Housing Services**

**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

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Executives	1	559.36	\$26,374.70
Social & Community Service Managers	6	7,392.20	\$180,594.92
Residential Advisors	11	9,161.53	\$176,545.47
Maintenance Repair Workers General	1	1,029.52	\$24,704.28
<b>Total this page</b>	<b>19</b>	<b>18,142.61</b>	<b>\$408,219.37</b>
<b>Grand Total</b>	<b>19</b>	<b>18,142.61</b>	<b>\$408,219.37</b>

**Name of person who prepared this report: Jennifer Schulefand**

**Title: CFO**

**Phone # 716-870-5055**

**Preparer's Signature:**



**Date Prepared:**

4/14/26

**FORM B**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C00083GG**

**Agency Business Unit: DOC01**

**Contract Term: 7/1/23 – 6/30/28**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Northern New York Visitors' Hospitality Centers**

**Contractor Address: PO Box 685 Malone, NY 12953**

**Description of Services Being Provided: Hospitality to visitors**

**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

<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours Worked</b>	<b>Amount Payable Under the Contract</b>
Administrator	1	66.67	3333.00
Site Manager	1	0	0
<b>Total this page</b>	<b>2</b>	<b>66.67</b>	<b>3333.00</b>
<b>Grand Total</b>	<b>2</b>	<b>66.67</b>	<b>3333.00</b>

**Name of person who prepared this report:**

**William Sheridan**

**Title: Administrator**

**Phone #  
315-**

**FORM B**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C00084GG**

**Agency Business Unit: DOC01**

**Contract Term: 7/1/23 – 6/30/28**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Northern New York Visitors' Hospitality Centers**

**Contractor Address: PO Box 685 Malone, NY 12953**

**Description of Services Being Provided: Hospitality to visitors**

**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

<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours Worked</b>	<b>Amount Payable Under the Contract</b>
Administrator	1	66.67	3333.00
Site Manager	2	340	5376.25
<b>Total this page</b>	<b>3</b>	<b>406.67</b>	<b>8709.25</b>
<b>Grand Total</b>	<b>3</b>	<b>406.67</b>	<b>8709.25</b>

**Name of person who prepared this report:**

**William Sheridan**

**Title: Administrator**

**Phone #  
315-**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C00085GG**

**Agency Business Unit: DOC01**

**Contract Term: 7/1/23 – 6/30/28**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Northern New York Visitors' Hospitality Centers**

**Contractor Address: PO Box 685 Malone, NY 12953**

**Description of Services Being Provided: Hospitality to visitors**

**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

<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours Worked</b>	<b>Amount Payable Under the Contract</b>
Administrator	1	66.67	3333.00
Site Manager	1	185	2917.50
<b>Total this page</b>	<b>2</b>	<b>251.67</b>	<b>6250.50</b>
<b>Grand Total</b>	<b>2</b>	<b>251.67</b>	<b>6250.50</b>

**FORM B**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C00086GG**

**Agency Business Unit: DOC01**

**Contract Term: 7/1/23 – 6/30/28**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Northern New York Visitors' Hospitality Centers**

**Contractor Address: PO Box 685 Malone, NY 12953**

**Description of Services Being Provided: Hospitality to visitors**

**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

<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours Worked</b>	<b>Amount Payable Under the Contract</b>
Administrator	1	66.67	3333.00
Site Manager	1	20	315
<b>Total this page</b>	<b>2</b>	<b>86.67</b>	<b>3648</b>

**FORM B**

**New York State Consultant Services  
Contractor's Annual Employment Report**

**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C00087GG**

**Agency Business Unit: DOC01**

**Contract Term: 7/1/23 – 6/30/28**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Northern New York Visitors' Hospitality Centers**

**Contractor Address: PO Box 685 Malone, NY 12953**

**Description of Services Being Provided: Hospitality to visitors**

**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

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
<b>Administrator</b>	1	66.67	3333.00
<b>Site Manager</b>	1	179.5	2848.38

<b>Total this page</b>	<b>2</b>	<b>246.20</b>	<b>6181.38</b>
<b>Grand Total</b>	<b>2</b>	<b>246.20</b>	<b>6181.38</b>

**Name of person who prepared this report:**

**William Sheridan**

**Title: Administrator**

**Phone #**

**315-**

**324-**

**6093**

**Preparer's Signature:**

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**Date Prepared: 4/20/2026**

**FORM B**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C00088GG**

**Agency Business Unit: DOC01**

**Contract Term: 7/1/23 – 6/30/28**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Northern New York Visitors' Hospitality Centers**

**Contractor Address: PO Box 685 Malone, NY 12953**

**Description of Services Being Provided: Hospitality to visitors**

**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

<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours Worked</b>	<b>Amount Payable Under the Contract</b>
<b>Administrator</b>	<b>1</b>	<b>66.67</b>	<b>3333.00</b>
<b>Site Manager</b>	<b>1</b>	<b>70</b>	<b>1120.00</b>

<b>Total this page</b>	<b>2</b>	<b>136.67</b>	<b>4453.00</b>
<b>Grand Total</b>	<b>2</b>	<b>136.67</b>	<b>4453.00</b>

**Name of person who prepared this report:**

**William Sheridan**

**Title: Administrator**

**Phone #**

**315-**

**324-**

**6093**

**Preparer's Signature:**

---

**Date Prepared: 4/20/2026**

**FORM B**

**New York State Consultant Services**  
**Contractor's Annual Employment Report**  
**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**  
**Contract Number: C00089GG** **Agency Business Unit: DOC01**  
**Contract Term: 7/1/23 – 6/30/28** **Agency Department ID: 3250226**  
**Contractor/Vendor Name: Northern New York Visitors' Hospitality Centers**  
**Contractor Address: PO Box 685 Malone, NY 12953**  
**Description of Services Being Provided: Hospitality to visitors**

**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

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Administrator	1	66.67	3333.00
Site Manager	1	390	6163.75

<b>Total this page</b>	<b>2</b>	<b>456.67</b>	<b>9496.75</b>
<b>Grand Total</b>	<b>2</b>	<b>456.67</b>	<b>9496.75</b>

**Name of person who prepared this report:**

**William Sheridan**

**Title: Administrator**

**Phone #**  
**315-**  
**324-**  
**6093**

**Preparer's Signature:**

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**Date Prepared: 4/20/2026**

**FORM B**

**New York State Consultant Services  
Contractor's Annual Employment Report  
Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**  
**Contract Number: C00090GG** Agency Business Unit: DOC01  
**Contract Term: 7/1/23 – 6/30/28** Agency Department ID: 3250226  
**Contractor/Vendor Name: Northern New York Visitors' Hospitality Centers**  
**Contractor Address: PO Box 685 Malone, NY 12953**  
**Description of Services Being Provided: Hospitality to visitors**

**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

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Administrator	1	66.67	3333.00
Site Manager	1	399	6301.75

<b>Total this page</b>	<b>2</b>	<b>465.67</b>	<b>9634.75</b>
<b>Grand Total</b>	<b>2</b>	<b>465.67</b>	<b>9634.75</b>

**Name of person who prepared this report:**

**William Sheridan**

**Title: Administrator**

**Phone #**  
**315-**  
**324-**  
**6093**

**Preparer's Signature:**

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**Date Prepared: 4/20/2026**

**FORM B**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C00091GG**

**Agency Business Unit: DOC01**

**Contract Term: 7/1/23 – 6/30/28**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Northern New York Visitors' Hospitality Centers**

**Contractor Address: PO Box 685 Malone, NY 12953**

**Description of Services Being Provided: Hospitality to visitors**

**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

<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours Worked</b>	<b>Amount Payable Under the Contract</b>
<b>Administrator</b>	<b>1</b>	<b>66.67</b>	<b>3333.00</b>
<b>Site Manager</b>	<b>1</b>	<b>494</b>	<b>7801.75</b>

<b>Total this page</b>	<b>2</b>	<b>560.67</b>	<b>11,134.75</b>
<b>Grand Total</b>	<b>2</b>	<b>560.67</b>	<b>11,134.75</b>

**Name of person who prepared this report:**

**William Sheridan**

**Title: Administrator**

**Phone #**

**315-**

**324-**

**6093**

**Preparer's Signature:**

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**Date Prepared: 4/20/2026**

**FORM B**

**New York State Consultant Services**  
**Contractor's Annual Employment Report**  
 Report Period: April 1, 2025 to March 31, 2026

**Contracting State Agency Name: Department of Corrections and Community Supervision**  
**Contract Number: C161777** Agency Business Unit: **DOC01**  
**Contract Term: May 10, 3035 – May 9, 2030** Agency Department ID: **3250226**  
**Contractor/Vendor Name: Correctional Dialysis Services LLC d/b/a Rendevor Dialysis**  
**Contractor Address: 1717 W 6<sup>th</sup> St. Ste. 350, Austin, TX 78703**  
**Description of Services Being Provided: Operation of Chronis Hemodialysis Units**

**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

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
FT Clinical Coord. (RN)	3	3922	
FT RN	2	2883	
FT LPN	1	1608	
FT CCHT	1	1014	
PRN RN	8	1023	
PRN CCHT	1	1188	
PRN LPN	1	167	
<b>Total this page</b>	<b>17</b>	<b>11,805</b>	
<b>Grand Total</b>	<b>17</b>	<b>11,805</b>	

Name of person who prepared this report: **Clifton De Leon**

Title: **Director, Contracts**

Phone # **361-449-7009**

Preparer's Signature:

*Clifton De Leon*

Date Prepared: **April 1, 2026**

**FORM B**

**New York State Consultant Services**  
**Contractor's Annual Employment Report**  
 Report Period: April 1, 2025 to March 31, 2026

**Contracting State Agency Name: Department of Corrections and Community Supervision**  
**Contract Number: C161781** Agency Business Unit: **DOC01**  
**Contract Term: 01/01/2025 – 12/31/2026** Agency Department ID: **3250226**  
**Contractor/Vendor Name: WILMER CUTLER PICKERING HALE AND DORR LLP**  
**Contractor Address: 250 Greenwich St. 45th Floor**  
**New York, NY 10007 USA**  
**Description of Services Being Provided: LAW FIRM**

- 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     X Legal     Other Consulting

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Lawyers	27	6,079	5,399,855.00
Paralegals and Legal Assistants	28	721	262,425.00
<b>Total this page</b>	<b>55</b>	<b>6,800</b>	<b>5,662,280.00</b>
<b>Grand Total</b>	<b>55</b>	<b>6,800</b>	<b>5,662,280.00</b>

Name of person who prepared this report: **Steven Smith**

Title: **Director, Legal Operations**

Phone # **(202) 247-2425**

Preparer's Signature: Steven Smith

Date Prepared: **April 9, 2026**

**FORM B**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C161812** Agency Business Unit: DOC01  
**Contract Term: 8/20/2025 - 8/19/2026** Agency Department ID: 3250226  
**Contractor/Vendor Name: AJF, Correctional Consulting & Auditing, L.L.C.**  
**Contractor Address: 5835 Coulson Ct. Lansing, MI 48911**  
**Description of Services Being Provided: PREA audits**

**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

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
13-2011.00 Auditor	1	250 hrs.	\$19,500.00
<b>Total this page</b>	<b>1</b>	<b>250 Hrs.</b>	<b>\$19,500.00</b>
<b>Grand Total</b>	<b>1</b>	<b>250 hrs.</b>	<b>\$19,500.00</b>

**Name of person who prepared this report: Amy J. Fairbanks**

**Title: owner**

**Phone # 517 303-4081**

**Preparer's Signature:**



**Date Prepared: 3/27/2026**



# Corrections and Community Supervision

## FORM B

### New York State Consultant Services

### Contractor's Annual Employment Report

Report Period: April 1, 2025 to March 31, 2026

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C161859**

**Agency Business Unit: DOC01**

**Contract Term: 1/16/2026 – 1/15/2026**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: RubiconMD, Inc.**

**Contractor Address: 525 W Monroe St. Chicago, IL 60661**

**Description of Services Being Provided: Electronic Consult Services**

#### 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

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1229-00	329	We charge per eConsult	\$100/eConsult
<b>Total this page</b>	<b>329</b>	<b>We don't charge hourly, just per eConsult</b>	<b>\$100/eConsult</b>
<b>Grand Total</b>	<b>329</b>		<b>\$100/eConsult (total is variable, and not to exceed \$2,400,000)</b>

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**Name of person who prepared this  
report:**    **Arcadio Maldonado**

**Title:**        **Executive Partner**

**Phone #**    **973-417-0303**

**Preparer's Signature:**              *Arcadio Maldonado*          

**Date Prepared:**    **4/17/2026**

**FORM B**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: C161867**

**Agency Business Unit: DOC01**

**Contract Term: 5 Years**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Esperta Health**

**Contractor Address: 101 Westpark Dr, Brentwood, TN, 37027**

**Description of Services Being Provided: Comprehensive Wound Care**

**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

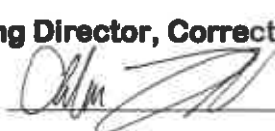
<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours Worked</b>	<b>Amount Payable Under the Contract</b>
Nurse Practitioners	2	40 Hours/week	Flat fee per patient
Physician	1	40 Hours/week	Flat fee per patient
<b>Total this page</b>	<b>3</b>	<b>31,200</b>	<b>Variable based on number of patients</b>
<b>Grand Total</b>			

**Name of person who prepared this report: Adam Floyd**

**Title: VP & Managing Director, Corrections**

**Phone # 757-500-3856**

**Preparer's Signature:**



**Date Prepared: 3/26/26**

**FORM B**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

**Report Period: April 1, 2025 to March 31, 2026**

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: T161836**

**Agency Business Unit: DOC01**

**Contract Term: 10/20/2025 -- 4/29/2026**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Mike Thompson Consulting LLC**

**Contractor Address: 2608 Northampton St. NW, Washington DC 20015**

**Description of Services Being Provided: Recruitment and retention**

**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

<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours Worked</b>	<b>Amount Payable Under the Contract</b>
Project Director	1	115	
Project Manager	1	260	
<b>Total this page</b>			
<b>Grand Total</b>			

**Name of person who prepared this report: Emily Miranda**

**Title: Business Manager**

**Phone # 718-207-8412**

**Preparer's Signature:**



**Date Prepared: 4/23/2026**

**FORM B**

**New York State Consultant Services**

**Contractor's Annual Employment Report**

Report Period: April 1, 2025 to March 31, 2026

**Contracting State Agency Name: Department of Corrections and Community Supervision**

**Contract Number: T161857**

**Agency Business Unit: DOC01**

**Contract Term: 1-12-2026 to 7-11-2026**

**Agency Department ID: 3250226**

**Contractor/Vendor Name: Gartner, Inc.**

**Contractor Address: 1325 Sixth Avenue, 18<sup>th</sup> Floor, New York, NY 10019**

**Description of Services Being Provided: IT Strategy and Planning to Support Corrections Officer Recruitment**

**Scope of Contract (Choose one that best fits):**

**XAnalysis**     **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**

<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours Worked</b>	<b>Amount Payable Under the Contract</b>
Management Analyst	2	104.5	\$66,925.50
Computer Systems Analyst	1	216	\$80,136.00
Information Technology Project Manager	1	155	\$90,210.00
<b>Total this page</b>	<b>4</b>	<b>475.5</b>	<b>\$237,271.50</b>
<b>Grand Total</b>	<b>4</b>	<b>475.5</b>	<b>\$237,271.50</b>

**Name of person who prepared this report: Jenn Onofrio**

**Title: Managing Partner**

**Phone # 908-415-0583**

**Preparer's Signature:**



**Date Prepared: 4/21/2026**