

EXHIBIT X

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: SUNY Upstate Medical Univ.
 State Agency Department ID: 3320211 Agency Business Unit: 28110
 Contractor Name: Psychiatry Faculty Practice, Inc. Contract Number: CX-505239
 Contract Start Date: 7/1/2018 Contract End Date: 6/30/2021

| Employment Category | Number of Employees | Number of Hours to be Worked | Amount Payable Under the Contract |
|---------------------|---------------------|------------------------------|-----------------------------------|
| Psychiatrist | 1 | 3,432 | \$155,753.00 |
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| Total this Page | 1 | 3,432 | \$155,753.00 |
| Grand Total | 1 | 3,432 | \$155,753.00 |

Name of person who prepared this report: William H. Shepard
 Title: Contracts Administrator Phone #: 315.464.4680
 Preparer's Signature: William H. Shepard
 Date Prepared: 4 / 7 / 20