

**ASSET MANAGEMENT/ INVENTORY REPORT/
GAAP REPORTING FORM**
CO-59 REV. 7/2023



INSTRUCTIONS:

1. IN ACCORDANCE WITH THE PROVISIONS OF SECTION 4-36 OF THE CONNECTICUT GENERAL STATUTES, THIS REPORT MUST BE ON FILE WITH THE OFFICE OF THE STATE COMPTROLLER ON OR BEFORE OCTOBER 1ST OF EACH YEAR REFLECTING THE TOTAL ASSETS / INVENTORY WITHIN THE AGENCY AS OF JUNE 30TH.
2. REFER TO THE STATE PROPERTY CONTROL MANUAL, CHAPTER 10 FOR SPECIFIC INSTRUCTIONS ON FILLING OUT THIS FORM. WWW.OSC.CT.GOV/MANUALS
3. IF EITHER THE PREPARER OR AUTHORIZED SIGNER LISTED AT THE BOTTOM OF THIS FORM WOULD LIKE TRAINING ON THE CORE-CT MODULES INVOLVED IN THIS PROCESS; PLEASE EMAIL OSC.ASSETS@CT.GOV WITH SUBJECT LINE "CO-59 CORE-CT TRAINING" IN THE SUBJECT LINE OR CLICK THE LINK ON THE RIGHT.

[Request
Core-CT
Training](#)

AGENCY NAME AND ADDRESS		AGENCY ACRONYM	FISCAL YEAR	INVENTORY DATE	
ASSET CLASSIFICATION	COST DATA OR FAIR MARKET VALUE				ART APPRAISALS
	2 LAST YEAR'S BALANCE	3 ADDITIONS	4 DELETIONS	5 CURRENT BALANCE	6 ADJUSTMENT DUE TO APPRAISAL
LAND (NO. OF ACRES) _____					
LEASED LAND (NO. OF ACRES) _____					
SITE IMPROVEMENTS					
BUILDINGS (TOTAL NO.) _____					
LEASED BUILDINGS (TOTAL NO.) _____					
LEASED PROPERTY (IMPROVEMENTS)					
CONSTRUCTION IN PROGRESS					
EASEMENTS					
TOTAL REAL PROPERTY					
EQUIPMENT					
LEASED EQUIPMENT (CAPITALIZED)					
SOFTWARE SUBSCRIPTIONS (CAPITALIZED SBITA)					
SOFTWARE PERPETUAL (CAPITALIZED)					
SOFTWARE PERPETUAL (NON-CAPITAL)					
OTHER INTANGIBLE ASSETS					
GAAP GROUP PERSONAL PROPERTY SUB-TOTAL					
FINE ART					
INVENTORY - MATERIALS AND GOODS IN PROCESS					
INVENTORY - STORES & SUPPLIES					
OTHER PROPERTY					
TOTAL PERSONAL PROPERTY					
GRAND TOTAL FOR REAL AND PERSONAL PROPERTY					

BY SIGNING BELOW YOU ATTEST THAT THE INFORMATION REPORTED ON THIS CO-59 IS RECONCILED TO YOUR AGENCY'S APPROVED SYSTEM OF RECORD FOR ASSET MANAGEMENT. ATTACH ADDITIONAL EXPLANATION AND/OR SUPPORTING DOCUMENTATION FOR ANY INCONSISTENCIES BETWEEN COLUMN 2 ABOVE AND LAST YEAR'S COLUMN 5. AUTHORIZED SIGNATURE BELOW SHOULD BE THE AGENCY HEAD OR THEIR DESIGNATED EMPLOYEE. THE PREPARED BY SIGNATURE MUST BE DIFFERENT FROM THE AUTHORIZED SIGNOR.

PREPARED BY NAME AND TITLE:		EMAIL:	
PREPARED BY SIGNATURE:		PHONE:	DATE:
AUTHORIZED NAME AND TITLE:		EMAIL:	
AUTHORIZED SIGNATURE:		PHONE:	DATE: