COLUMBIA UNIVERSITY

IN THE CITY OF NEW YORK

Columbia College The Fu Foundation School of Engineering and applied Science Office of Financial Aid & Educational Financing <u>http://cc-seas.financialaid.columbia.edu/</u>

This is a FILLABLE form. PLEASE SUBMIT via E-Mail: athlete-estimate@columbia.edu

Class of 2030 Financial Aid Early Estimate: Noncustodial Parent(s)

For students planning to enroll at Columbia University in the Fall semester of 2026

Student's Last Name:		First Name:					
			First Year				
	Name of Family Member to contact if a	Transfer					
	Family Member Contact Phone						
		Sport:					
	ction A-Noncustodial Parents' Household In						
1.	Married/Remarried/Domestic Partneed	Never Married, Living Together ent of donor-conceived child	l on this form?				
		p, provide SPOUSE/PARTNER's information for all quest	ions.				
2.		Employer:					
3.	Parent II Information:						
	a. 🗅 Parent 🔍 Stepparent 🗅 Legal Guardian 🗅 Other:						
	b. Name:						
	c. Occupation:						
	d. Preferred telephone:	Email Address:					
4. 5.	Include any children/step-children you final How many will be undergraduate college st	household? Always include the applicant & parent(s). ncially support, even if they do not reside with you. tudents enrolled at least ½ time for 2026-27 ¹ ?					
6.	Include any children/step-children enrolled in co What is your address and state of legal resi	idence?					
1							
		nt applicant will begin enrollment at Columbia University. E	-				
	(including the APPLICANT) who will be enroll	ed in college for 2026-2027 (the APPLICANT's 1 st year a	t Columbia). Do no				

include parents in # of college students. If a PARENT will be enrolled as a student in 2026-2027 please explain in SPECIAL

Section B-Noncustodial Parents' Expension	nses				
7. Child support your parents paid be	cause of divorce or	20)24	Esti 2025	
separation or as a result of a legal	requirement				
8. Repayment of parents' educationa	l loans (monthly	20)24	Esti 2025	
amount x 12). Explain loan type/p	urpose in Section H.				
9. Medical and dental expenses not c	overed by insurance	20)24	Esti 2025	
10. Total elementary, junior high and		2025-2026 St	tudent's	2026-2027 1 st Year	
high school tuition paid for		Senior Year o	of High School	@ Columbia	
dependent children. For	Amount paid?				
2026-2027 only include pre-	For how many				
college tuition expenses for the applicant's SIBLING(s), not the	dependent children?				
applicant.					
Section C- Parents' Assets: Please list	all PARENT/STEP-PARENT	Assets here: al	l accounts, all j	properties, all businesses.	
Please only list an asset value once. In					
documents: all K-1s, all Partnership(s),					
11. Cash, savings and checking accoun			-		
12. Total value of parents' assets held		nt and/or the s	tudent's		
siblings (who are under age 19 and					
13. Monthly home mortgage or rental		-			
14. Do the parent(s) own the home res		0	,	Yes No	
a. What is the current market val		What i	s owed on it?		
b. Year Purchased?			Purchase Price		
15. Do the parent(s) own real estate o	ther than the home reside		□ Yes □ No		
				Real Estate #4	
a. What is the current market val	201				
b. What is owed on it?					
c. Year Purchased:					
d. Other Real Estate Purchase Pri	ce:				
*If more than 4 properties (other than ho	me), please Question #28 answ	ers for each on a s	eparate sheet.		
16. Investments (not including 401K or	· 403B retirement account	s)			
a. What is the current market val	ue?	What is owed o	on them?		
17. Business/Farm: Does the student's	17. Business/Farm: Does the student's family own all or part of a business/farm?				
No, none of the student's family members are self-employed or own any portion of a business/farm.				usiness/farm.	
Yes, the family is self-employed,	/owns business and will pr	ovide the appr	opriate tax doc	umentation (Schedule C,	
Schedule E, Schedule F, 1065 Partnership Return, 1120 Corporation Return and/or 1120-S S-Corporation Return)					
Name of Business/Farm	% Owne	rship*	Type of Busin	ess Taxes	
Current market value (family's % o		Debt (family's S			
		(ranny 5			
Name of Business/Farm	% Owne	 rshin*	Type of Busin	ess Taxes	
Current market value (family's % o		Debt (family's S			
* If the total % ownership of a busine		5%, please submit	complete and full	business/farm tax documents:	
all pages, all schedules, all atta	cnments and all K-1s.				

*If more than 2 businesses/farms, please provide Question #30 answers for each on a separate sheet.

<u>Section D-Noncustodial Parents' Income</u>: Itemize all sources of actual/estimated parent income (taxed and untaxed). Please include estimates for both years, listing both positive income and/or (loss). Attach documents (recent paystubs; job loss documentation) supporting your estimates. Line #s below refer to the US Tax Return standard 1040 tax form.

18. Do the parent(s) file federal U	S Income Tax Returns?	🖬 Yes 🖾 No		
If no, skip questions which do	not apply, but please be sure to list a	all sources of annual i	ncome so that we understand	
your household's financial circ	cumstances.	2024 Actual	2025 Estimated	
19. Parent 1's Wages W-2 Box 1: I	Name =	\$	\$	
20. Parent 2's Wages W-2 Box 1: I	Name =	\$	\$	
21. Interest Income:		\$	\$	
22. Dividend Income:		\$	\$	
23. Tax Refunds:		\$	\$	
24. Alimony Received:		\$	\$	
25. Schedule C Business Income o	r (loss):			
If there is more than one Schedule C entity,	Sch C Business Income(s)	\$	\$	
please include a breakdown of expected income and expected loss to explain the net amount of the combined Schedule C #s.	Sch C Business Loss(es)	\$	\$	
26. Schedule D Capital Gain or (lo	ncc).	\$	¢	
27. Other gains or (loss):	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$ \$	\$ \$	
28. IRA/Pension Disbursements/B	enefits:	\$	\$	
29. Schedule E/F Business/Farm Ir		Y	Ý	
If there is more than one Schedule E/F entity,	Sch E/F Business Income(s)	\$	\$	
please include a breakdown of expected income and expected loss to explain the net	Sch E/F Business Loss(es)	\$	\$	
amount of the combined Schedule E/F #s. For	Sch F Farm Income(s)	\$	\$	
example, please list income and losses separately for rental income, for each S-Corp, Partnership, and/or Trust.	Sch F Farm Loss(es)	\$	\$	
30. Unemployment compensation	ו:	\$	\$	
31. Social Security benefits:		\$	\$	
32. Other Income:		\$	\$	
33. Adjustments to Income:		\$	\$	
34. Adjusted Gross Income:		\$	\$	
35. Standard/Itemized Deduction	s:	\$	\$	
36. U.S. income tax paid:		\$	\$	
UNTAXED INCOME		2024 Actual	2025 Estimated	
37. Pre-Tax Retirement Contribut	ions ²	\$	\$	
38. Pre-Tax Flexible Spending Acc	ounts: ³	\$	\$	
39. Child Support Received (all ch	ildren in household)	\$	\$	
40. Untaxed Pension/Disability/S	ocial Security Benefits	\$	\$	
41. Temporary Assistance for Nee	edy Families (TANF)	\$	\$	
42. Housing/living allowances: m		\$	\$	
43. Other Income (e.g. loans/gifts		\$	\$	

² W-2 Box 12 (Codes D, E, F, G, H, S) and/or Deductible IRA and/or SEP, SIMPLE, or Keogh payments

³ Please include all Pre-Tax Café Plans, HSA/FSA and Flexible Healthcare Spending Plans

<u>Section E-Family Member Listing</u>: Give information for all family members entered in the household; estimate enrollment information and educational expenses for the 2025-26 academic year and the 2026-27 academic year to the best of your ability. Include Parents in Household Chart, as well as all other family members or household members who live with you and/or are financially supported by your family. If more than 5 people, please use extra space below.

44. Household Chart

		Family Member 1	Family Member 2	Family Member 3	Family Member 4	Family Member 5
	Relationship	Student Applicant				
	Current Age					
	Full Name					
f High	Name of School/College					
Year o	Year in School	12 th Grade				
Student's Senior Year of High School: 2025-26	Enrollment/Type	Full-Time/Pre- College				
nťs I: 20	Cost of Attendance					
loor	Scholarships/Grants					
Sti	Parent Contribution					
026-27	Name of School/College	Columbia University				
COLUMBIA: 2026-27	Year in School	1 st Year Undergraduate				
	Enrollment/Type	Full-Time/4 yr. Private				
Year @	Cost of Attendance					
Ye	Scholarships/Grants					
1 st	Parent Contribution					

Additional Information/Explanation about Household Members (please provide Question #44 answers for each):

45. Does your family provide financial support to any relatives not in the household? • Yes • No (If yes, please explain, including names of the relatives, relationship to student, amount of financial support, yearly/monthly?)

Section F- Student's Financial Information & Expected Resources

 46. Tuition benefits from the Noncustodial Parents' employer?
 \$ ______

 47. Amount the Noncustodial Parent(s) estimate they will be able to pay for the
 \$ ______

student's 2026-2027 college expenses?

\$____

<u>Section G-Explanations/Special Circumstances</u>: Use this space to explain any unusual one-time or recurring expenses such as high medical or dental costs not covered by insurance, educational debts and other debts, child care, elder care or other unusual expenses. Also, use this space to explain any special circumstances related to current or future income, such as job loss, anticipated increases/decreases in income, one-time sources of income, or any other recurring or non-recurring special circumstances. Please provide specific amounts and timelines in order to help us better understand your situation. If more space is needed, use sheets of paper and attach them to this form.

Attachments: Please indicate which additional forms and tax documents you are submitting.

Noncustodial Parent/Step-Parent's 2024 U.S. Income	Include all pages, all schedules, all attachments:		
Tax Returns and W-2s	Schedules A, B, C, D, E, F, etc. Also include		
	copies of your parent's 2024 W-2 and/or 1099		
2024 Business Tax Return(s): 1120 Corporation,	Forms are required for families who own any portion of a		
1120S S-Corporation or 1065 Partnership	business or partnership. If the family's ownership \ge 5%,		
	complete business tax returns are required: please		
	include all pages, all schedules and all attachments.		
Letter of Special Circumstances			

Certification: All the information on this form is true and complete to the best of my knowledge. If asked, I agree to give proof of the information that I have given on this form. I realize that this proof may include a copy of my U.S., state or local income tax returns. I certify that all information is correct at this time, and that I will send timely notice to the college of any significant change in family income or assets, financial situation, college plans of other children, or the receipt of other scholarships or grants.

SIGNATURE of PARENT I	 DATE
SIGNATURE of PARENT II	 DATE

Please save a copy of the completed form for your records as it will assist you when completing the official paperwork later on. In order to receive an actual financial aid package, you will need to meet all financial aid application requirements and deadlines as outlined in the Columbia University Application for Admission and our Columbia Office of Financial Aid website: http://cc-seas.financialaid.columbia.edu/apply.

Final eligibility for the 2026-2027 year will be based on a review of the 2024 W2s/tax returns, FAFSA & CSS Profile. Need-based financial aid is re-evaluated each year.