

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Sam Polan for Congress

ADDRESS (number and street)

PO Box 60067

Check if different
than previously
reported. (ACC)

Chicago

IL

60660

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00916767

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

IL

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2026

through

M M / D D / Y Y Y Y
06 / 30 / 2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer

Perrone, Victoria, , ,

Signature of Treasurer

Perrone, Victoria, , ,

Date

M M / D D / Y Y Y Y
07 / 15 / 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Sam Polan for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	0.00	102291.57
(b) Total Contribution Refunds (from Line 20(d))	12000.00	12000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 12000.00	90291.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7512.90	362770.86
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7512.90	362770.86
8. Cash on Hand at Close of Reporting Period (from Line 27)	2658.38	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	275000.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Sam Polan for Congress

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
06 / 30 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

0.00

86896.07

(ii) Unitemized

0.00

8395.50

(iii) TOTAL of contributions
from individuals ▶

0.00

95291.57

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

5000.00

(d) The Candidate

0.00

2000.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

0.00

102291.57

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

0.00

275000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

275000.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

137.67

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

0.00

377429.24

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

7512.90

362770.86

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate.....

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

12000.00

12000.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

12000.00

12000.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

19512.90

374770.86

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

22171.28

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

0.00

25. SUBTOTAL (add Line 23 and Line 24).....

22171.28

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

19512.90

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

2658.38

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Sam Polan for Congress

Full Name (Last, First, Middle Initial)

A. Meta Platforms, Inc.

Mailing Address 1 Meta Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Subscription

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

12.71

Transaction ID : B-624

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 275 Seventh Avenue

City
New YorkState
NYZip Code
10001Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

45.00

Transaction ID : B-618

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Spruce Street ComplianceMailing Address 1220 L St NW, Ste 100
Box 384City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Compliance Consulting, Postage, and Subscription

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3841.32

Transaction ID : B-620

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3899.03

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Sam Polan for Congress

Full Name (Last, First, Middle Initial)

A. Meta Platforms, Inc.

Mailing Address 1 Meta Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Subscription

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

12.71

Transaction ID : B-625

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Integrated Solutions: PoliticalMailing Address 4142 Adams Avenue
Suite 103-550City
San DiegoState
CAZip Code
92116Purpose of Disbursement
Database Software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : B-615

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Meta Platforms, Inc.

Mailing Address 1 Meta Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Digital Advertising

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

141.72

Transaction ID : B-623

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1054.43

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Sam Polan for Congress

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 Seventh Avenue

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	6

City
New YorkState
NYZip Code
10001

FEC Identification Number

C

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

14.00

Transaction ID : B-617

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Meta Platforms, Inc.

Mailing Address 1 Meta Way

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	6

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Digital Advertising

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

376.00

Transaction ID : B-621

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 275 Seventh Avenue

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	6

City
New YorkState
NYZip Code
10001

FEC Identification Number

C

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

62.75

Transaction ID : B-616

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

452.75

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Sam Polan for Congress

Full Name (Last, First, Middle Initial)

A. Meta Platforms, Inc.

Mailing Address 1 Meta Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Subscription

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

12.71

Transaction ID : B-622

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Integrated Solutions: PoliticalMailing Address 4142 Adams Avenue
Suite 103-550City
San DiegoState
CAZip Code
92116Purpose of Disbursement
Database Software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : B-613

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Integrated Solutions: PoliticalMailing Address 4142 Adams Avenue
Suite 103-550City
San DiegoState
CAZip Code
92116Purpose of Disbursement
Database Software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : B-614

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1812.71

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

Sam Polan for Congress

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 Seventh Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2026

City
New YorkState
NYZip Code
10001

FEC Identification Number

C

Purpose of Disbursement
Bank Fees

001

Candidate Name

Amount of Each Disbursement this Period

14.00

Transaction ID : B-619

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Human Capital Management, LLCMailing Address 5005 West Laurel St
Suite 212

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2026

City
TampaState
FLZip Code
33607

FEC Identification Number

C

Purpose of Disbursement
Payroll Fees

001

Candidate Name

Amount of Each Disbursement this Period

279.98

Transaction ID : B-626

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

293.98

TOTAL This Period (last page this line number only).....▶

7512.90

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

PAGE 10 OF 12

☐ 17	☐ 18	☐ 19a	☐ 19b
☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Sam Polan for Congress

Full Name (Last, First, Middle Initial)

A. Polan, Kim, , ,

Mailing Address 1004 Michigan Ave

City
WilmetteState
ILZip Code
60091Purpose of Disbursement
Contribution Refund

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : B-630

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Soskin, Laura, E., ,

Mailing Address 631 Linden Ave

City
WilmetteState
ILZip Code
60091Purpose of Disbursement
Contribution Refund

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B-633

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Baker, Tanya, , Col.,

Mailing Address 3308 Soaring Circle

City
WoodbridgeState
VAZip Code
22193Purpose of Disbursement
Contribution Refund

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : B-628

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8500.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Sam Polan for Congress

Full Name (Last, First, Middle Initial)

A. Polan, Greg, , ,

Mailing Address 1004 Michigan Ave

City
WilmetteState
ILZip Code
60091Purpose of Disbursement
Contribution Refund

010

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : B-629

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3500.00

TOTAL This Period (last page this line number only).....▶

12000.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 12 OF 12

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-154

Sam Polan for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Polan, Sam, , ,

Mailing Address

PO Box 60067

City

Chicago

State

IL

ZIP Code

60660

☒ Personal Funds of the Candidate

Original Amount of Loan

275000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

275000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 30 / 2025

M M / D D / Y Y Y Y

12/31/2026

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

275000.00

TOTALS This Period (last page in this line only).....▶

275000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.