

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation Muslim Civic Coalition-Activate			3. FEC Identification Number C C90023359
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 200 W MADISON ST			
(c) City, State and ZIP Code CHICAGO IL 60606			
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on

M M	/	D D	/	Y Y Y Y
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5. COVERING PERIOD:

FROM	M M	/	D D	/	Y Y Y Y
	03		30		2026
THROUGH	M M	/	D D	/	Y Y Y Y
	03		30		2026

6. TOTAL CONTRIBUTIONS.....

.00

7. TOTAL INDEPENDENT EXPENDITURES

2400.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Ali, Lena, , ,

Ali, Lena, , ,

03/30/2026

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

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Muslim Civic Coalition-Activate

Full Name (Last, First, Middle Initial) of Payee Riba, Nora, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 30 / 2026	
Mailing Address 8960 Enclave Dr.		Amount 400.00	
City Burr Ridge	State IL	Zip Code 60527	Transaction ID : F57.000001
Purpose of Expenditure Stipend for Campaign Catalyst Intern	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 09
Name of Federal Candidate Supported or Opposed by Expenditure: Amiwala, Bushra, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2026.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Riba, Nora, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 30 / 2026	
Mailing Address 8960 Enclave Dr.		Amount 400.00	
City Burr Ridge	State IL	Zip Code 60527	Transaction ID : F57.000002
Purpose of Expenditure Stipend for Campaign Catalyst Intern	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: Ahmed, Junaid, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2026.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Kamran, Alishba, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 30 / 2026	
Mailing Address 252 Monson Ct.		Amount 400.00	
City Schaumburg	State IL	Zip Code 60173	Transaction ID : F57.000003
Purpose of Expenditure Stipend for Campaign Catalyst Intern	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 09
Name of Federal Candidate Supported or Opposed by Expenditure: Amiwala, Bushra, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2026.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1200.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Muslim Civic Coalition-Activate

Full Name (Last, First, Middle Initial) of Payee Kamran, Alishba, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 30 / 2026	
Mailing Address 252 Monson Ct.		Amount 400.00	
City Schaumburg	State IL	Zip Code 60173	
Purpose of Expenditure Stipend for Campaign Catalyst Intern		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ahmed, Junaid, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2026.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Siddiqui, Sarah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 30 / 2026	
Mailing Address 302 Pebble Beach Ln		Amount 400.00	
City Bartlett	State IL	Zip Code 60103	
Purpose of Expenditure Stipend for Campaign Catalyst Intern		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Amiwala, Bushra, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Siddiqui, Sarah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 30 / 2026	
Mailing Address 302 Pebble Beach Ln		Amount 400.00	
City Bartlett	State IL	Zip Code 60103	
Purpose of Expenditure Stipend for Campaign Catalyst Intern		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ahmed, Junaid, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2026.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1200.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	2400.00