

Form **990-EZ**
 Department of the Treasury
 Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ **Do not enter social security numbers on this form as it may be made public.**
 ▶ **Information about Form 990-EZ and its instructions is at www.irs.gov/form990ez.**

OMB No 1545-1150

2017

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 01-01-2017, and ending 12-31-2017

- B** Check if applicable
- Address change
 - Name change
 - Initial return
 - Final return/terminated
 - Amended return
 - Application pending

C Name of organization
 MISSOURI HEAD START ASSOCIATION

Number and street (or P O box, if mail is not delivered to street address) Room/suite
 PO BOX 817

City or town, state or province, country, and ZIP or foreign postal code
 JEFFERSON CITY, MO 65102

D Employer identification number
 43-1935220

E Telephone number
 (573) 884-5078

F Group Exemption Number ▶

G Accounting Method Cash Accrual Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ WWW.MOHEADSTART.ORG

J Tax-exempt status (check only one) - 501(c)(3) 501(c)() (insert no) 4947(a)(1) or 527

K Form of organization Corporation Trust Association Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ 75,876

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	11,450
	2	Program service revenue including government fees and contracts	2	39,952
	3	Membership dues and assessments	3	24,474
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c	Less direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶	9	75,876	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	52,348
	13	Professional fees and other payments to independent contractors	13	1,015
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	142
	16	Other expenses (describe in Schedule O)	16	20,714
17	Total expenses. Add lines 10 through 16 ▶	17	74,219	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	1,657
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	47,775
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20	21	49,432

Part II Balance Sheets (see the instructions for Part II)
 Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	47,775	22 49,432
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets	47,775	25 49,432
26 Total liabilities (describe in Schedule O).		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	47,775	27 49,432

Part III Statement of Program Service Accomplishments (see the instructions for Part III)
 Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? THE PRIMARY EXEMPT PURPOSE OF THE MISSOURI HEAD START ASSOCIATION IS TO COALESCE, INSPIRE, AND SUPPORT THE HEAD START FIELD AS A LEADER IN EARLY CHILDHOOD DEVELOPMENT AND EDUCATION	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations, optional for others)
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title	
28 See Additional Data Table	
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a
29 See Additional Data Table	
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a
30 See Additional Data Table	
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a
31 Other program services (describe in Schedule O)	
(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a
32 Total program service expenses (add lines 28a through 31a)	32 61,991

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)
 Check if the organization used Schedule O to respond to any question in this Part IV.

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
CLAUDIA RYAN	1 00	0		
BOARD MEMBER				
LOLETTA COMBS	1 00	0		
BOARD MEMBER				
LINDA BLEYTHING	1 00	0		
TREASURER				
LINDA BILBRUCK	1 00	0		
SECRETARY				
JONNA BURNS	1 00	0		
VICE PRESIDE				
PAM LAFRENZ	1 00	0		
BOARD MEMBER				
TERRI FOSSETT	1 00	0		
PRESIDENT				
CINDY GABBERT	1 00	0		
BOARD MEMBER				
KRISTINA BERNSKOETTER	40 00	52,348		
EXECUTIVE DI				
NANCY DAVIDSON	1 00	0		
BOARD MEMBER				

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

Table with columns for question number, question text, and Yes/No response columns. Rows include questions 33 through 45b regarding organizational activities, financials, and compliance.

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 46 No

Part VI Section 501(c)(3) organizations only
All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51. Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 47 No
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 48 No
49a Did the organization make any transfers to an exempt non-charitable related organization? 49a No
b If "Yes," was the related organization a section 527 organization? 49b

Table with 5 columns: (a) Name and title of each employee, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation. Row 1: NONE

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

Table with 3 columns: (a) Name and business address of each independent contractor, (b) Type of service, (c) Compensation. Row 1: NONE

d Total number of other independent contractors each receiving over \$100,000.

52 Did the organization complete Schedule A? NOTE. All Section 501(c)(3) organizations must attach a completed Schedule A [X] Yes [] No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here ***** Signature of officer KRISTINA BERNSKOETTER EXECUTIVE DIRECTOR Date 2018-11-05

Paid Preparer Use Only Print/Type preparer's name CAROL A ANGERER CPA Preparer's signature Date 2018-11-12 Check [X] if self-employed PTIN P01200440 Firm's name ABBOTT & ANGERER CPA'S LLC Firm's EIN 27-4445748 Firm's address 1121 SOUTHWEST BLVD JEFFERSON CITY, MO 651092571 Phone no (573) 636-4212

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [] No

Additional Data

Software ID:

Software Version:

EIN: 43-1935220

Name: MISSOURI HEAD START ASSOCIATION

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)	
<p>28</p> <p>LEADERSHIP & TRAINING- MHSA DESIGNS AND/OR PROVIDES EFFECTIVE LEADERSHIP & TRAINING BY- 1 MHSA COUNCIL MEETINGS AND INSTRUCTION PROVIDING PARENT AND STAFF LEADERSHIP INSTRUCTIONS IN JEFFERSON CITY, MO IN FEBRUARY, MAY, SEPTEMBER, AND DECEMBER 2017 THROUGH THE MHSA COUNCIL MEETINGS THESE TRAININGS ALLOW INTERACTION FOR HEAD START MANAGEMENT, STAFF, COMMUNITY PARTNERS AND PARENTS IN RECEIVING RESOURCES AND SUPPORTING INSTRUCTION ON VARIOUS TOPICS AS OUTLINED THROUGH A STATE-LEVEL NEEDS ASSESSMENT, INSIGHT FROM LOCAL PROGRAMS AND GENERAL EARLY CHILDHOOD AND HEAD START BEST PRACTICES MHSA COUNCIL MEMBERS ARE ELECTED TO SERVE ON THE STATE COUNCIL THROUGH LOCAL PARENT COMMITTEE AND POLICY COUNCILS AND ARE INCLUDED, BUT WERE NOT LIMITED TO, INFORMATION ON TRAUMA-INFORMED CARE, PROMOTING HEALTHY CLASSROOMS AND IMPORTANT STEPS TOWARD MANAGING STRESS THROUGH SELF-CARE TO BETTER SERVE THE NEEDS OF HEAD START CHILDREN AND FAMILIES MHSA ALSO PROVIDES CONTINUOUS FAMILY LEADERSHIP TRAINING THROUGH REGULAR LEGISLATIVE UPDATES AND THE SHARING OF EDUCATION-ADVOCACY STRATEGIES TO INFORM PARENTS ON HOW TO EFFECTIVELY ADVOCATE FOR THEIR CHILD IN THEIR COMMUNITY AND IN SPEAKING WITH OTHERS ABOUT THEIR NEEDS APPROXIMATELY 100 PEOPLE PARTICIPATED IN 2017 2 PRACTICE BASED COACHING INSTITUTE/TEACHERS LEARNING & COLLABORATING IN RESPONSE TO THE TRENDS OF HEAD START PROGRAMS MOVING MORE TOWARD COACHING AS A FORMAT FOR SUPPORTING PROFESSIONAL DEVELOPMENT NEEDS OF CLASSROOM TEACHERS, MHSA HOSTED TRAINING IN PARTNERSHIP WITH THE HEAD START TRAINING/TECHNICAL ASSISTANCE TEAM TO HELP PROGRAM MANAGERS TO BETTER UNDERSTAND THIS APPROACH MHSA PROVIDES THE ADMINISTRATIVE AND GENERAL SUPPORT NEEDED FOR THIS TRAINING OFFERED TO HEAD START, EARLY HEAD START AND CHILD-CARE PARTNERSHIPS ACROSS MISSOURI APPROXIMATELY 25 PARTICIPANTS RECEIVED THIS INSTRUCTION IN 2017 3 HEAD START TRAUMA LEARNING-INTENSIVE INSTRUCTION IN RESPONSE TO PROGRAMS NEEDS AND IN PARTNERSHIP WITH KEY STATE DEPARTMENT EXPERTS, MHSA BEGAN A LEARNING INTENSIVE FOCUSED ON BUILDING THE CAPACITY OF PROGRAMS TO BETTER SERVE THE NEEDS OF CHILDREN RELATED TO TRAUMA-SENSITIVE-PRACTICED THIS LEARNING BEGAN IN MAY OF 2017 AND INCLUDED IN-PERSON AND WEB-BASED INSTRUCTION WORKING WITH HEAD START PROGRAMS TO BETTER UNDERSTAND THE IMPACT OF TRAUMA ON A CHILD'S DEVELOPING BRAIN AND HOW TO SUPPORT CHILDREN WHO HAVE EXPERIENCED TRAUMA EARLY IN LIFE APPROXIMATELY 35 PARTICIPANTS ATTENDED THE IN-PERSON INSTRUCTION IN 2017 4 COMMUNITY OF PRACTICE BUILDING UPON PAST YEAR'S WORK, MHSA CONTINUED TO WORK TO HOST PROFESSIONAL DEVELOPMENT EVENTS WITH PARTNERS THAT PROMOTED SMALL GROUP SHARING OF BEST PRACTICES, NETWORKING AND APPLICATION OF NEW CONCEPTS IN WORKING TO FULFULL HEAD START PROGRAM PERFORMANCE STANDARDS THESE EVENTS ARE USUALLY HELD IN COLUMBIA, MO AND ARE HOSTED IN PARTNERSHIP WITH OTHER STATE AND REGIONAL LEVEL PARTNERS AND EXPERTS IN PARTICIPANTS COMING FROM LOCAL HEAD START PROGRAMS THAT ARE AT A MID-MANAGEMENT LEVEL IN THEIR PROGRAM APPROXIMATELY 140 PARTICIPANTS MET TOGETHER THROUGHOUT 2017</p> <p>(Grants \$)</p> <p style="text-align: right;">If this amount includes foreign grants, check here . . . <input type="checkbox"/></p>	28a	49,593

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)**

29
 MHSA WORKS TO ESTABLISH COLLABORATIVE PARTNERSHIPS WITH OTHER SIMILAR ORGANIZATIONS AND GROUPS BY- -PARTNERING WITH THE OTHER STATE-LEVEL PARTNERS, MHSA WORKS TO IDENTIFY AREAS OF NEED AND OPPORTUNITIES FOR COLLABORATION FOR HEAD START PROGRAMS IN SERVING THE NEEDS OF PROGRAMS WORKING WITH FAMILIES TOWARD THEIR CHILDREN'S SCHOOL READINESS GOALS IN A COMMUNITY MODEL THIS EVENT, WHICH SERVED AS A CONTINUATION OF THE "HEAD START-A CRITICAL LINK IN THE EARLY EDUCATION SYSTEM" ANNUAL EVENT, BROUGHT TOGETHER HEAD START PROGRAMS WITHIN COMMUNITY ACTION AGENCIES AND THOSE LOCATED OUTSIDE OF THAT MODEL TO SHARE ON THE RESOURCES AVAILABLE IN EVERY COMMUNITY REGARDLESS OF PLACEMENT IN ADDITION TO THE OPPORTUNITY TO LEARN ABOUT RESOURCES IN THEIR COMMUNITIES, MUCH OF THE DISCUSSION FOCUSED ON INSTRUCTION FROM REGIONAL OFFICE ABOUT IMPLEMENTING THE NEW HEAD START PROGRAM PERFORMANCE STANDARDS AND PROVIDED UPDATES FROM THE OFFICE OF CHILD CARE AND THE OFFICE OF HEAD START'S REGION VII STAFF ABOUT 40 PARTICIPANTS WERE IN ATTENDANCE FOR THIS DISCUSSION HELD IN FEBRUARY OF 2017 LEADERSHIP ON STATE BOARDS AND ADVISORY COUNCILS- - MHSA REPRESENTS THE HEAD START COMMUNITY AND THE ASSOCIATION AS A WHOLE ON SEVERAL BOARDS AND COUNCILS INCLUDING THE REGION VII HEAD START ASSOCIATION BOARD OF DIRECTORS, MO HEAD START-STATE COLLABORATION OFFICE ADVISORY COUNCIL, AND THE MISSOURI COMMUNITY ACTION NETWORK THE NEEDS OF THE CHILDREN ARE GREATLY DIVERSE DEPENDING ON THE LOCATION AND RESOURCES AT HAND FOR EACH PROGRAM AND MHSA WORKS TO SERVE AS A VOICE FOR THESE PROGRAMS AT THE STATE AND REGIONAL LEVELS THESE COLLABORATIVE PARTNERSHIPS ARE A PARTICULARLY IMPORTANT OPPORTUNITY TO ALLOW LOCAL PROGRAMS' NEEDS TO BE HEARD ON A LARGER PLATFORM AND TO EFFECTIVELY POOL RESOURCES WITH OTHER STATES TO BETTER SERVE CHILDREN IN MISSOURI AND REGION VII - MHSA WORKS TO ENCOURAGE ONGOING PARTNERSHIPS WITH THE MISSOURI HEAD START-STATE COLLABORATION OFFICE, REGION VII ADMINISTRATION FOR CHILDREN AND FAMILIES, AND REGION VII TRAINING/TECHNICAL ASSISTANCE TEAM MHSA OFTEN SERVES AS A CONVENER FOR MEETINGS BETWEEN THESE GROUPS OF COLLABORATORS TO FURTHER EXPAND OUR KNOWLEDGE-BASE OF THE SCOPE OF WORK AND ROLE OF EACH AGENCY AND IN SERVING HEAD START CHILDREN AND COMMUNITIES MHSA OFTEN SERVES AS AN ADMINISTRATIVE LEAD FOR PROJECTS, MEETINGS OR SPECIAL DISCUSSIONS THAT ARE HELD TOGETHER

29a 6,199

(Grants \$) If this amount includes foreign grants, check here . . . ►

Form 990EZ, Part III - Statement of Program Service Accomplishments

<p>Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.</p>	<p>Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)</p>	
<p>30 INCREASING PUBLIC AWARENESS- -MHSA REGULARLY SHARES EMAIL ALERTS AND INFORMATION WITH PROGRAMS WHICH CONTAIN INFORMATION ON UPCOMING EVENTS, LEGISLATION, PROGRAM HIGHLIGHTS AND STATEWIDE INITIATIVES -MHSA PROVIDES INFORMATION TO PROGRAMS AND MEMBERS THROUGH THE ANNUAL MEETING ON INFORMATION RELATED TO MO HEAD START PROGRAMS AND OPPORTUNITIES OFFERED THIS INFORMATION IS ALSO SHARED WITH ATTENDEES OF THE ANNUAL FAMILY LEADERSHIP CONFERENCE AND THROUGH MHSA COUNCIL MEETINGS -MHSA HOSTS A WEBSITE WHICH PROVIDES INFORMATION ABOUT THE HEAD START PROGRAM, HOW TO CONTACT PROGRAMS, AND THE BENEFITS OF THE HEAD START PROGRAM AND OTHER MISSOURI-SPECIFIC DETAILS RELATED TO HEAD START</p> <p>(Grants \$)</p> <p style="text-align: right;">If this amount includes foreign grants, check here . . . <input type="checkbox"/></p>	<p>30a</p>	<p style="text-align: right;">6,199</p>

SCHEDULE A
(Form 990 or
990EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
MISSOURI HEAD START ASSOCIATION

Employer identification number

43-1935220

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 11 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f Enter the number of supported organizations _____

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	21,400	101,054	33,981	16,450	11,450	184,335
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	21,400	101,054	33,981	16,450	11,450	184,335
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						184,335

Section B. Total Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	21,400	101,054	33,981	16,450	11,450	184,335
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	74,124	22,700	30,132	18,366	24,474	169,796
11	Total support. Add lines 7 through 10						354,131
12	Gross receipts from related activities, etc. (see instructions)					12	39,952

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	52.050 %
15	Public support percentage for 2016 Schedule A, Part II, line 14	15	49.520 %

16a 33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►		(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
	10a		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
PART II, LINE 10	PROGRAM SERVICE REVENUE 145,012 MEMBER DUES 310

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
MISSOURI HEAD START ASSOCIATION

Employer identification number

43-1935220

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 16	EXPENSES SUPPLIES 730 MISCELLANEOUS/ADMIN EXPENSES 671 WEB HOSTING FEES 600 TRAVEL 833 CONFERENCES & MEETINGS HELD 2,409 TRAINING EVENT EXPENSE 7,909 INSURANCE 525 REGION VII DUES 6,787 GRANT EXPENSE 250 TOTAL 20,714

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART III	THE PRIMARY EXEMPT PURPOSE OF THE MISSOURI HEAD START ASSOCIATION IS TO COALESCE, INSPIRE, AND SUPPORT THE HEAD START FIELD AS A LEADER IN EARLY CHILDHOOD DEVELOPMENT AND EDUCATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART III, LINE 28	<p>LEADERSHIP & TRAINING- MHSA DESIGNS AND/OR PROVIDES EFFECTIVE LEADERSHIP & TRAINING BY- 1 MHSA COUNCIL MEETINGS AND INSTRUCTION PROVIDING PARENT AND STAFF LEADERSHIP INSTRUCTIONS IN JEFFERSON CITY, MO IN FEBRUARY, MAY, SEPTEMBER, AND DECEMBER 2017 THROUGH THE MHSA COUNCIL MEETINGS THESE TRAININGS ALLOW INTERACTION FOR HEAD START MANAGEMENT, STAFF, COMMUNITY PARTNERS AND PARENTS IN RECEIVING RESOURCES AND SUPPORTING INSTRUCTION ON VARIOUS TOPICS AS OUTLINED THROUGH A STATE-LEVEL NEEDS ASSESSMENT, INSIGHT FROM LOCAL PROGRAMS AND GENERAL EARLY CHILDHOOD AND HEAD START BEST PRACTICES MHSA COUNCIL MEMBERS ARE ELECTED TO SERVE ON THE STATE COUNCIL THROUGH LOCAL PARENT COMMITTEE AND POLICY COUNCILS AND ARE INCLUDED, BUT WERE NOT LIMITED TO, INFORMATION ON TRAUMA-INFORMED CARE, PROMOTING HEALTHY CLASSROOMS AND IMPORTANT STEPS TOWARD MANAGING STRESS THROUGH SELF-CARE TO BETTER SERVE THE NEEDS OF HEAD START CHILDREN AND FAMILIES MHSA ALSO PROVIDES CONTINUOUS FAMILY LEADERSHIP TRAINING THROUGH REGULAR LEGISLATIVE UPDATES AND THE SHARING OF EDUCATION-ADVOCACY STRATEGIES TO INFORM PARENTS ON HOW TO EFFECTIVELY ADVOCATE FOR THEIR CHILD IN THEIR COMMUNITY AND IN SPEAKING WITH OTHERS ABOUT THEIR NEEDS APPROXIMATELY 100 PEOPLE PARTICIPATED IN 2017 2 PRACTICE BASED COACHING INSTITUTE/TEACHERS LEARNING & COLLABORATING IN RESPONSE TO THE TRENDS OF HEAD START PROGRAMS MOVING MORE TOWARD COACHING AS A FORMAT FOR SUPPORTING PROFESSIONAL DEVELOPMENT NEEDS OF CLASSROOM TEACHERS, MHSA HOSTED TRAINING IN PARTNERSHIP WITH THE HEAD START TRAINING/TECHNICAL ASSISTANCE TEAM TO HELP PROGRAM MANAGERS TO BETTER UNDERSTAND THIS APPROACH MHSA PROVIDES THE ADMINISTRATIVE AND GENERAL SUPPORT NEEDED FOR THIS TRAINING OFFERED TO HEAD START, EARLY HEAD START AND CHILD-CARE PARTNERSHIPS ACROSS MISSOURI APPROXIMATELY 25 PARTICIPANTS RECEIVED THIS INSTRUCTION IN 2017 3 HEAD START TRAUMA LEARNING-INTENSIVE INSTRUCTION IN RESPONSE TO PROGRAMS NEEDS AND IN PARTNERSHIP WITH KEY STATE DEPARTMENT EXPERTS, MHSA BEGAN A LEARNING INTENSIVE FOCUSED ON BUILDING THE CAPACITY OF PROGRAMS TO BETTER SERVE THE NEEDS OF CHILDREN RELATED TO TRAUMA-SENSITIVE-PRACTICE THIS LEARNING BEGAN IN MAY OF 2017 AND INCLUDED IN-PERSON AND WEB-BASED INSTRUCTION WORKING WITH HEAD START PROGRAMS TO BETTER UNDERSTAND THE IMPACT OF TRAUMA ON A CHILD'S DEVELOPING BRAIN AND HOW TO SUPPORT CHILDREN WHO HAVE EXPERIENCED TRAUMA EARLY IN LIFE APPROXIMATELY 35 PARTICIPANTS ATTENDED THE IN-PERSON INSTRUCTION IN 2017 4 COMMUNITY OF PRACTICE BUILDING UPON PAST YEAR'S WORK, MHSA CONTINUED TO WORK TO HOST PROFESSIONAL DEVELOPMENT EVENTS WITH PARTNERS THAT PROMOTED SMALL GROUP SHARING OF BEST PRACTICES, NETWORKING AND APPLICATION OF NEW CONCEPTS IN WORKING TO FULFILL HEAD START PROGRAM PERFORMANCE STANDARDS THESE EVENTS ARE USUALLY HELD IN COLUMBIA, MO AND ARE HOSTED IN PARTNERSHIP WITH OTHER STATE AND REGIONAL LEVEL PARTNERS AND EXPERTS IN PARTICIPANTS COMING FROM LOCAL HEAD START PROGRAMS THAT ARE AT A MID-MANAGEMENT</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART III, LINE 28	ENT LEVEL IN THEIR PROGRAM APPROXIMATELY 140 PARTICIPANTS MET TOGETHER THROUGHOUT 2017

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART III, LINE 29	<p>MHSA WORKS TO ESTABLISH COLLABORATIVE PARTNERSHIPS WITH OTHER SIMILAR ORGANIZATIONS AND GROUPS BY- -PARTNERING WITH THE OTHER STATE-LEVEL PARTNERS, MHSA WORKS TO IDENTIFY AREAS OF NEED AND OPPORTUNITIES FOR COLLABORATION FOR HEAD START PROGRAMS IN SERVING THE NEEDS OF PROGRAMS WORKING WITH FAMILIES TOWARD THEIR CHILDREN'S SCHOOL READINESS GOALS IN A COMMUNITY MODEL THIS EVENT, WHICH SERVED AS A CONTINUATION OF THE "HEAD START-A CRITICAL LINK IN THE EARLY EDUCATION SYSTEM" ANNUAL EVENT, BROUGHT TOGETHER HEAD START PROGRAMS WITHIN COMMUNITY ACTION AGENCIES AND THOSE LOCATED OUTSIDE OF THAT MODEL TO SHARE ON THE RESOURCES AVAILABLE IN EVERY COMMUNITY REGARDLESS OF PLACEMENT IN ADDITION TO THE OPPORTUNITY TO LEARN ABOUT RESOURCES IN THEIR COMMUNITIES, MUCH OF THE DISCUSSION FOCUSED ON INSTRUCTION FROM REGIONAL OFFICE ABOUT IMPLEMENTING THE NEW HEAD START PROGRAM PERFORMANCE STANDARDS AND PROVIDED UPDATES FROM THE OFFICE OF CHILD CARE AND THE OFFICE OF HEAD START'S REGION VII STAFF ABOUT 40 PARTICIPANTS WERE IN ATTENDANCE FOR THIS DISCUSSION HELD IN FEBRUARY OF 2017 LEADERSHIP ON STATE BOARDS AND ADVISORY COUNCILS- - MHSA REPRESENTS THE HEAD START COMMUNITY AND THE ASSOCIATION AS A WHOLE ON SEVERAL BOARDS AND COUNCILS INCLUDING THE REGION VII HEAD START ASSOCIATION BOARD OF DIRECTORS, MO HEAD START-STATE COLLABORATION OFFICE ADVISORY COUNCIL, AND THE MISSOURI COMMUNITY ACTION NETWORK THE NEEDS OF THE CHILDREN ARE GREATLY DIVERSE DEPENDING ON THE LOCATION AND RESOURCES AT HAND FOR EACH PROGRAM AND MHSA WORKS TO SERVE AS A VOICE FOR THESE PROGRAMS AT THE STATE AND REGIONAL LEVELS THESE COLLABORATIVE PARTNERSHIPS ARE A PARTICULARLY IMPORTANT OPPORTUNITY TO ALLOW LOCAL PROGRAMS' NEEDS TO BE HEARD ON A LARGER PLATFORM AND TO EFFECTIVELY POOL RESOURCES WITH OTHER STATES TO BETTER SERVE CHILDREN IN MISSOURI AND REGION VII - MHSA WORKS TO ENCOURAGE ONGOING PARTNERSHIPS WITH THE MISSOURI HEAD START-STATE COLLABORATION OFFICE, REGION VII ADMINISTRATION FOR CHILDREN AND FAMILIES, AND REGION VII TRAINING/TECHNICAL ASSISTANCE TEAM MHSA OFTEN SERVES AS A CONVENER FOR MEETINGS BETWEEN THESE GROUPS OF COLLABORATORS TO FURTHER EXPAND OUR KNOWLEDGE-BASE OF THE SCOPE OF WORK AND ROLE OF EACH AGENCY AND IN SERVING HEAD START CHILDREN AND COMMUNITIES MHSA OFTEN SERVES AS AN ADMINISTRATIVE LEAD FOR PROJECTS, MEETINGS OR SPECIAL DISCUSSIONS THAT ARE HELD TOGETHER</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART III, LINE 30	INCREASING PUBLIC AWARENESS- -MHSA REGULARLY SHARES EMAIL ALERTS AND INFORMATION WITH PROGRAMS WHICH CONTAIN INFORMATION ON UPCOMING EVENTS, LEGISLATION, PROGRAM HIGHLIGHTS AND STATEWIDE INITIATIVES -MHSA PROVIDES INFORMATION TO PROGRAMS AND MEMBERS THROUGH THE ANNUAL MEETING ON INFORMATION RELATED TO MO HEAD START PROGRAMS AND OPPORTUNITIES OFFERED THIS INFORMATION IS ALSO SHARED WITH ATTENDEES OF THE ANNUAL FAMILY LEADERSHIP CONFERENCE AND THROUGH MHSA COUNCIL MEETINGS -MHSA HOSTS A WEBSITE WHICH PROVIDES INFORMATION ABOUT THE HEAD START PROGRAM, HOW TO CONTACT PROGRAMS, AND THE BENEFITS OF THE HEAD START PROGRAM AND OTHER MISSOURI-SPECIFIC DETAILS RELATED TO HEAD START