



HEALING THE HERO USA

2026–2029 Public Strategic & Transparency Plan

Transparency Shouldn't Have to Be Requested

We don't want you to have to ask for transparency. We want it out front.

When someone entrusts Healing the Hero with a donation, referral, partnership—or the wellbeing of someone they love—we accept a responsibility.

We intend to be responsible stewards of everything donors entrust to us.

Our mission can sometimes involve matters of life and death.

We take that responsibility seriously.

That means showing you more than stories.

We want you to see our leadership.

Our finances.

Our outcomes.

Our research.

Our partnerships.

Our conflicts.

Our progress.

And when we fall short, we intend to show you that too.

OUR MISSION

Our Mission is to Heal, Restore, and Transform our Heroes so they can live again!

OUR VISION

A World Where Every HERO is Healed. Every Family is Restored. Every Life is Lived with Purpose.

In our formal outcome reporting, we use measurable recovery terminology so you can see the data behind our mission.

WHO WE SERVE

Healing the Hero provides eligible Performance Recovery services at no charge to:

- Active-duty military
- Veterans
- Law enforcement
- Firefighters
- First responders
- Corrections officers
- 911 dispatchers
- Gold Star families
- Immediate families of qualifying heroes
- Families of fallen first responders
- Suicide-loss survivors from these communities

We serve heroes across the United States and, where operationally possible, abroad where U.S. military personnel are serving or working.

Participants are not charged.

No insurance billing.

No copay.

No required donation.

WHAT RECOVERY LOOKED LIKE IN 2025

Healing the Hero served:

525

People served in 2025

All 525 received services at no charge.

All 525 completed baseline and follow-up outcome measurement using:

PCL-5

GAD-7

PHQ-9

The 14–30-day aggregate results reported by HTH were:

Measure	Before	14–30 Days
PCL-5	56.2	1.8
GAD-7	14.0	0.9
PHQ-9	12.0	1.1

Average Performance Recovery sessions:

3.1

Average Performance Recovery sessions

We don't want you simply to accept the word "recovered."

We want you to see what we measured.

DID THE RESULTS HOLD?

We also have approximately 100 longer-term data points at 180+ days.

Reported averages at that point were:

PCL-5: 2.4

GAD-7: 1.5

PHQ-9: 1.9

Going forward, our standard follow-up schedule will be:

30 Days → 90 Days → 180 Days

Our objective is 100% outcome measurement, even as the number of heroes we serve increases.

SUICIDE-RISK TRANSPARENCY

Among the 525 people served in 2025:

106

endorsed PHQ-9 Item 9 at baseline

At the 14–30-day follow-up:

0

reported Item 9 ideation

HTH is aware of:

0

known suicide deaths among this cohort during the available follow-up period

These findings matter to us.

But transparency also means telling you what they do not mean.

We do not claim that HTH “prevented 106 suicides.”

PHQ-9 Item 9 is an important risk indicator, but a positive response does not mean that every individual would otherwise have died by suicide.

Our responsibility is to report what we measured—not exaggerate what the data can prove.

NEW CRITICAL INCIDENTS

Approximately eight participants returned after experiencing new critical incidents.

HTH is not aware of participants from the 2025 cohort returning specifically because the originally addressed issue required additional work.

Because active military personnel and first responders can continue encountering traumatic events, we distinguish new exposure from recurrence of an issue previously addressed.

WHAT HAPPENS WHEN SOMEONE REACHES OUT?

The HTH pathway is designed to be straightforward:



Technology and AI will increasingly help us respond quickly, collect follow-up information, and route participants appropriately.

Human safety escalation remains essential.

SAFETY COMES BEFORE STATISTICS

HTH maintains mandatory-reporting and participant-safety procedures.

Our coaches receive training regarding escalation when safety concerns arise.

When circumstances indicate that emergency intervention may be necessary, appropriate emergency resources may be contacted.

AI will not be permitted to override participant-safety procedures.

HTH support is complementary and is not a substitute for emergency services or appropriate licensed clinical care when those services are needed.

WHO PROVIDES PERFORMANCE RECOVERY?

HTH has approximately:

24

Performance Recovery Coaches

with approximately:

10

currently active

Coaches come from communities that understand the people we serve, including qualifying veterans, law enforcement, firefighters, Gold Star family members, and spouses.

Eligibility alone does not authorize someone to work independently.

Coaches receive approximately 20 hours of initial training, followed by supervised/shadow casework and mandatory quarterly continuing training.

HTH also evaluates coach performance using participant outcomes, session requirements, and participant feedback.

OUR RESEARCH COMMITMENT

We believe extraordinary outcomes deserve extraordinary scrutiny.

That is why Healing the Hero is committed to research.

But we also believe different kinds of evidence should never be mixed together simply because doing so makes a stronger headline.

Our research transparency system therefore separates:

HTH program data
from
published peer-reviewed research
from
retrospective research
from
planned randomized research
from
future AI evidence.

PUBLISHED RESEARCH

A peer-reviewed pilot associated with Arizona State University evaluated TRP through 22Zero, Daniel Jarvis's prior nonprofit organization.

We identify that history openly.

We do not represent the study as an HTH study.

CURRENT RESEARCH

HTH has supported a current research dataset involving approximately:

82

brain-imaging participants

with measures including:

- PCL-5
- PHQ-9
- GAD-7
- Brain imaging
- HRV

The project involves an IRB-exempt retrospective analysis of de-identified participant information.

Dr. Ed Maguire serves as lead investigator.

Dr. David Hagedorn is providing initial objective data through Firefly Neuroscience in his technology-advisor role.

HTH requires informed consent from participants even though the retrospective analysis qualifies for IRB exemption.

WHAT THAT RESEARCH CAN—AND CANNOT—TELL US

Retrospective research can identify important patterns and associations.

It can combine subjective outcome measures with objective physiological information.

But retrospective analysis is not the same thing as a randomized controlled trial.

Without random assignment and an appropriate control condition, retrospective results alone cannot establish that every observed change was caused exclusively by TRP.

We tell you that because we believe transparency strengthens research.

It does not weaken it.

THE NEXT LEVEL OF RESEARCH

San Diego State University has a planned randomized controlled research project involving correctional officers associated with Cook County Jail.

The planned comparison includes:

- Human delivery
- AI delivery
- Control condition

Until that study produces results, we will not tell you what those results are going to be.

We will let the evidence speak.

AI AND THE FUTURE OF RECOVERY

AI may allow Performance Recovery to reach dramatically more people.

That opportunity also creates responsibility.

HTH intends to conduct an initial monitored beta involving approximately:

10

participants, with human oversight

Outcomes will be monitored using:

- PCL-5
- GAD-7
- PHQ-9
- Stress Tolerance Index

The Stress Tolerance Index is a proprietary TRUSA 100-point monitoring metric. Until sufficient validation exists, it will be identified as such and used alongside established measures rather than being presented as an independently validated clinical instrument.

AI will have to earn its evidence.

We will not simply transfer outcome claims from human delivery to AI delivery.

WHO OWNS TRP?

Transparency includes relationships that could create questions.

TRP and applicable related intellectual property are controlled through Tactical Resiliency USA/Daniel Jarvis.

TRP is described as patent pending, with Daniel Jarvis as the patent application holder, subject to confirmation of precise patent terminology before final website publication.

Healing the Hero does not own that intellectual property.

HTH receives license-fee-free use through an MOU while Daniel Jarvis remains involved, including continuity through applicable grant life cycles.

HTH does not pay TRUSA to provide HTH participant treatment.

HTH administers its Performance Recovery services.

TRUSA has also contributed resources supporting the mission and research.

HOW WE MANAGE THAT CONFLICT

Daniel Jarvis is currently Acting Executive Director of HTH and is also associated with TRUSA.

We believe the correct response to a potential conflict is not to hide it.

It is to disclose and manage it.

Related-party matters involving TRUSA are reviewed through HTH governance procedures.

Jarvis discloses the conflict and recuses himself from applicable Board deliberation and voting.

HTH intends to publish an annual related-party disclosure summary.

LEADERSHIP COMPENSATION

We believe you should know when organizational leaders or Board members receive compensation.

Current arrangements include:

Daniel Jarvis — Acting Executive Director

\$1,500/month stipend

Tammy Laird — Board Secretary, Case Manager and Performance Recovery Coach

\$1,500/month stipend

As HTH professionalizes, compensated employees should generally be separated from voting Board service.

If Tammy Laird transitions into a regular paid employee position, the strategic governance expectation is that she will transition off the Board.

OUR LEADERSHIP TRANSITION

HTH does not intend to remain permanently dependent upon its founder.

Within approximately 6–10 months, subject to sustainable funding, our objective is to recruit:

- 1 Professional Executive Director
- and
- 2 Full-Time Performance Recovery Coaches

When a professional Executive Director assumes operational leadership, Daniel Jarvis intends to transition to:

Board Chair

and discontinue routine HTH Performance Recovery Coaching.

The Executive Director will run the organization.

The Board will govern it.

OUR FINANCIAL STARTING POINT

Approximate 2025 planning figures are:

Revenue: \$56,000
Expenses: \$38,000
Debt: \$0

Final public figures will be reconciled directly to HTH's Form 990.

Known 2025 expense categories include approximately:

Coaching: \$8,500
Case Management: \$6,500

Other expense categories will be populated directly from the Form 990 rather than estimated.

HTH currently utilizes professional CPA support.

OUR FINANCIAL COMMITMENTS

HTH intends to:

- Maintain administrative costs at 20% or less when responsibly achievable.
- Build and maintain approximately six months of operating reserves.
- Maintain zero or responsibly managed debt.
- Publish annual revenue and expenses.
- Publish assets and liabilities.
- Publish cost per hero served.
- Publish material in-kind contributions.
- Publish leadership compensation.
- Publish related-party relationships.

- Publish our Form 990.

WHERE YOUR DOLLAR GOES

Every year, we intend to show donors where HTH resources went.

Our annual report will present Form 990-reconciled categories such as:

- Performance Recovery programs
- Coaching
- Case management
- Research and outcomes
- Direct mission travel
- Fundraising
- Administration

We will also publish:

Cost per hero served

and:

Administrative percentage

We believe donors deserve both numbers.

OUR NEXT FUNDING GOAL

\$250,000

Our next funding goal

Our primary development strategy is corporate sponsorship.

We will particularly seek relationships with:

- Veteran-owned businesses
- Patriotic and mission-aligned business owners
- American Legion networks
- VFW networks
- Companies committed to veterans, first responders, and their families

CORPORATE SPONSORSHIP LEVELS

Sponsorship	Commitment
Diamond	\$250,000
Platinum	\$100,000
Gold	\$75,000
Silver	\$25,000

Bronze

\$10,000

Qualifying sponsors may receive demonstrations, engagement opportunities, and appropriate recognition. Eligible members of sponsor organizations may access HTH services according to HTH mission eligibility. For qualifying sponsorships of \$100,000 or more, TRUSA intends to separately donate three months of AI access for the sponsor's entire team. That contribution comes from TRUSA, not from HTH charitable funds.

OUR BOARD HAS A RESPONSIBILITY TOO

We don't believe fundraising responsibility belongs only to the Executive Director. Board members will be encouraged to generate or influence approximately:

\$10,000

annually, through sponsorships, introductions, fundraising, advocacy, or other development activity

Board members will also be encouraged to make personally meaningful contributions according to their financial capacity. We do not believe wealth should be a prerequisite for service. We do believe participation should be.

OUR GROWTH PLAN

Our immediate capacity milestone is:

750

Heroes

Our longer-term trajectory is:

1,500

then:

3,000

then:

6,000 heroes annually.

But volume alone will never be our definition of success. At 6,000 people, we still intend to know whether what we are doing is working. That is why our goal remains:

OUR PARTNERS

HTH currently reports eight nonprofit referral relationships.

Partners include:

- Tunnels to Towers
- REBOOT Recovery
- TAPS
- Take a Vet Fishing
- Operation Healing Heroes Foundation
- [PARTNER NAME]
- [PARTNER NAME]
- [PARTNER NAME]

These relationships help eligible heroes reach HTH services.

GOVERNANCE

HTH maintains organizational governance infrastructure including:

- Articles of Incorporation
- IRS determination letter
- Board of Directors Manual
- Conflict of Interest Policy
- Whistleblower Policy
- Information retention/destruction policies
- Financial controls
- Participant grievance procedures
- Performance Recovery Coach SOP
- Mandatory-reporting procedures

Our Board meets:

Quarterly

As we grow, our objective is for the majority of our Board to remain:

Independent

and:

Uncompensated.

WHAT THE BOARD WILL REVIEW EVERY QUARTER

Our Board dashboard will track:

- Heroes served
- Outcome scores

- 30/90/180-day follow-up
- Average sessions
- Safety indicators
- Active coaches
- Fundraising
- Cash and reserves
- Cost per hero
- Administrative percentage
- Research milestones
- AI pilot performance
- Complaints and quality issues
- Strategic goals

Transparency begins inside the organization before it reaches the website.

WHAT WE WILL PUBLISH EVERY YEAR

HTH intends to publish an Annual Impact & Transparency Report showing:

- People served
- Populations served
- Outcome measurements
- Longitudinal outcomes
- Research progress
- Partnerships
- Revenue
- Expenses
- Assets
- Liabilities
- Debt
- Reserve position
- Cost per hero
- Administrative percentage
- In-kind support
- Leadership compensation
- Related-party disclosures
- Board governance
- Annual goals
- Results against those goals

WE WILL REPORT THE MISSES

Transparency does not mean:

“Here are all the things we did right.”

It means:

“Here is what actually happened.”

Each major annual goal will be classified:

MET
PARTIALLY MET
or
NOT MET

When we miss a target, we intend to tell you:

What happened.
Why.
What we learned.
What we changed.
Who is responsible for fixing it.

WHAT WE LEARNED & WHAT WE'RE IMPROVING

Every annual Impact & Transparency Report will include:

What We Learned & What We're Improving

We will identify processes, goals, or strategies that did not work as expected.

Then we will tell you what we are doing differently.

Because accountability isn't pretending you never make mistakes.

It's what you do after you discover one.

DONOR PRIVACY

Transparency does not require violating donor privacy.

Many of our donors do not want public recognition.

We respect that.

Individual donor names and gift amounts will remain private unless the donor affirmatively authorizes recognition.

We can still report aggregate giving and material in-kind contributions so the public understands the resources supporting the mission.

PUBLIC ACCOUNTABILITY LIBRARY

Our Transparency page is intended to become a permanent home for appropriate public documents, including:

- IRS determination letter
- Articles of Incorporation
- Form 990
- Annual Impact & Transparency Reports

- Strategic Plan
- Conflict of Interest Policy
- Whistleblower Policy
- Selected governance policies
- Research publications
- Research summaries

Participant records, confidential Board information, personnel information, safety-sensitive procedures, and proprietary intellectual property will remain protected.

OUR 2029 COMMITMENT

By the conclusion of this strategic period, our objective is to have:

- Raised the sustainable funding necessary to scale recovery.
- Built professional leadership independent of founder-dependent daily operations.
- Shifted our public program language toward Performance Recovery rather than defining heroes by diagnoses.
- Established responsibly monitored AI delivery capable of expanding access.
- Developed the research base necessary to advance TRP toward evidence-based-practice recognition.
- Created an organization capable of serving approximately 6,000 heroes annually while measuring outcomes for everyone we serve.

THE STANDARD WE INTEND TO LIVE BY

We are asking heroes to trust us.

We are asking families to trust us.

We are asking researchers to examine our work.

We are asking corporations and donors to entrust resources to us.

That trust creates an obligation.

So our standard is simple:

We don't want you to have to ask for transparency.

We want it out front.

We will show you the money.

We will show you the outcomes.

We will show you the research.

We will show you the limitations.

We will show you the conflicts.

We will show you the goals.

And we will show you when we miss them.

Because our mission can be a matter of life and death.

We take that responsibility seriously.

Healing the Hero USA

2026–2029 Public Strategic & Transparency Plan

Version 1.0

Subject to approval by the Healing the Hero Board of Directors

Board Approval Date: October 21, 2026