

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per response:	0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Capricorn Investment Group LLC</u> _____ (Last) (First) (Middle) 250 UNIVERSITY AVENUE _____ (Street) PALO ALTO CA 94301 _____ (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 05/15/2014	3. Issuer Name and Ticker or Trading Symbol <u>TrueCar, Inc. [TRUE]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) <input type="checkbox"/> Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	8,060	D	
Common Stock	7,972,328	I	By Pacific Sequoia Holdings LLC ⁽¹⁾⁽²⁾
Common Stock	850,449	I	By The Skoll Foundation ⁽¹⁾⁽²⁾
Common Stock	725,417	I	By The Skoll Fund ⁽¹⁾⁽²⁾
Common Stock	257,061	I	By Capricorn S.A. SICAV - SIF Global Non-Marketable Strategies Sub-Fund ⁽¹⁾⁽²⁾
Common Stock	207,825	I	By Capricorn AIP - Private Investment Fund I, L.P. ⁽¹⁾⁽²⁾
Common Stock	32,650	I	By HIT Splitter, L.P. ⁽¹⁾⁽²⁾
Common Stock	29,039	I	By Carthage, L.P. ⁽¹⁾⁽²⁾

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person* <u>Capricorn Investment Group LLC</u> _____ (Last) (First) (Middle) 250 UNIVERSITY AVENUE _____ (Street) PALO ALTO CA 94301 _____ (City) (State) (Zip)		
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1. Name and Address of Reporting Person*

[Pacific Sequoia Holdings LLC](#)

(Last) (First) (Middle)
250 UNIVERSITY AVENUE

(Street)
PALO ALTO CA 94301

(City) (State) (Zip)

1. Name and Address of Reporting Person*

[Skoll Foundation](#)

(Last) (First) (Middle)
250 UNIVERSITY AVENUE

(Street)
PALO ALTO CA 94301

(City) (State) (Zip)

1. Name and Address of Reporting Person*

[Skoll Fund](#)

(Last) (First) (Middle)
250 UNIVERSITY AVENUE

(Street)
PALO ALTO CA 94301

(City) (State) (Zip)

1. Name and Address of Reporting Person*

[Capricorn SA SICAV - SIF Global Non
Marketable Strategies Sub Fund](#)

(Last) (First) (Middle)
250 UNIVERSITY AVENUE

(Street)
PALO ALTO CA 94301

(City) (State) (Zip)

1. Name and Address of Reporting Person*

[Capricorn AIP-Private Investment Fund I, L.P.](#)

(Last) (First) (Middle)
250 UNIVERSITY AVENUE

(Street)
PALO ALTO CA 94301

(City) (State) (Zip)

1. Name and Address of Reporting Person*		
<u>HIT SPLITTLER LP</u>		
(Last)	(First)	(Middle)
250 UNIVERSITY AVENUE		
(Street)		
PALO ALTO	CA	94301
(City) (State) (Zip)		
1. Name and Address of Reporting Person*		
<u>CARTHAGE LP</u>		
(Last)	(First)	(Middle)
250 UNIVERSITY AVENUE		
(Street)		
PALO ALTO	CA	94301
(City) (State) (Zip)		

Explanation of Responses:

1. Capricom Investment Group LLC ("Capricom Group") may be deemed to have shared voting and investment control with respect to the shares held by the Capricom Group, The Skoll Foundation, The Skoll Fund, Capricom S.A. SICAV - SIF Global Non-Marketable Strategies Sub-Fund, Capricom AIP - Private Investment Fund I, L.P., HIT Splitter, L.P., Carthage, L.P. and Pacific Sequoia Holdings LLC (collectively, the "Capricom Entities"). Capricom Group serves as the investment manager for the Capricom Entities and may be deemed to have shared voting and investment control over the shares held by the Capricom Entities.
2. Capricom Group is the general partner of Capricom AIP - Private Investment Fund I, L.P. ("Capricom AIP"), HIT Splitter, L.P. ("HSLP") and Carthage, L.P. ("Carthage") and has sole voting and investment control over the shares held by Capricom AIP, HSLP and Carthage. Capricom Group disclaims beneficial ownership of these securities except to the extent of its pecuniary interest in the securities held by Capricom Group, and the inclusion of these securities in this report shall not be deemed an admission of beneficial ownership of the reported securities for purposes of Section 16 or for any other purpose.

/s/ Eric Techel, Partner and CFO of Capricom Investment Group, LLC 05/15/2014

/s/ Eric Techel, Manager of Pacific Sequoia Holdings LLC 05/15/2014

/s/ Eric Techel, Partner and CFO of Capricom Investment Group, LLC, the Investment Manager of The Skoll Foundation 05/15/2014

/s/ Eric Techel, Partner and CFO of Capricom Investment Group, LLC, the Investment Manager of The Skoll Fund 05/15/2014

/s/ Eric Techel, Partner and CFO of Capricom Investment Group, LLC, the Investment Manager of Capricom S.A. SICAV - SIF Global Non-Marketable Strategies Sub-Fund 05/15/2014

/s/ Eric Techel, Partner and CFO of Capricom Investment Group, LLC, the Investment Manager of Capricom AIP - Private Investment Fund I, L.P. 05/15/2014

/s/ Eric Techel, Partner and CFO of Capricom Investment Group, LLC, the General Partner of HIT Splitter, L.P. 05/15/2014

/s/ Eric Techel, Partner and CFO of Capricom Investment Group, LLC, the General Partner of Carthage L.P. 05/15/2014

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

**** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).**

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.