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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

# OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

Estimated average burden	0.5
hours per response:	0.5

1. Name and Addres <u>HANCE JAM</u>	s of Reporting Persor I <mark>ES H JR</mark>	*	2. Issuer Name <b>and</b> Ticker or Trading Symbol Carlyle Group L.P. [ CG ]		tionship of Reporting Perso all applicable) Director	n(s) to Issuer 10% Owner		
	(First) YLE GROUP L.P.		3. Date of Earliest Transaction (Month/Day/Year) 05/01/2015		Officer (give title below)	Other (specify below)		
1001 PENNSYL	VANIA AVENUE	NW	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) WASHINGTON	DC	20004		X	Form filed by One Report Form filed by More than C Person	0		
(City)	(State)	(Zip)						

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	urity (Instr. 3) 2. Transaction Date (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code ( 8)					Securities	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Units	05/01/2015		Α		3,243(1)	Α	\$0.00	6,311	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)		xpiration Date Amount of Month/Day/Year) Securities Underlying Derivative		ration Date Amount of Derivativ th/Day/Year) Securities Security Underlying (Instr. 5) Derivative Security (Instr. 3)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

#### Explanation of Responses:

1. These securities are deferred restricted common unit awards granted under The Carlyle Group L.P. 2012 Equity Incentive Plan. These securities will vest on May 1, 2016, subject to Mr. Hance's continued service to Carlyle Group Management L.L.C., the general partner of The Carlyle Group L.P., (or its affiliates) on such vesting date.

#### Remarks:

Pursuant to Rule 16a-1(a)(4) of the Securities Exchange Act of 1934, as amended, the Reporting Person herein states that this filing shall not be deemed to be an admission that the Reporting Person is the beneficial owner of any of these interests, and disclaims beneficial ownership of such interests, except to the extent of the Reporting Person's pecuniary interest in such interests.

Jeffrey W. Ferguson, by power	
<u>of attorney for James H.</u>	05/05/2015
<u>Hance, Jr.</u>	

\*\* 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 4 (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.