FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	DVAL						
l	OMB Number:	3235-0287						
l	Estimated average burden							
l	hours per response:	0.5						

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

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* FITT LAWTON W						2. Issuer Name and Ticker or Trading Symbol Carlyle Group L.P. [CG]										all app	plicable) ctor		Person(s) to Issuer 10% Owner	
(Last) (First) (Middle) C/O THE CARLYLE GROUP L.P.						3. Date of Earliest Transaction (Month/Day/Year) 05/01/2019										Office below	cer (give title w)		Other (specify below)	
1001 PENNSYLVANIA 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 Reporting Person Form filed by More than One Reporting Person					
(City)	(St	ate) (Zip)																	
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	efici	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ay/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			4 and Sec Ben Owi		curities F neficially (nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) or D)	Price		Transaction(s) (Instr. 3 and 4)				(
Common Units 05/01						1/2019					5,854 ⁽	(1) A \$		\$0.	.00 42,534		2,534		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)	/e Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		of Of Derive Secue (A) of Of (D) (Instr	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares				9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)). wnership orm: irect (D) i Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

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, 2020, subject to Ms. Fitt's continued service on the board of directors of Carlyle Group Management L.L.C., the general partner of The Carlyle Group L.P., 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 filling 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.

<u>Jeffrey W. Ferguson, by power</u> <u>of attorney for Lawton W. Fitt</u>

05/03/2019

** 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.