FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
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).

## 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

1. Name and Address of Reporting Person *  ROSKENS LISA Y					2. Issuer Name and Ticker or Trading Symbol  AMERICA FIRST TAX EXEMPT  INVESTORS LP [ ATAXZ ]										Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director					
(Last) (First) (Middle) 1004 FARNAM STREET SUITE 400					3. Date of Earliest Transaction (Month/Day/Year) 03/24/2008										X Officer (give title X Other (specify below)  President and CEO of GP of GP / Director of GP of GP					
(Street) OMAHA	NE		3102		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year) 6.									dividual or Joint/Group Filing (Check Applicable Lin K Form filed by One Reporting Person Form filed by More than One Reporting Person				,	
(City)	(State)	(Zi		n Dor	ivative		ouritio	.c. Λοα	uirod I	Dien	osad of	or	Ponofi	cially Ou	mod					
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Form:	nership Direct (D) rect (I) 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount (A) or (D) Prid		Price				(Instr. 4)			
Beneficial Unit Certificates <sup>(1)</sup>				03/24/2008					P		400		A	\$6.0675	60,000		I		By The Burlington Capital Group, LLC	
Beneficial Unit Certificates <sup>(1)</sup>					03/26/2008				P		1,000		A	\$6.06	61,000		I		By The Burlington Capital Group, LLC	
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	ise (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date I Expiration (Month/I	on Da	e Securi ear) Deriva		itle and A urities Ur vative Se tr. 3 and 4	curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e Overs Fo Direction or G (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(A) (D)			Expiration Date	or Nu		Amount or Number of Shares		(Instr. 4)	(5)			

## **Explanation of Responses:**

1. This transaction was effected pursuant to a Rule 10b5-1 trading plan adopted by The Burlington Capital Group, LLC, the general partner of the general partner of America First Tax Exempt Investors L.P. The reporting person has a beneficial ownership interest in, and is a director, President, and Chief Executive Officer of the Burlington Capital Group, LLC and is deemed to have a pecuniary interest in the Beneficial Unit Certificates due to her ownership interest in The Burlington Capital Group, LLC.

/s/ Lisa Yanney Roskens 03/26/2008

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.