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*  YANNEY GAIL WALLING |                   |  |   |   | 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 10% Owner |  |  |  |  |  |
|---|-------------------|--|---|---|---|---|--|---|---|---|--------------------|---|---------------|---|--|--|--|--|--|--|
| (Last)<br>1004 FARNAN   | (First)  4 STREET | ,  | iddle)  | 3. Date of Earliest Transaction (Month/Day/Year) 06/05/2008 |   |   |  |   |   |   |                    |   |               | Officer (g<br>below)                                | ive title  | X<br>of GP   | Other (s<br>below)                       | specify  |  |  |
| SUITE 400  Street)  OMAHA  NE  68102                          |                   |  |   |   | 4. If <i>F</i>  | 4. If Amendment, Date of Original Filed (Month/Day/Year)  6. In |  |   |   |   |                    |   |               |   |  | Individual or Joint/Group Filing (Check Applica  X Form filed by One Reporting Person  Form filed by More than One Reporting |  |  |  |  |
| (City)  | (State)           | (Zi  |   |   |   |   |  |   |   |   |                    |   |               |   |  |  |  |  |  |  |
|   |                   | Та   | ıble I - Noı                                    | n-Der   | ivativ  | e Se  | curitie  | s Acq                                   | uired, l  | Disp  | osed of,           | or  | Benefi        | cially Ow   | /ned   |  |  |  |  |  |
| 1. Title of Security (Instr. 3)                               |                   |  | 2. Transaction<br>Date<br>(Month/Day/Year)      |   | ear)  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year)     |  | 3.<br>Transaction<br>Code (Instr.<br>8) |   | 4. Securities Acquired (A) or<br>Disposed Of (D) (Instr. 3, 4 and |                    |   |               | 5. Amount<br>Securities<br>Beneficiall<br>Following | y Owned<br>Reported  | 6. Ownership<br>Form: Direct (D)<br>or Indirect (I)<br>(Instr. 4)  |  | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership                      |  |  |
|   |                   |  |   |   |   |   |  |   | Code V  |   |                    |   | (A) or<br>(D) | Price   | Transaction(s)<br>(Instr. 3 and 4)   |  |  |  | (Instr. 4)   |  |
| Beneficial Unit Certificates <sup>(1)</sup>                   |                   |  |   | 06/05/2008  |   | 8   |  |   | P   |   | 3,300              |   | A             | \$6.94  | 113,300  |  | I  |  | By The<br>Burlington<br>Capital<br>Group,<br>LLC                   |  |
| Beneficial Unit Certificates <sup>(1)</sup>                   |                   |  |   |   | 06/06/2008  |   |  |   | P   |   | 1,700              |   | A             | \$6.7465  | 115,000  |  | I  |  | By The<br>Burlington<br>Capital<br>Group,<br>LLC                   |  |
| Beneficial Unit Certificates                                  |                   |  |   |   |   |   |  |   |   |   |                    |   |               |   | 12,5   | 500  |  | D  |  |  |
|   |                   |  | Table II - I                                    |   |   |   |  |   |   |   | sed of, o          |   |               |   | ed   |  |  |  |  |  |
| 1. Title of<br>Derivative<br>Security (Instr. 3)              |                   | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Diff any<br>(Month/Day/ | ate,  | 4.<br>Transaction<br>Code (Instr.   |   | 5. Number of<br>Derivative<br>Securities<br>Acquired (A)<br>or Disposed of<br>(D) (Instr. 3, 4<br>and 5) |   | 6. Date Exerci<br>Expiration Da<br>(Month/Day/Y |   | sable and<br>te    | 7. Title and An<br>Securities Und<br>Derivative Sec<br>(Instr. 3 and 4) |               | mount of<br>nderlying<br>ecurity                    | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                                      | 9. Number derivative Securitie Beneficia Owned Following Reported Transact   | e Owners s Form Direct or Inc g (I) (In: | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
| Explanation of Po   |                   |  |   |   | Code  | v   | (A) (D)  |   | Date<br>Exercisable                             |   | Expiration<br>Date | or<br>Ni  |               | Amount<br>or<br>Number<br>of Shares                 |  | (Instr. 4)   |  |  |  |  |

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 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.

## Remarks:

/s/ Gail Walling Yanney

06/06/2008

\*\* 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.