SEC Form 4

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

OMB APPROVAL OMB Number 3235-0287 Estimated average burder 0.5 hours per response:

> By The Burlington

Capital Group, LLC

By Spouse

11. Nature of Indirect

Beneficial

Ownership

(Instr. 4)

T

I

10.

Ownership

Direct (D)

or Indirect

(I) (Instr. 4)

Form:

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>YANNEY MICHAEL B</u>				2. Issuer Name and Ticker or Trading Symbol <u>AMERICA FIRST TAX EXEMPT</u> <u>INVESTORS LP</u> [ATAXZ]							tionship of Reporting I all applicable) Director Officer (give title	10% C	10% Owner Other (specify	
(Last) (First) (Middle) 1004 FARNAM STREET				3. Date of Earliest Transaction (Month/Day/Year) 06/19/2008							Chairman of GP of GP / Director of GP of GP			
SUITE 400 (Street)			4. lf	Amen	ndment, Date of Or	iginal File	ed (Mo	onth/Day/Year)		6. Indiv X	idual or Joint/Group F Form filed by One Form filed by More	Reporting Person	,	
OMAHA	NE	68102												
(City)	(State)	(Zip)												
		Table I - No	n-Derivativ	ve Se	ecurities Acq	uired, I	Disp	osed of, or	Benefi	cially Ow	ned			
Date			2. Transaction Date (Month/Day/Y	/Year) Execution Date, 1 /Year) if any		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	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	(Instr. 3 and 4)		(1130.4)	
Beneficial Unit Ce	rtificates ⁽¹⁾		06/19/200	08		Р		2,600	A	\$6.5188	122,600	Ι	By The Burlington Capital Group, LLC	

р

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

6. Date Exercisable and

Expiration

Date

Expiration Date

(Month/Day/Year)

5. Number of

Acquired (A)

or Disposed of

(D) (Instr. 3, 4 and 5)

(D)

Derivative

Securities

Explanation of Responses:

Beneficial Unit Certificates(1)

Beneficial Unit Certificates

2. Conversion

or Exercise

Price of

Security

Derivative

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 his ownership interest in The Burlington Capital Group, LLC.

Date

Exercisable

Remarks:

1. Title of

Derivative

Security (Instr. 3)

/ <u>s/</u>	Mi	chael	l B Y	anney

2,400

** Signature of Reporting Person

06/23/2008 Date

125,000

12,500

8. Price of

Derivative

Security

(Instr 5)

9. Number of

derivative

Securities

Following

Reported Transaction(s)

(Instr. 4)

Owned

Beneficially

\$<u>6.6</u>

A

7. Title and Amount of

Securities Underlying

Amount

Number

of Shares

or

Derivative Security

(Instr 3 and 4)

Title

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).

3. Transaction

(Month/Day/Yea

Date

3A. Deemed

if any

Execution Date

(Month/Day/Year)

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

06/23/2008

Transaction

Code (Instr.

v (A)

8)

Code

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.