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 burden
hours per response: 0.5

LLC By The Burlington

Capital Group, LLC

11. Nature

of Indirect

Beneficial

Ownership

(Instr. 4)

T

D

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 <sup>*</sup> <u>YANNEY GAIL WALLING</u>				2. Issuer Name and Ticker or Trading Symbol <u>AMERICA FIRST TAX EXEMPT</u> <u>INVESTORS LP</u> [ ATAXZ ]							onship of Reporting P all applicable) Director Officer (give title	10% 0	Dwner	
(Last) 1004 FARNAM S	) (First) (Middle) FARNAM STREET			3. Date of Earliest Transaction (Month/Day/Year) 12/24/2008							Officer (give title X Other (specify below) Director of GP of GP			
SUITE 400				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person			
(Street) OMAHA	NE	68102									Form filed by More			
(City)	(State)	(Zip)												
		Table I - No	n-Deriv	ative S	ecurities Acq	uired,	Disp	osed of, or	Benefi	cially Ow	vned			
1. Title of Security (I	instr. 3)		2. Transa Date (Month/D		2A. Deemed Execution Date, if any (Month/Day/Year)	ate, Code (Instr.         Transaction Code (Instr.         Disposed Of (D) (Instr.         Gamma (D) (Instr.         Securities Beneficially Owned Following Reported         Form: Direct (D)         Indirect Beneficial (Instr.				Beneficial Ownership				
						Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Beneficial Unit Co	ertificates <sup>(1)</sup>		12/24/	/2008		Р		2,700	A	\$4.8957	277,700	Ι	By The Burlington Capital	

р

2,300

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of 5. Number of 6. Date Exercisable and 7. Title and Amount of 9. Number of 3. Transaction 3A. Deemed 8. Price of 10. 2. Conversion Date Transaction Derivative Derivative Execution Date Derivative Expiration Date Securities Underlying derivative Ownership Security (Instr. 3) or Exercise (Month/Day/Yea Code (Instr. Securities (Month/Day/Year) **Derivative Security** Securities Form: if any Security Price of (Month/Day/Year) 8) Acquired (A) (Instr 3 and 4) (Instr 5) Beneficially Direct (D) Derivative or Disposed of Owned or Indirect (D) (Instr. 3, 4 and 5) Security Following (I) (Instr. 4) Reported Transaction(s) Amount (Instr. 4) or Date Expiration Number v (A) (D) Title Code Exercisable Date of Shares

Explanation of Responses:

Beneficial Unit Certificates(1)

**Beneficial Unit Certificates** 

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	W.	Yanney

\*\* Signature of Reporting Person

\$4.8526

A

280,000

12,500

12/26/2008

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).

12/26/2008

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.