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

By The Burlington

Capital Group, LLC

11. Nature

of Indirect

Beneficial

Ownership

(Instr. 4)

T

D

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* YANNEY GAIL WALLING (Last) (First) (Middle)				2. Issuer Name and Ticker or Trading Symbol <u>AMERICA FIRST TAX EXEMPT</u> <u>INVESTORS LP</u> [ATAXZ] 3. Date of Earliest Transaction (Month/Day/Year)							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title below) X Other (specify below)			
1004 FARNAM STREET				02/04/2009							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		ing Person	
(City)	(State)	(Zip)												
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
Date				action 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 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)		(1150.4)	
Beneficial Unit Ce	rtificates ⁽¹⁾		02/04/	/2009		Р		2,900	A	\$6.9577	307,900	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

2,100

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 her ownership interest in The Burlington Capital Group, LLC.

Date

Exercisable

Remarks:

1. Title of

Derivative

Security (Instr. 3)

/s/	Gail	W.	Yanney

** Signature of Reporting Person

\$6.5619

Α

7. Title and Amount of

Securities Underlying

Amount

Number

of Shares

or

Derivative Security

(Instr 3 and 4)

Title

310,000

12,500

8. Price of

Derivative

Security

(Instr 5)

02/06/2009 Date

9. Number of

derivative

Securities

Following

Reported Transaction(s)

(Instr. 4)

Owned

Beneficially

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).

02/05/2009

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.