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 MICHAEL B					2. Issuer Name and Ticker or Trading Symbol  AMERICA FIRST TAX EXEMPT  INVESTORS LP [ ATAXZ ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) 1004 FARNAN SUITE 400	(First)  1 STREET	(M	liddle)	3. Date of Earliest Transaction (Month/Day/Year) 02/13/2008										X Cha	Officer (gi below) hirman of (		X P / Dii	below)		
(Street)	NE	68		4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Lin X Form filed by One Reporting Person Form filed by More than One Reporting Person Person Form filed by More than One Reporting Person Person Form filed by More than One Reporting Person P					,	
(City)	(State)	(Zi	ip)																	
		Та	able I - Noi	n-Deri	vative	Sec	urities	Acq	uired, l	Disp	osed of,	or	Benefi	cial	ly Ow	ned				
or occurry (mean o)				2. Transaction Date (Month/Day/Year)		Ex if a	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				nd 5) Securitie Beneficia Following		Owned Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Beneficial Unit Certificates <sup>(1)</sup>				02/1	02/13/2008						3,100	)	A	\$7.1		33,100		I		By The Burlington Capital Group, LLC
Beneficial Unit Certificates																12,5	00		I	By Spouse
Beneficial Unit Certificates <sup>(1)</sup> 02/1						14/2008			P		1,900		A	\$6.	9505	35,000		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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	4. Transaction Code (Instr.		n	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Exerci	sable and	7. Title and Am Securities Undo Derivative Secu (Instr. 3 and 4)		moun	ing	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported	e Ownersh s Form: Direct (D or Indire g (I) (Instr.	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V		(A) (	D)	Date Exercisa		Expiration Date	Title	•	Amo or Num of Si			Transaction(s (Instr. 4)		*)	

## **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 and Chairman 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/ Michael B. Yanney

02/14/2008

\*\* 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.