FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

I	OMB APPROVAL										
l	OMB Number:	3235-0287									
l	Estimated average burden										
l	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 Addr		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							
(Last) 1004 FARNAM	t) (First) (Middle) 4 FARNAM STREET				3. Date of Earliest Transaction (Month/Day/Year) 09/15/2008										Officer (give title X Other (specially) Director of GP of GP				specify
SUITE 400 (Street)		4. If A	men	dment, Da	ate of Ori	ginal File	ed (Mo	onth/Day/Ye	- 1	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person									
OMAHA (City)																			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Securit	2. Transaction Date (Month/Day/Year)		ar)	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 a				Securities Beneficiall Following	Beneficially Owned Following Reported		nership Direct (D) irect (I) 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount		(A) or (D)	Price	Transactio (Instr. 3 an				(Instr. 4)		
Beneficial Unit	09/15/2008		3			P		800		A	\$6.2	185,000		I		By The Burlington Capital Group, LLC			
Beneficial Unit	09/17/2008				P		2,300)	A \$6		187,300		I		By The Burlington Capital Group, LLC				
Beneficial Unit	Certificates												12,5	500		D			
	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 2. (Month/Day/Year) 3. Transaction Date Execution Date (Month/Day/Year) 6. (Month/Day/Year) 6. (Month/Day/Year)			4. Transaction Code (Instr.		on	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Exercison Dat	sable and	7. Title and Ame Securities Unde Derivative Secu (Instr. 3 and 4)		mount of derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code		v	(A)	(D)	Date Exercisa		Expiration Date Tit		•	Amount or Number of Shares		(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 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

 $\underline{09/17/2008}$

** Signature of Reporting Person

Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** 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.