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 | | | | | <u>AM</u> | 2. Issuer Name and Ticker or Trading Symbol AMERICA FIRST MULTIFAMILY INVESTORS, L.P. [ATAX] | | | | | | | | | k all applicab Director | | | 10% Ov | wner |
|--|-------------------|------------------|-------------------|-------|---|--|--|-------|--|--------|--|-------|--------------------|---|--|---|--|--|---|
| (Last) 1004 FARNAN | (First) 1 STREET | (Mi | ddle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/10/2019 | | | | | | | | | below) | Officer (give title below) | | Other (speci below) | |
| SUITE 400 | 00 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | |
| (Street) OMAHA | NE | 68 | 102 | | | | | | | | | | | | Form filed by More than One Reporting | | | g Person | |
| (City) | (State) | (Zi _l | 0) | | | | | | | | | | | | | | | | |
| | | Та | ble I - No | n-Der | ivative | e Se | ecuritie | s Acq | uired, | Disp | osed of, | or | Benefi | cially O | wned | | | | |
| Date | | | | Date | nsaction n/Day/Ye | 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 ar | | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | v | Amount | (A) or (D) Prid | | Price | (111501.4) | | | | | |
| Beneficial Unit | Certificates | s | | 09/1 | 10/2019 | 9 | | | F | | 20,362 | 2 | D | \$7.55 | 76,4 | 76,492 D | | | |
| Beneficial Unit Certificates | | | | | | | | | | | | | | 464,992 | | | I | By Burlington Capital LLC ⁽¹⁾ | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| Derivative Conversion Security (Instr. 3) Conversion or Exercise (Month/Day/Year) | | | Execution Date, T | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exerci Expiration Da (Month/Day/Yo | | te Securities Unde | | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securitie Beneficial Owned Following Reported | ive ties cially l ing ed | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | • | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | | |

Explanation of Responses:

1. Mr. Yanney has a beneficial ownership interest in, and is a Manager and Chairman Emeritus of Burlington Capital LLC and is deemed to have a pecuniary interest in the Beneficial Unit Certificates due to his ownership interest in Burlington Capital LLC.

Remarks:

/s/ Michael B. Yanney

09/12/2019

** Signature of Reporting Person

Date

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

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.

^{*} 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).