FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
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## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Pogozinski Vonneth			Date of Event Retement (Month/ 10/2019		3. Issuer Name and Ticker or Trading Symbol  AMERICA FIRST MULTIFAMILY INVESTORS, L.P. [ ATAX ]						
(Last)	(First)	(Middle)	-			ionship of Reporting Person(s all applicable) Director	) to Issuer 10% Owner		If Amendment, Date of Original Filed (Month/Day/Year)      Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person		
1004 FARNAN SUITE 400	I STREET				Y Officer (give title		Other (specibelow)	fy App			
(Street) OMAHA (City)	NE (State)	68102 (Zip)							Form filed by Person	y More than One Reporting	
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				. Amoun	t of Securities Ily Owned (Instr. 4)	3. Ownership		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable at Expiration Date (Month/Day/Year)			ate	Derivative Security (Instr. 4) Con		Conversion or Exercise	5. Ownership Form: Direct (D) or				
		Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Price of Derivative Security	Indirect (I) (Instr. 5)			

Explanation of Responses:

Remarks:

No securities are beneficially owned.

No securities are beneficially owned.

/s/ Kenneth Rogozinski

09/19/2019

\*\* Signature of Reporting Person

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).