FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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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* REAVES JOHN (Last) (First) (Middle) 1185 LINDA VISTA DRIVE						2. Issuer Name and Ticker or Trading Symbol NATURAL ALTERNATIVES INTERNATIONAL INC [NAII] 3. Date of Earliest Transaction (Month/Day/Year) 12/08/2006										all app Direct Offict below	blicable) ctor er (give title w) Chief Finar	ncial	10% Owner Other (specify below)	
(Street) SAN MA (City)	RCOS C	A 9	4. 11 A1	4. If Amendment, Date of Original Filed (Month/Day/Year)										ndividual or Joint/Group Filing (Check Applicable a) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
1. Title of Security (Instr. 3) 2. Tran						Deemed cution Date, ny nth/Day/Year)		Transaction Dispos Code (Instr. and 5)		4. Secur Dispose	of, or Benefi rities Acquired ed Of (D) (Instr.			(A) or 5. A 3, 4 Sec Ber Ow		Amount of curities eneficially when blowing		wnership n: Direct or rect (I) tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock				12/08/2	12/08/2006					v	Amount	(D)		Price	Tran: (Inst		oorted nsaction(s) str. 3 and 4)		D	
1. Title of Derivative Security (Instr. 3)	Table II Title of 2. 3. Transaction Date Execut or Exercise (Month/Day/Year)		3A. Dee Execution	Derivat (e.g., pu	ative Securiouts, calls, 4. Transaction Code (Instr.		5. Number of			sed of, onvertib	or Beneficial of Securities 7. Title and Amount of Securities Underlying Derivative Security (Instra 3 and 4)			8. Price of Derivative Security (Instr. 5)		9. Number of derivative		0. Ownership Form: Direct (D) or Indirect I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

/s/ John Reaves

12/12/2006

** 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.

 $^{^{\}star}$ 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).