

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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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

(Print or Type Re	sponses)				-					
1. Name and Address of Reporting Person <sup>*</sup> ALESSI VICTOR E			2. Date of Event Requiring Statement (Month/Day/Year) 08/21/2006		3. Issuer Name and Ticker or Trading Symbol NOVASTAR RESOURCES LTD. [NVAS. OB]					
(Last) 4612 DEMBY	(First) Y DRIVE	(Middle)	08/21/2000		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) FAIRAX, VA 22032				_X_Director Officer (give below)		ck all applicable) title10% Owner Other (specify below)		6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person		
FAIRAA, VA	1 22032							Form filed by Mor	re than One Reporting Person	
(City)	(State)	(Zip)		Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Reminder: Repor	Perso	ine for each class o ons who respond s the form displa	I to the collection	on of informatio	on contained in	this form are n	ot requi	red to respond	SEC 1473 (7-02	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	Table II - Derivative Securities Beneficiary Owned (e.g., puts, cans, warrants, options, convertible securities)								
	(Instr. 4)			Securities Underlying Derivative Security		or Exercise Price of Derivative	1	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Date Exercisable	Expiration Date		Amount or Number of Shares	In	Direct (D) or Indirect (I) (Instr. 5)		
	Stock Option	Û	08/21/2016	Common Stock, 0.001 par value	500,000	\$ 0.5	D		

## **Reporting Owners**

Beneuting Owner Name /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
ALESSI VICTOR E 4612 DEMBY DRIVE FAIRAX, VA 22032	Х					

## Signatures

/s/ Victor E. Alessi	08/24/2006	
Signature of Reporting Person	Date	

# **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

The option vests with respect 1/36 of the total shares on September 21, 2006 and thereafter in equal monthly installments until all shares underlying the option have vested. (1) The option immediately and automatically vests in full upon a Change of Control, the termination of the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person of the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Reporting Person's employment by the Company without Cause, or the cessation by the Company without Cause, or the cessation by the Company without Cause, or the cessation by the Company without Cause and the cessation by the Company without Cause and the cessation by the ces

<sup>1</sup> the cessation by the Reporting Person of the Reporting Person's employment at the Company for Good Reason (all as defined in the employment agreement, filed as Exhibit 10.1 to the current report of the Company on Form 8-K on August 25, 2006).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.