# FORM 4

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

OMB APPRO	VAL					
OMB Number:	3235-0287					
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nours 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 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 Ty	pe Response	es)																
1. Name and Address of Reporting Person *OCONNELL HOWARD V				2. Issuer Name and Ticker or Trading Symbol TECHNE CORP /MN/ [TECH]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner							
1649 QU	*	(First) (Middle) 3. Date of Earliest Transaction DD DRIVE 10/23/2008					ction (Mor	th/E					Other (specify below)					
		(Street)		4. If Ame	ndm	nent, Da	ate Or	riginal File	d(Mo	onth/Day/Year)				or Joint/Gro		neck Applica	ble Line)	)
		S, MN 55113												More than One		on		
(Cit	y)	(State)	(Zip)			Ta	ble I	- Non-De	riva	ive Securitie	s Acqu	ired,	Disposed	l of, or Ben	eficially Ov	vned		
(Instr. 3) Date			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr	. 8)		or Disposed str. 3, 4 and 5	of (D)	f (D) Owned Follow Transaction(s) (Instr. 3 and 4		)		Ownership of Form: B Direct (D)		Vature ndirect neficial nership str. 4)
Common	Stock						Co	ode V	An	nount (D)	Price	135,389				I (Instr. 4)	_	Connell ists
Pamindar	Papart on a	caparata lina far an	ch class of securitie	s banafiai	olly.	ownod	diraa	tly or indi	raatl	,								
			Table II -	Derivativ	e Se	ecuritie	es Acc	Pers cont form quired, Di	ons aine dis	who respond in this for plays a cur	rm are rently reficial	not valid	required OMB co	l to respoi	nd unless		EC 147	74 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, it	4. Transac Code	tion	5. Nu	ative ities ired resed )			7. Tit Amo Unde Secur	7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number Derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Owne Form Oeriva Securi Direct or Ind	n of vative urity: ct (D) direct	11. Natur of Indire Beneficia Ownersh (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisal	ole	Expiration Date	Title		Amount or Number of Shares					
Director Stock Option	\$ 65.47	10/23/2008		A		5,000	)	10/23/20	800	10/22/2018		mon ock	5,000	\$ 0	5,000		D	
Director Stock Option	\$ 66.59							10/25/20	007	10/24/2017	/	mon	5,000		5,000		D	
Director Stock Option	\$ 56.17							10/26/20	006	10/25/2016	Com Sto	mon	5,000		5,000		D	
Director Stock Option	\$ 54.68							10/27/20	005	10/26/2015	Com	mon ock	5,000		5,000		D	
Director Stock Option	\$ 37.10							10/21/20	004	10/21/2014		mon ock	5,000		5,000		D	
Director Stock Option	\$ 32.90							10/23/20	003	10/23/2013		mon ock	5,000		5,000		D	
Director Stock Option	\$ 30.65							10/24/20	002	10/24/2012	, ,	mon ock	5,000		5,000		D	
Director Stock Option	\$ 29.10							10/18/2	001	10/18/2011		mon ock	3,000		3,000		D	
Director Stock	\$ 52.6565							10/09/2	000	10/09/2010	Con	mon	10,000		10,000		D	

#### **Reporting Owners**

B (1 0 N (41)	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
OCONNELL HOWARD V 1649 QUESTWOOD DRIVE FALCON HEIGHTS, MN 55113	X							

## **Signatures**

Howard V. O'Connell	10/24/2008
**Signature of Reporting Person	Date

### **Explanation of Responses:**

- \* 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.

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.