FORM 4
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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).

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

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### 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 Type Responses) 1. Name and Address of Reporting Person + VERONNEAU MARCEL			2. Issuer Name and Ticker or Trading Symbol TECHNE CORP /MN/ [TECH]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner		
614 MCKINLEY	(First) PLACE N.E.		3. Date of Earliest Transaction (Month/Day/Year) 08/18/2005					XOfficer (give title below)         Other (specify below)           VP - Hematology operations			
(Street) MINNEAPOLIS, MN 55413			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Ow						ned		
1.Title of Security (Instr. 3)		Date (Month/Day/Year)		(Instr. 8)		-		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership of In Form: Bene	Beneficial
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	-
Common Stock									28,946	D	
Common Stock									5,967	Ι	By stock bonus plan

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who respond to the collection of information

SEC 1474 (9-02)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code		of	vative rities ired r osed ) : 3,	r 6. Date Exercisable and Expiration Date c (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)		Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee stock option	\$ 51.60	08/18/2005		А		475		08/18/2005	08/17/2012	Common Stock	475	\$ 0	475	D	
Employee stock option	\$ 40.47							07/09/2004	07/08/2011	Common Stock	505		505	D	
Employee stock option	\$ 37.011							12/01/2005(1)	11/30/2010	Common Stock	15,000		15,000	D	
Employee stock option	\$ 33.85							08/14/2003	08/13/2010	Common Stock	670		670	D	
Employee stock option	\$ 28.22							07/01/2002	06/30/2009	Common Stock	785		785	D	
Employee Stock option	\$ 32.50							07/01/2001	06/30/2008	Common Stock	748		748	D	
Employee stock option	\$ 65							07/01/2000	06/30/2007	Common Stock	338		338	D	
Employee stock option	\$ 12.6875							07/01/1999	06/30/2006	Common Stock	1,498		1,498	D	

## **Reporting Owners**

Den estime Ormen News (Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				

VERONNEAU MARCEL			
614 MCKINLEY PLACE N.E.		VP - Hematology operations	
MINNEAPOLIS, MN 55413			

# Signatures

Marcel Veronneau	08/22/2005
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).
(1) Exercisable 5,000 each on 12/1/03; 12/1/04 and 12/1/05

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.