FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
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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 OF SECURITIES

 $\label{eq:company} Filed \ pursuant \ to \ Section \ 16(a) \ of \ the \ Securities \ Exchange \ Act \ of \ 1934 \ or \ Section \ 30(h) \ of \ the \ Investment \ Company \ Act \ of \ 1940$

(Print or Type Responses) 1. Name and Address of Reporting Person * OLAND THOMAS E				2. Issuer Name and Ticker or Trading Symbol							5. Rel	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) (First) (Middle)				TECHNE CORP /MN/ [TECH] 3. Date of Earliest Transaction (Month/Day/Year)								X_ Director 10% Owner X_ Officer (give title below) Other (specify below)						
C4 4 3 4 COVERN TO THE TAX A TO				01/31/2006								President						
(Street) MINNEAPOLIS, MN 55413			4. If Amendment, Date Original Filed(Month/Day/Year)							_X_ For	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-	Derivati	ve Secur	ities Ac	guired, D	Disposed of	, or Benefi	cially O	wned		
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year) Common Stock 01/31/2006		2A. Deemed Execution Date, if		3. Trans Code (Instr. 8		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. Owner Form:	ship Indire	7. Nature of Indirect Beneficial					
			(Month/Day/Yea		Code	· V	Amoun	(A) or			(Instr. 3 and 4)			Direct or Indi (I) (Instr.	rect (Instr			
		01/31/2006			M	; V	V Amoun 400,00		Price \$ 4.5313	1,376,920			D D	7)				
Common Stock 02/01/20		02/01/2006		S			76,000	D	\$ 57.09	1,300,	00,920			D				
Common	Stock											91,169	9			I	-	stock us Plan
Common	Stock											205,92	24			I	By P Shar Plan	_
Common Stock										68,550	6			I	By Corp	oration		
Reminder: I	Report on a so	eparate line for eacl	a class of securities b				directly o	Pe in t a c	rsons w this forn currently	n are no valid C	t requi	red to re ntrol nu	espond ui mber.	informationless the			SEC 14	74 (9-02)
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Onversion or Exercise Price of Derivative Security 3. Transaction (Month/Day/Y				4. 5. N f Transaction Deri Code Secu (Instr. 8) Acquor D of (I		warrants umber of vative urities uired (A) isposed	6. Date Exercisabl Expiration Date (Month/Day/Year		ar)		5) 7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	Derivativ Securities Beneficia Owned Followin Reported Transacti	ve or	Ownership Form of Derivative Security: Direct (D) or Indirect	Benefic
	Security					and:	5)											
(Instr. 3)	, in the second			Code	V	and (A)	(D)	Date Exercis	sable	Expirati Date	on T	itle	Amount or Number of Shares		Transac (Instr. 4		(Instr. 4)	
	, in the second	01/31/2006		Code	V	(A)	,	Exercis		Date	(itle Common Stock	or Number of Shares	\$ 0)		

D	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
OLAND THOMAS E 614 MCKINLEY PL NE MINNEAPOLIS, MN 55413	X		President				

Signatures

Thomas E. Oland	02/02/2006
**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 in annual increments of 22000 shares each commencing 2/2/96

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.