FORM 4	4
Check this box if	no

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

1. Name and Addres VERONNEAU M	s of Reporting Person + ARCEL	2. Issuer Name and TECHNE CORP /			g Symbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
614 MCKINLEY	(First) PLACE N.E.		3. Date of Earliest Tr 07/28/2011	ansaction (N	Aonth	/Day/Yea	ır)		X         Officer (give title below)         Other (specify below)           VP Hematology Operations			
MINNEAPOLIS,	(Street) MN 55413	4	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 Owned									
(Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if			1			Owned Following Reported	Ownership	7. Nature of Indirect Beneficial	
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock									34,569	D		
Common Stock									6,706	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 contained SEC 1474 (9-02) in this form are not required to respond unless the form

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

	(e.g., puts, calls, warrants, options, convertible securities)														
	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code		5. Numb of Derivativ Securitie Acquired (A) or Disposed (D) (Instr. 3, and 5)	ve es d d of	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Derivative Security: Direct (D) or Indirect	Beneficial
				Code	v	(A)	(D)	Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option	\$ 76.15	07/28/2011		А		1,129		07/28/2011	07/27/2018	Common Stock	1,129	\$ 0	1,129	D	
Stock Option	\$ 76.15	07/28/2011		А		20,000		06/30/2012 <sup>(1)</sup>	07/27/2018	Common Stock	20,000	\$ 0	20,000	D	
Stock Option	\$ 58.40							07/30/2010	07/29/2017	Common Stock	1,281		1,281	D	
Stock Option	\$ 66.25							04/30/2011(2)	04/29/2017	Common Stock	10,000		10,000	D	
Stock Option	\$ 62.46							07/24/2009	07/23/2016	Common Stock	494		494	D	
Stock Option	\$ 79.41							07/25/2008	07/24/2015	Common Stock	385		385	D	
Stock Option	\$ 56.83							07/27/2007	07/26/2014	Common Stock	510		510	D	
Stock Option	\$ 49.43							07/27/2006	07/27/2013	Common Stock	567		567	D	
Stock Option	\$ 51.60							08/18/2005	08/17/2012	Common Stock	475		475	D	

## **Reporting Owners**

Denseting Orman Name (Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
VERONNEAU MARCEL 614 MCKINLEY PLACE N.E. MINNEAPOLIS, MN 55413			VP Hematology Operations						

# Signatures

Marcel Veronneau	08/01/2011
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) Vested 5,000 each 6/30/12, 6/30/13, 6/30/14, 6/30/15

(2) Vested 5,000 each 4/30/11 and 4/30/12

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.