### TECHNE CORP /MN/ Form 3 May 15, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB approval

### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Addr Person <u>*</u> WIENS HA		rting	2. Date of Event H Statement (Month/Day/Year		3. Issuer Name <b>and</b> Ticker or Trading Symbol TECHNE CORP /MN/ [TECH]				
(Last) (	(First)	(Middle)	05/15/2014		4. Relationship Person(s) to Is	nip of Reporting Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)	
614 MCKINLE	EY PLAC	E NE						× ·	
(Street)					(Check all applicable)		6. Individual or Joint/Group		
MINNEAPOLIS, MN 55413					X_ Director 10% Owner Officer Other (give title below) (specify below)			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 Beneficially Owned						
1.Title of Security (Instr. 4)			Ber				ership	rect Beneficial	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)									
Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.									
Tab	le II - Deriv	vative Secur	ities Beneficially (	Owned (e.g	g., puts, calls,	warrants, o	ptions, c	convertible	securities)
1. Title of Derivati (Instr. 4)	ive Security	Expir	te Exercisable and ation Date Day/Year)	Securitie	and Amount of as Underlying we Security	4. Conver or Exer Price o Derivat	rcise F f D	wnership orm of verivative ecurity:	6. Nature of Indirect Beneficial Ownership (Instr. 5)

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

Date

Exercisable

Expiration

Title

Date

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

# **Reporting Owners**

**Relationships Reporting Owner Name / Address** Director 10% Owner Officer Other WIENS HAROLD J 614 MCKINLEY PLACE NE ÂΧ Â Â Â MINNEAPOLIS, MNÂ 55413 Signatures /s/ Harold J. 05/15/2014 Wiens \*\*Signature of Date Reporting Person

## **Explanation of Responses:**

#### No securities are beneficially owned

\* 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).

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.