FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Narayan Ramani			2. Date of Event Requiring Staten Month/Day/Year 11/26/2004	nent	3. Issuer Name and Ticker or Trading Symbol NORTHERN TECHNOLOGIES INTERNATIONAL CORP [NTI]							
(Last) 4275 CONIFE	(First)	(Middle)			4. Rela (Check	ationship of Reporting Perso call applicable) Director	on(s) to Issuer		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street)						Officer (give title below)	Other (spe below)	ecify	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person			
OKEMOS	MI	48864								Form filed by Reporting Po	y More than One erson	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						unt of Securities ially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4) 2. Date Exercis Expiration Dat (Month/Day/Ye			ate	3. Title and Amount of Securities Underlying Derivative Security (Instr.			4. Convei or Exei	rsion rcise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	n Title	e	Amount or Number of Shares	Price of Derivative Security		Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

No securities are beneficially owned.

Ramani Narayan 1

11/29/2004

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

 $^{^{\}star}$ 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).