### FORM 5

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

# ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB APPROVAL									
OMB Number:	3235-0362								
Estimated average burden									

Section obligation Instruct Form 3	Holdings Repo	Form 5 ue. See		STATEMENT OF CHANGES IN BENEFI OWNERSHIP  I pursuant to Section 16(a) of the Securities Exchange Act of 1934							CIAL	-	E		nber: I average bu response:	3235-0362 rden 1.0		
1. Name and Address of Reporting Person*  MORGAN JAMES B				or Section 2. Issuer N	or Section 30(h) of the Investment Company Act of 1940  2. Issuer Name and Ticker or Trading Symbol  DAKTRONICS INC /SD/ [ DAKT ]						0 !	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
(Last) (First) (Middle) 201 DAKTRONICS DRIVE					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 04/28/2018						Year)	Officer (give title Other (specify below) below)						
(Street) BROOKINGS SD 57006  (City) (State) (Zip)				4. If Amen	4. If Amendment, Date of 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							
(=-5)			e I - Non-Deri\	/ative Sec	uritie	es Ac	auire	ed. Di	sposed	of. or	Benefic	ially	Owne	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)  3. Transactic Code (Ins 8)		ction	4. Securities Acquired (A) or Dispos of (D) (Instr. 3, 4 and 5)				d				nership n: Direct	7. Nature of Indirect Beneficial Ownership			
					0)		Amour	nt	(A) or (D)	Price	-	Issuer's Fiscal Year (Instr. 3 and 4)		Ìndi	rect (I)	(Instr. 4)		
Common	Stock		08/01/2005	G 400 <sup>(1)</sup> D \$0 1,3				1,32	1,326,580		D							
Common	Stock		12/15/2005	G 1,7		720 <sup>(2)</sup>	D	\$0	\$0 1,3		1,324,860		D					
Common	Stock		12/01/2008		G 2,000 <sup>(3)</sup> D \$(					\$0		1,322,860			D			
Common	Stock		04/13/2018			C		53,	975(4)	A	\$0	) 1,376,835 D						
Common	Stock		04/28/2018			J		4	66 <sup>(5)</sup>	D	\$0	0 1,376,369 D						
Common	Stock		04/13/2018			J		2	.4 <sup>(6)</sup>	D	\$0	50 53,975 I by					by 401k	
Common	Stock			C		53,	975 <sup>(4)</sup>	D	D \$0		0			I	by 401k			
		Та	ble II - Derivat. (e.g., p	tive Securi uts, calls,								•	wned					
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)	4. Transaction Code (Instr. 8)	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rative rities ired r osed )	Expiration (Month/E) sed 3, 4		te Exercisable and ation Date th/Day/Year)  Expiration cisable Date		le and unt of rities rlying attive rity (Instr. 3 )  Amount or Number of Shares	Der Sec (Ins	8. Price of Derivative Security Instr. 5) Beneficia Owned Following Reported Transacti (Instr. 4)		ive ies cially ng ed ction(s)	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	

#### **Explanation of Responses:**

- 1. Gift of shares on August 1, 2005 was inadvertently excluded from filings
- 2. Gift of shares on December 15, 2005 was inadvertently excluded from filings
- 3. Gift of shares on December 1, 2008 was inadvertently excluded from filings
- 4. Shares held in 401(k) rolled over to brokerage account.
- $5.\ Miscellaneous$  adjustment to number of shares held by reporting person.
- 6. Adjustment of 24 shares of common stock of Daktronics, Inc. under the Daktronics, Inc. 401k Plan.

# Remarks:

By: Sheila M. Anderson For: James B. Morgan

06/11/2018

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.