FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington

D.C. 20549	OMB APPROVAL

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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)

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

															_	_						
1. Name and Address of Reporting Person * $\underline{SANDER\ DUANE\ E}$						2. Issuer Name and Ticker or Trading Symbol DAKTRONICS INC /SD/ [DAKT]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
															X Dire		ctor		10% C	wner		
	AVENUI	· ·	Middle)			ate o		st Trans	saction (Month/Day/Year)							Officer (give title below)		Other below)		specify		
PO BOX 5128					4 If	If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
,						AIIIC	nament,	, Date o	n Origina	i i iicu	(WOTHINDS	ty/ ICC	A1)		ine)	riduai o	r John Voroup	, i iiiig (c	TICOK A	pplicable		
(Street) BROOKI	NGS SI		57006												X		n filed by One		•			
BROOKI	NGS SI		37000													Forn Pers	n filed by Mor on	e than O	ne Rep	orting		
(City)	(S	tate) (Zip)																			
		Tab	e I - No	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	efici	ally	Owne	ed					
Date			2. Transa Date (Month/D	Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Sec Ben Owr		cially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)		Price	e .	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Daktronics, Inc. Zero Par Value Common Stock				11/09/	1/09/2005				S		1,000(1)		D	\$23.05		259,632		I		Phyllis A. Sander Living Trust		
Daktronics, Inc. Zero Par Value Common Stock															316,314 ⁽²⁾		D					
		Ta									sed of, onvertib					wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transaction Code (Instr. 8)			rities ired r osed) : 3, 4	6. Date E Expiratio (Month/E	n Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	Deri Secu	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: ct (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	le V (A)		(D)	Date Exercisa		Expiration Date	or		ount nber ires	er							

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 1, 2004.
- 2. Shares include 20,092 held individually in the name of the reporting person and 296,222 shares held in the name of Duane E Sander Living Trust. The shares are held in the trust for the benefit of the reporting person. Both the reporting person and the reporting person's spouse are the co-trustees of the trust. As co-trustees, they have the right, alone or with the other trustee, to sell, dispose, vote and execute other transactions involving the shares held in the trust. The reporting person is also the sole primary beneficiary of the trust. Shares owned by the Duane E Sander Living Trust are indirectly owned by the reporting person.

Remarks:

By: /s/ William R. Retterath, **POA**

11/10/2005

** Signature of Reporting Person

Date

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

- * 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.