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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check t | nis box if no longer subject to |
|-----------|---------------------------------|
| | 16. Form 4 or Form 5 |
| | ns may continue. See |
| Instructi | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB Number: | 3235-0287 | | | | | | | |
|------------------------|-----------|--|--|--|--|--|--|--|
| Estimated average burg | len | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

| | ss of Reporting Pers | | 2. Issuer Name and Ticker or Trading Symbol DAKTRONICS INC /SD/ [DAKT] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|-----------------|----------------------|------------|--|---|----------------------------------|---------------------|--|--|--|
| KURTENBA | CH AELRED | <u>) j</u> | [] | X | 10% Owner | | | | |
| | | | | x | Officer (give title | Other (specify | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | | below) | below) | | | |
| 331 32ND AVENUE | | | 03/12/2004 | Chairman of the Board | | | | | |
| PO BOX 5128 | | | | | | | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | vidual or Joint/Group Filin | g (Check Applicable | | | |
| BROOKINGS | SD | 57006 | | X | Form filed by One Rep | orting Person | | | |
| | | | | | Form filed by More tha Person | n One Reporting | | | |
| (City) | (State) | (Zip) | | | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
|---|--|---|------------------------------|---|--------|---------------|-------------------|---|---|---|--|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) | |
| Daktronics, Inc. Zero Par Value Common Stock | 03/12/2004 | | G | v | 20,000 | D | \$ <mark>0</mark> | 594,477 | D | | |
| Daktronics, Inc. Zero Par Value Common Stock | 03/12/2004 | | G | v | 20,000 | D | \$ <mark>0</mark> | 691,080 | Ι | By Spouse | |
| Daktronics, Inc. Zero Par Value Common Stock | | | | | | | | 54,819.87(1) | Ι | By Daktronics, Inc. 401(K) Plan | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | | (* 5 / 1* | | , | | , | · · | | | , | | | | | |
|---|---|--|---|--|---|--|-----|--|--------------------|---|--|-----------------------------|--|---|----------------------------------|--|
| 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) | Transaction of Expiration Date Code (Instr. Derivative (Month/Day/Yea | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 | | ransaction ode (Instr.) Acquired (A) or Disposed of (D) (Instr. 3, 4 | | Expiration Date (Month/Day/Year) ed | | Amount of D Securities S | | Derivative del Security Sec (Instr. 5) Be Ow Fol Re Tra | Ownership Form: Direct (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

1. The information in this report is based on a plan statement dated as of 01-31-2004.

Remarks:

| /s/ | Kurtenbach, | Aelred J. | |
|-----|-------------|-----------|--|

** Signature of Reporting Person

03/12/2004

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.