Edgar Filing: DAKTRONICS INC /SD/ - Form 4

DAKTRON Form 4	ICS INC /SD/									
August 27,	2013									
FORM	Λ4								PPROVAL	
	URITIES AND EXCHANGE COMMISSION ashington, D.C. 20549				N OMB Number:	3235-0287				
Check ti if no lor subject Section Form 4 Form 5 obligation may con <i>See</i> Inst 1(b).	nger to 16. or Dins ttinue. Section 17(rsuant to S (a) of the l	Section Public U	SECUI 16(a) of th Jtility Hol	RITIES ne Secur ding Co	FICIAL O ities Excha mpany Act ny Act of 1	Estimated burden hou response	Estimated average burden hours per response 0.5		
(Print or Type	Responses)									
1. Name and Anderson S	Address of Reporting Sheila Mae	Person <u>*</u>	Symbol	er Name an RONICS		r Trading D/ [DAKT]	5. Relationship o Issuer			
(Last)	(First) (I	Middle)	3. Date of	of Earliest T	ransaction	1	(Check all applicable)			
201 DAKTRONICS DRIVE			(Month/Day/Year) 08/22/2013			Director 10% Owner XOfficer (give titleOther (specify below) CFO & Treasurer				
(Street) BROOKING, SD 57006			4. If Amendment, Date 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 				
DROOKIN	G, SD 57000						Person			
(City)	(State)	(Zip)	Tal	ole I - Non-l	Derivativ	e Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or d of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder De	port on a separate line	for each a	ass of see	urities bene	ficially or	uned directly	or indirectly			
Kenninder: Ke	port on a separate line	FIOT CACH CI		unues dene	Pers infor requ	ons who res mation con ired to resp ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	nof Derivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

Edgar Filing: DAKTRONICS INC /SD/ - Form 4

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed (D) (Instr. 3, - and 5)	of				
				Code V	(A)	(D) Date Exercis	able	Expiration Date	Title	Amount or Number of Shares
Incentive Stock Options	\$ 11.05	08/22/2013		A	6,870	<u>(1</u>	.)	08/22/2023	Common Stock	6,870
Restricted Stock Units	\$ 0 <u>(2)</u>	08/22/2013		A	2,750	(3	<u>5)</u>	(3)	Common Stock	2,750

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Anderson Sheila Mae							
201 DAKTRONICS DRIVE			CFO & Treasurer				
BROOKING, SD 57006							
Signatures							

Sheila M	08/27/2013		
Anderson	08/2//2013		
**Signature of	Date		

Reporting Person Explanation of Responses:

- * 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).
- (1) Incentive Stock Options: 20% vested each year for a total of 5 years vesting schedule: $\frac{8}{23}/2014$; $\frac{8}{23}/2015$; $\frac{8}{23}/2016$; $\frac{8}{23}/2017$; $\frac{8}{23}/2018$.
- (2) Each Restricted Stock Unit represents the contingent right to receive one share of Daktronics, Inc. common stock.
- (3) Restricted Stock Units granted on 8/22/2013 vest 20% each year for five years beginning on 8/23/2014. Vested shares will be delivered to the reporting person as soon as practicable after the date of vesting.

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.

(