FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

l	OIVIB APPI	RUVAL
	OMB Number:	3235-0287
	Estimated average bu	ırden

0.5

hours per response:

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

Name and Address of Reporting Person*     Tang Francis					2. Issuer Name and Ticker or Trading Symbol DIODES INC /DEL/ [ DIOD ]									(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  V Officer (give title Other (specify				
(Last) (First) (Middle) 4949 HEDGCOXE ROAD SUITE 200				3. Date of Earliest Transaction (Month/Day/Year) 07/24/2018								7	below)			´			
(Street) PLANO	T	x	75024		4. If Am	endm	ent, Dat	te of C	Priginal F	-iled (	Month/D	ay/Yea	ar)	Line	Form fil	ed by One	Report	Check Appl ting Person One Reporti	
(City)	(S	tate)	(Zip)	<u> </u>						D:	1			6: .: . 11					
1. Title of Security (Instr. 3) 2. Tran			2. Transa Date	nsaction 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		of, or Beneficia irities Acquired (A) or ed Of (D) (Instr. 3, 4 a		(A) or	5. Amount of Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amoun	ount (A) or (D)		Price	Reported Transacti (Instr. 3 a	on(s)			(Instr. 4)
Diodes Incorporated Common Stock			07/24/	4/2018			M <sup>(1)</sup>		5,000		A	\$29.2	1 86,	86,293		D			
Diodes Incorporated Common Stock			07/24/	4/2018			<b>S</b> <sup>(2)</sup>		4,69	4,696 D S		\$38.5	4 81,	81,597		D			
Diodes Incorporated Common Stock														1,18	30 <sup>(3)</sup>		I I	By Son	
Diodes Incorporated Common Stock - Performance Stock Units												36,214			D				
			Table II - I	Derivati (e.g., pu											Owned				•
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisabl Expiration Date (Month/Day/Year)			e and	7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e Ov s Fo lly Dii or g (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	e V	(A)	(D)	Date Exer	cisable	Ex <sub>I</sub> Dat	piration te	Title		Amount or Number of Shares					
05/26/11 DIOD NQSO	\$29.21	07/24/2018		M <sup>(1</sup>	)		5,000	05/20	6/2012 <sup>(4)</sup>	05/	26/2021	Incor Cor St	odes porated nmon ock -	5,000	\$0.00	7,000		D	

## **Explanation of Responses:**

- 1. Exercised under a 10b5-1 plan.
- 2. Sold under a 10b5-1 plan.
- 3. These shares, which consist of restricted stock units, were granted to the reporting persons son, who shares the reporting persons household and is an employee of Diodes Incorporated. The reporting person disclaims beneficial ownership of the shares held by his son, and this report should not be deemed an admission that the reporting person is the beneficial owner of his sons shares for purposes of Section 16 or for
- 4. Non-qualified stock options exercisable in four equal annual installments beginning 05/26/2012.

## Remarks:

Richard D. White as Power of **Attorney for Francis Tang** \*\* Signature of Reporting Person

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.

07/24/2018

Date