FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

vvasimigton,	D.O. 20040	

	OMB APPRO	VAL
I	OMB Number:	3235-0287
	Estimated average burde	n
	hours per response:	0.5

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person*

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

2. Issuer Name and Ticker or Trading Symbol

SOONG RAYMOND					Ī	DIODES INC /DEL/ [DIOD]										all applica Director			10% Ov	ner
	DGCOXE	First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/02/2014									Officer (give title below)		Other (spe below)		pecify	
SUITE 200			4	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) PLANO	Т	X	75024												X	Form filed by One Reporting Person Form filed by More than One Reporting Person				ing
(City)	(5	State)	(Zip)																	
		Ta	able I - No	on-De	erivati	ive S	ecu	rities A	cqui	red,	Dis	posed (of, or Ber	nefici	ially (Owned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Execution Date,		Co	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			nd 5)	Securities Beneficia Owned Fo	neficially vned Following		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
							Со	de V	,	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Diodes In	ncorporated	Common Stock		06/	02/20	14			S	(1)		100,00	0 D	\$27.5		291,500			D	
Diodes Incorporated Common Stock Diodes Incorporated Common Stock Diodes Incorporated Common Stock				06/	02/201	14			М	(2)		14,760	6 A	\$8.1422		306,266			D	
Diodes Incorporated Common Stock			06/	02/201	2/2014				(1)		5,000	D	\$27.5928		301,266			D		
Diodes Incorporated Common Stock			06/	04/20	4/2014				(2)		14,760	6 A	\$8.1422		316,032			D		
Diodes Incorporated Common Stock			06/	04/20	2014		S	(1)		5,000	D	\$27.5		311,032			D			
			Table II						-		-		f, or Bene ible secu		-	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 I if any (Month/Day	Date,	4. Transa Code (8)	action (Instr.	of Deri Sec Acq (A) o Disp of (I	umber vative urities uired or oosed O) (Instr. and 5)	6. Date Exe		piration Date Selonth/Day/Year) Se		7. Title and Amour Securities Underly Derivative Security (Instr. 3 and 4)		ing Derivative		9. Number derivative Securitie: Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	isable		Expiration Date	Title	or	ount nber ires					
7/14/04 DIOD NQSO	\$8.1422	06/02/2014			M ⁽²⁾			14,766	07/14/	2005 ⁽³	3) (07/14/2014	Diodes Incorporated Common Stock - Diodes	14,	,766	\$0.00 ⁽⁴⁾	103,3	59	D	
7/14/04 DIOD NQSO	\$8.1422	06/04/2014			M ⁽²⁾			14,766	07/14/	2005 ⁽³	3) (07/14/2014	Diodes Incorporated Common Stock - Diodes	14,	,766	\$0.00 ⁽⁴⁾	88,59)3	D	

Explanation of Responses:

- 1. Sale pursuant to previously filed 10b5-1 Plan.
- 2. Exercise pursuant to previously filed 10b5-1 Plan.
- $3.\ Non-qualified\ stock\ options\ exercisable\ in\ three\ equal\ annual\ installments\ beginning\ 07/14/2005.$
- 4. Granted under Rule 16b-3 Plan.

Remarks:

Richard D. White as Power of **Attorney for Raymond Soong** ** Signature of Reporting Person

06/04/2014

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.