FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average b | ourden | | | | | | | | |

0.5

hours per response:

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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

| | | | | | _ | | | | | | | | | _ | | | | | | |
|--|---|--------|-------------------|-------|---|---|-----|---|--|---------------|--|---|------------------------------------|------------------|---|--|---|---|---------------------------------------|--|
| 1. Name and Address of Reporting Person * | | | | | | 2. Issuer Name and Ticker or Trading Symbol DIODES INC /DEL/ [DIOD] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| CHENCH | | | | | | | | | | | | | | | X | Direc | ctor | 10% | Owner | |
| (Last) (First) (Middle) 15660 N. DALLAS PARKWAY | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/29/2008 | | | | | | | | | | Office below | er (give title w) | Othe belo | er (specify w) | |
| SUITE 850 | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. | 6. Individual or Joint/Group Filing (Check Applicable | | | | | |
| | | | | | | , 3 (| | | | | | | | Li | Line) | | | | | |
| (Street) | r mx | 7 | 753.40 | | | | | | | | | | | | X | | | e Reporting Pe | | |
| DALLAS | 5 T> | | ⁷ 5248 | | | | | | | | | | | | Form Pers | | re than One R | eporting | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date, | | Transaction Disposed C Code (Instr. 5) | | | ties Acquired (A) I Of (D) (Instr. 3, 4 | | | 4 and Sec Ber | | ount of ties cially I Following | 6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | Code | v | Amount | | (A) or (D) | Price | • | Transaction(s) (Instr. 3 and 4) | | | (man. 4) | | | | |
| Diodes Inc. Common Stock ⁽¹⁾ 05/29/3 | | | | | | /2008 | | | A | | 14,700 | (2) | A | \$0 | | 214,504 | | D | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | rative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any | | | Date, | 4. Transaction Code (Instr. 8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | | vative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nun of | | | | | | | |

Explanation of Responses:

- 1. RSU vests in 4 equal annual installments beginning 5/29/2009.
- 2. Granted under Rule 16b-3 Plan.

Carl C. Wertz as power of attorney Larry Katz

06/02/2008

** 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.