FORM 4

1. Name and Address of Reporting Person*

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

5. Relationship of Reporting Person(s) to Issuer (Check all applicable)

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 DIODES INC /DEL/ [DIOD]

Holland Julie							DIODES INC /DEL/ [DIOD]									Director			10% Ov Other (s	I .
(Last) (First) (Middle) 4949 HEDGCOXE ROAD SUITE 200						3. Date of Earliest Transaction (Month/Day/Year) 10/02/2017										below)	WW An	alog I	below)	респу
(Street) PLANO (City)	PLANO TX 75024				4.	If Ame	Line) X Form filed by C									ed by One	up Filing (Check Applicable one Reporting Person lore than One Reporting			
		Та	ıble I - Noı	n-Deriv	vati	ve Se	ecur	ities A	cqu	ired, C	Disp	osed o	of, o	r Bene	ficially	Owned				
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)			Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4				5. Amour Securities Beneficia Owned For	s Ily	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
										Code	/	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(111311.4)
Diodes Incorporated Common Stock					10/02/2017					M ⁽¹⁾		9,000		A	\$27.9	63,	63,157		D	
Diodes Incorporated Common Stock					10/02/2017					S ⁽²⁾		4,425		D	\$30.0	2 58,	58,732		D	
Diodes Incorporated Common Stock					10/02/2017					S ⁽²⁾		4,426		D	\$30.0	54,	54,306		D	
Diodes Incorporated Common Stock 1					10/02/2017					M ⁽¹⁾		17,000		A	\$19.2	7 71,	71,306		D	
Diodes Incorporated Common Stock 10/0)/02/2017					S ⁽²⁾		7,76	54	D	\$30.0	63,	63,542		D	
Diodes Incorporated Common Stock 10/					0/02/2017					S ⁽²⁾		7,76	64	D	\$30.0	55,778			D	
Diodes Incorporated Common Stock - Performance Stock Units																11,316			D	
			Table II -									sed of onverti				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 Da if any (Month/Day/\)	C	ansaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expi	ate Exerci ration Da hth/Day/Y	le and	Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
				C	ode	v	(A)	A) (D) Da		cisable	Ex Da	piration ate	Title		Amount or Number of Shares					
05/29/2008 DIOD NQSO	\$27.95	10/02/2017		M	1 ⁽¹⁾			9,000	05/2	9/2009 ⁽³⁾	05	/29/2018	Incor Cor St	iodes rporated mmon ock - iodes	9,000	\$0.00	0		D	
05/21/12 DIOD NQSO	\$19.27	10/02/2017		M	1 ⁽¹⁾			17,000	05/2	6/2013 ⁽⁴⁾	05	/21/2022	Incor Cor St	iodes rporated mmon ock - iodes	17,000	\$0.00	0		D	

Explanation of Responses:

- 1. Exercised under a 10b5-1 plan.
- 2. Sold under a 10b5-1 plan.
- 3. Non-qualified stock options exercisable in four equal annual installments beginning 05/29/2009.
- 4. Non-qualified stock options exercisable in four equal annual installments beginning 05/26/2013.

Remarks:

Richard D. White as Power of Attorney for Julie Holland

10/04/2017

** 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.