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DIODES INC /	DEL/									
Form 4										
June 10, 2013	_									
FORM	4 UNITED ST	TATES SECURIT	TES ANI) EXCH	IANG	EC	OMMISSION		PROVAL	
	UNITED SI		ngton, D.				01111155101	OMB Number:	3235-0287	
Check this b	ox			0.2001	-			Expires:	January 31,	
if no longer subject to	STATEME	NT OF CHANG	F CHANGES IN BENEFICIAL OWNERSHIP OF						2005	
Subject to Section 16.		SECURITIES						Estimated average burden hours per		
Form 4 or								response	0.5	
Form 5	*	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								
obligations may continu	e. Section 17(a)	of the Public Utilit	•	-	•			1		
See Instructi		30(h) of the Invest	stment Co	mpany .	Act of	1940)			
1(b).										
(Print or Type Res	ponses)									
1. Name and Add	ress of Reporting Per	rson <u>*</u> 2. Issuer Na	ame and Tio	cker or Tra	ading		5. Relationship of 1	Reporting Pers	on(s) to	
Greene Colin	Symbol	· ·				Issuer				
	DIODES I					(Check all applicable)				
(Last)	(First) (Mid	dle) 3. Date of Ea	3. Date of Earliest Transaction				(Check	(Check an applicable)		
		(Month/Day/	Year)				Director	10%	Owner	
	OXE ROAD, SU	ITE 06/06/2013	3				Officer (give t below)	itle Othe below)	r (specify	
200							· · · · · · · · · · · · · · · · · · ·	President/VP E	U Sls	
	(Street)	4. If Amendr	nent, Date (Driginal			6. Individual or Joi	int/Group Filin	g(Check	
		Filed(Month/Day/Year)				Applicable Line)				
							X Form filed by O			
PLANO, TX 7	5024						Form filed by M Person	ore man One Re	porting	
(City)	(State) (Zi	p) Table I	- Non-Deri	vative Sec	curities	Acqu	ired, Disposed of,	or Beneficial	y Owned	
1.Title of	2. Transaction Dat		3.	4. Securi			5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)		TransactionAcquired (A) or Code Disposed of (D)				Securities Beneficially Owned	Form: Direct B	Indirect Beneficial Ownership	
(Instr. 3)		any (Month/Day/Year)		Disposed of (D) 8) (Instr. 3, 4 and 5)						
			× /			<i>.</i>	Following	Indirect (I)	(Instr. 4)	
					(A)		Reported	(Instr. 4)		
					or		Transaction(s) (Instr. 3 and 4)			
Diadaa			Code V	Amount	(D)	Price	()			
Diodes Incorporated				4,000						
Common	06/06/2013		А	(2)	А	\$0	15,856	D		
Stock (1)				<u></u>						

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

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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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Share
06/06/13 DIOD NQSO	\$ 23.35	06/06/2013		А	4,000	07/01/2014 <u>(3)</u>	06/06/2021	Diodes Incorporated Common Stock	4,0

Reporting Owners

Reporting Owner Name / Address	s Relationships						
I B	Director 10% Owner		Officer		Other		
Greene Colin 4949 HEDGCOXE ROAD SUITE 200 PLANO, TX 75024			Europear	n President/VP EU SIs			
Signatures							
Richard D. White as Power of Greene	Attorney	for Colin		06/10/2013			

**Signature of 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) Restricted stock units vest in four equal annual installments beginning 07/01/2014.
- (2) Granted under Rule 16b-3 Plan.
- (3) Non-qualified stock options exercisable in four equal annual installments beginning 07/01/2014.

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.

Date