Edgar Filing: DIODES INC /DEL/ - Form 4

DIODES INC /	DEL/										
Form 4											
May 27, 2016											
FORM 4			CECUDIT	IEC ANT			COMMERION		PROVAL		
	- UNITE	DSTATE					COMMISSION	OMB	3235-0287		
Check this be	ЭX		vv asnii	ngton, D.	C. 2054)	9		Number: Expires:	January 31,		
if no longer									2005		
subject to Section 16.	SIAII	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Estimated average burden hours per			
Form 4 or		SECONITIES							s per 0.5		
Form 5	Filed p	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							0.0		
obligations	Section 1					-	f 1935 or Section	1			
may continue See Instruction	<i>.</i>) of the Inves	• •		•					
1(b).											
(Print or Type Resp	oonses)										
1 Nama and Adda		D *					5 Deletienskin of	D			
1. Name and Addr GIORDANO N		2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
Symbol											
		DIODES INC /DEL/ [DIOD]				(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					107 0			
				Month/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify			
200	JAL KOAD	, 50111	05/26/2016)			below)	below)			
200	(Cture et)		4 10 4 1	(D (C	、··· 1				(6) 1		
				4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Month/Day/Year) Applicable Line) _X_ Form filed by						One Reporting Person					
PLANO, TX 7	5024						Form filed by M				
		(:)					Person				
(City)	(State)	(Zip)	Table I	Non-Deriv	vative Sec	urities Aco	quired, Disposed of,	or Beneficiall	y Owned		
1.Title of	2. Transactio	n Date 2A.	Deemed	3.	4. Securi		5. Amount of	6.	7. Nature of		
Security	(Month/Day/		cution Date, if	tion Date, if TransactionAcquired (A) or Code Disposed of (D) th/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			Securities	Form: Direct	ect Beneficial Ownership		
(Instr. 3)		any (Mo	nth/Day/Vear)				Beneficially Owned				
		(1010)	intil/Day/Tear)				Following	Indirect (I)			
						(A)	Reported	(Instr. 4)			
						or	Transaction(s) (Instr. 3 and 4)				
				Code V	Amount	(D) Prio	ce (Insu: 5 and 4)				
Diodes						* •					
Incorporated	05/26/2010	5		А	4,300	A $\frac{\$ 0}{(2)}$	96,838	D			
Common Stock (1)						(2)					
SLOCK (1)											

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. 6. Date Exercisable iorNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh						
	Director	10% Owner	Officer	Other				
GIORDANO MICHAEL R 4949 HEDGCOXE ROAD SUITE 200 PLANO, TX 75024	Х							
Signatures								
Richard D. White as Power of Giordano		05/27/2016						

**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 installments beginning 05/26/2017.
- (2) Granted under Rule 16b-3 Plan.

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