FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

| Check this box if no longer subject to | STATEMENT OF CHANG          |
|--|-----------------------------|
| Section 16. Form 4 or Form 5           |                             |
| obligations may continue. See          |                             |
| Instruction 1(b).                      | Filed pursuant to Section 1 |

## GES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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* <u>Van Berkel Monica</u> |  |  |   |         |  | 2. Issuer Name and Ticker or Trading Symbol EMCORE CORP [ EMKR ] |   |      |   |     |   |                           |   | Relationship<br>neck all appl<br>Direct             | cable)<br>or  | g Pers                            | 10% Ov   | /ner                                    |
|---|--|--|---|---------|--|--|---|------|---|-----|---|---------------------------|---|---|---|-----------------------------------|--|---|
| (Last)<br>10420 R   | (Last) (First) (Middle) 10420 RESEARCH ROAD, SE  |  |   |         |  | 3. Date of Earliest Transaction (Month/Day/Year) 01/15/2013      |   |      |   |     |   |                           |   | below   | Officer (give title below)  Chief Adı   |                                   | Other (spec<br>below)<br>nin. Officer                                    |   |
| (Street) ALBUQUERQUE NM 87123                                     |  |  |   | 4. II   | 4. If Amendment, Date of Original Filed (Month/Day/Year) |  |   |      |   |     |   |                           | 6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person |   |   |                                   |  |   |
| (City)  | (Si  |  | (Zip)   |         |  |  |   |      |   |     |   |                           |   |   |   |                                   |  |   |
|   |  | Tab  | le I - Non  | -Deriv  | ative  | e Se   | curities  | s Ac | quired,   | Dis | posed o                                     | of, or Be                 | neficia   | lly Owne  | d   |                                   |  |   |
| 1. Title of Security (Instr. 3)  2. Trans Date (Month/            |  |  |   |         |  | ear)   | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |      | Transaction Dispose Code (Instr. 5)                     |     | ities Acquired (A)<br>d Of (D) (Instr. 3, 4 |                           | Benefic   | es Fo<br>ally (D)<br>Following (I)                  |   | : Direct<br>r Indirect<br>str. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)        |   |
|   |  |  |   |         |  |  |   |      | Code  | V   | Amount                                      | (A) or<br>(D)             | Price   | Transac<br>(Instr. 3                                | tion(s)   |                                   |  | (11301. 4)                              |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |   |         |  |  |   |      |   |     |   |                           |   |   |   |                                   |  |   |
| Derivative<br>Security  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution I<br>if any<br>(Month/Day | Date, 7 | i.<br>Transaction<br>Code (Instr.<br>I)                  |  |   |      | 6. Date Exercisal<br>Expiration Date<br>(Month/Day/Year |     | of Securities                               |                           | ies<br>g<br>Security  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | e<br>s<br>Illy                    | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>t (Instr. 4) |
|   |  |  |   |         | Code   | v  | (A)   | (D)  | Date<br>Exercisab                                       |     | Expiration<br>Date                          | Title                     | Amount<br>or<br>Number<br>of<br>Shares  |   |   |                                   |  |   |
| Restricted<br>Stock   | (1)  | 01/15/2013                                 |   |         | A  |  | 15,000  |      | (2)   |     | (2)   | Emcore<br>Common<br>Stock | 15,000  | \$0 <sup>(3)</sup>                                  | 15,00   | 0                                 | D  |   |

## **Explanation of Responses:**

- 1. Each restricted stock unit represents a contingent right to receive one share of Emcore common stock. Restricted stock units are payable, at the election of the issuer, in cash, Emcore common stock, or a combination of the two.
- 2. Vests in three equal annual installments commencing on January 15, 2014. Not later than 30 days after vesting occurs, vested shares of Emcore common stock, an amount in cash equal to their fair market value or a combination of both will be delivered to the reporting person.
- 3. The restricted stock units were awarded to the reporting person for no cash or other similar consideration.

## Remarks:

/s/ Alfredo Gomez, attorney-infact

\*\* Signature of Reporting Person Date

01/16/2013

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.