

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL	
OMB Number:	3235-0287
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>GILLEN JOHN</u>  (Last) (First) (Middle) <u>C/O EMCORE CORP</u> <u>10420 RESEARCH ROAD SE</u>  (Street) <u>ALBUQUERQUE NM</u> <u>87123</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>EMCORE CORP [ EMKR ]</u>  3. Date of Earliest Transaction (Month/Day/Year) <u>11/07/2013</u>  4. If Amendment, Date of Original Filed (Month/Day/Year)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  <input checked="" type="checkbox"/> Director 10% Owner  Officer (give title below) Other (specify below)  6. Individual or Joint/Group Filing (Check Applicable Line)  <input checked="" type="checkbox"/> Form filed by One Reporting Person  Form filed by More than One Reporting Person
---	---	--

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

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. Transaction Code (Instr. 8)		5. Number of 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 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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
<u>Phantom Share Credits<sup>(1)</sup></u>	<u>\$0<sup>(2)</sup></u>	<u>11/07/2013</u>		<u>A</u>		<u>6,430<sup>(2)</sup></u>		<u>(2)</u>	<u>(3)</u>	<u>Common Stock</u>	<u>6,430</u>	<u>\$0<sup>(1)</sup></u>	<u>6,430</u>	<u>D</u>	

Explanation of Responses:

1. These phantom share credits were credited to the Reporting Person's account because the Reporting Person elected to defer receipt of shares of common stock that the Reporting Person was entitled to receive for service as a non-employee director pursuant to the EMCORE Corporation 2007 Directors' Stock Award Plan.
2. Each phantom share credit in the Reporting Person's account entitles the Reporting Person to one share of common stock. The Reporting Person's account shall be paid out (i) in shares of common stock within 30 days of the Reporting Person ceasing to serve as a director of the Issuer or (ii) immediately prior to a change of control of the Issuer, in shares of common stock or, at the discretion of the board of directors of the Issuer, in cash.
3. Phantom share credits shall not expire.

Remarks:

John Gillen 11/07/2013  
\*\* 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.