FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT OF C | CHANGES IN BENEFI | CIAL OWNERSHIP |
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| ı | OMB APPRO | JVAL |
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| | OMB Number: | 3235-0287 |
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| | hours per response: | 0.5 |

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

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* BOGOMOLNY ROBERT | | | | | | 2. Issuer Name and Ticker or Trading Symbol EMCORE CORP [EMKR] | | | | | | | | | | | ip of Reporting Perso plicable) ctor | | n(s) to Is | |
|---|-----|--------|-------------|---------|------------------------------------|--|---|-------------------------------------|---------|--------|---|---|-------|--------|--|---|--|--|--|---|
| (Last) (First) (Middle) C/O EMCORE CORPORATION | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/04/2005 | | | | | | | | | | Office below | er (give title v) | Other (specify below) | | |
| 145 BELMONT DRIVE (Street) SOMERSET NJ 08873 | | | | | 4. If | 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 | | | | | |
| (City) | (St | ate) (| (Zip) | | | | | | | | | | | | | Pers | on | | | <u> </u> |
| | | Tabl | le I - Nor | n-Deriv | ative | Se | curitie | s Acc | quired, | Dis | posed o | f, oı | r Ben | eficia | ally (| Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Trans: Date (Month/L | | | | | | ar) li | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | Disposed | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | 4 and So | | Securities Beneficially | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | v | Amount | | (A) or (D) | Price | | Transaction(s) (Instr. 3 and 4) | | | | (111341.4) | |
| Common Stock 05/0 | | | | | | 04/2005 | | | | | 1,325 | 5 | A | \$3.02 | | 02 80,072 | | I |) | |
| | | Та | able II - I | | | | | | | | sed of, onvertib | | | | y Ov | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day/Year) Gervicative Security 3. Transaction Date Execution Date, if any (Month/Day/Year) | | | Date, | | Transaction of Code (Instr. Deriva | | ative rities ired osed | 6. Date E: Expiratio (Month/D | n Date | е | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | ount | nt | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ow For Dire or I (I) (| nership m: ect (D) ndirect Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

Remarks:

Robert Bogomolny

05/04/2005

** 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.