FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPI	ROVAL							
OMB Number: 3235-0								
Estimated average burden								
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

								` '				' '									
Name and Address of Reporting Person* Minichiello Thomas P.						2. Issuer Name and Ticker or Trading Symbol EMCORE CORP [EMKR]										lationship o ck all applic Directo	able)	g Pers	son(s) to Iss 10% Ov		
(Last) 2015 CH	(F	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/26/2023									X	X Officer (give title below) Other (specific below) Chief Financial Officer					
2013 GHE011/01 51.							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) ALHAM	BRA C.	A	91803		_	X Form filed by One Reporting Form filed by More than One Person									Ü						
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication															
							Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Tab	le I - Noi	n-Deri	vativ	e Se	curit	ies Ac	quire	d, Di	isp	osed o	f, or Be	nefi	cially	Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,			Code (Instr. 5)				, 4 and Secur Benef Owne		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Cod	de V		Amount	(A) (D)	r Pr	rice		eported cansaction(s) nstr. 3 and 4)			(Instr. 4)	
Common	Stock			08/2	26/202	.3			N	1		25,00	0 A		(1) 305,283 D						
Common	Stock			08/2	26/202	3			F			6,087	(2) D	\$	\$0.56 299,196 D						
		-	Table II -										or Ben ble sec			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)				6. Date Exercis Expiration Date (Month/Day/Yea		ate	of Securities		ties ig e Secu		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s Silly	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable		cpiration ate	Title	Amo or Num of Shar	ber						
Restricted Stock Units (RSUs)	(3)	08/26/2023			M			25,000	(4	4)		(4)	Emcore Common Stock	25,0	000	(1)	0		D		

Explanation of Responses:

- $1. \ The \ restricted \ stock \ units \ were \ awarded \ to \ the \ Reporting \ Person \ for \ no \ cash \ or \ other \ similar \ consideration.$
- 2. Represents the number of shares required to be withheld in accordance with Rule 16b-3 to cover the Reporting Person's tax withholding obligations in connection with the vesting of the restricted stock units
- 3. Each restricted stock unit represented a contingent right to receive one share of Emcore common stock. Restricted stock units were payable, at the election of the Issuer, in cash, Emcore common stock, or a
- 4. On August 26, 2019, the reporting person was granted 100,000 restricted stock units, vesting in four equal annual installments beginning on the first anniversary of the grant date

Remarks:

Ryan Hochgesang, attorney in <u>fact</u>

** Signature of Reporting Person

08/28/2023

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.