FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB Number:	3235-0287
Estimated average burden	
hours per response:	0.5

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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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 JACKSON R	s of Reporting Person*		2. Issuer Name and Ticker or Trading Symbol EMCORE CORP [EMKR]		all applicable)	,
(Last) C/O EMCORE C 2015 W. CHEST	(First) ORPORATION	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/09/2024	Officer (give title Oth	10% Owner Other (specify below)	
(Street) ALHAMBRA (City)	CA (State)	91803 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year) 04/09/2024		Form filed by One Reportin	g Person

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

in this or occurry (mounts)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (Ir 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Restricted Stock Units	04/09/2024		A		23,219	A	(1)	31,386(2)	D	

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	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (li 8)		5. Numl Derivati Securiti Acquire or Disp (D) (Ins and 5)	ive ies ed (A) osed of	Expiration Date (Month/Day/Year)		7. Title and Al Securities Un Derivative Se 3 and 4)	derlying	Security (Instr. 5) Sec Own Foll Rep	Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	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		Transaction(s) (Instr. 4)			

Explanation of Responses:

1. Each restricted stock unit represents a contingent right to receive one share of EMCORE common stock. The restricted stock units were issued pursuant to the EMCORE Corporation 2019 Equity Incentive Plan (the "Equity Plan") in accordance with EMCORE's Director Compensation Policy. The restricted stock units vest as to all of the underlying shares on the earliest of (i) the first anniversary of the grant date, (ii) the date immediately prior to the Issuer's 2025 annual meeting of shareholders, (iii) the consummation of a Change in Control (as defined in the Equity Plan) or (iv) the non-employee director's death or termination of service on the Board due to Disability (as defined in the Equity Plan), in each case subject to the Reporting Person's continued service as a non-employee director through the vesting date.

2. Reflects a correction in the number of shares of common stock reported as beneficially owned by the Reporting Person in a Form 4 previously filed on April 10, 2024 due to an inadvertent error that appeared in such Form 4.

Remarks:

Ryan Hochgesang, attorney in fact 04/10/2024

** 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.