Edgar Filing: EMCORE CORP - Form 4

EMCODE CODE

| EMCORE CORP | | | | | | | | | | | |
|---|---|--|---|---|--------|------------|--|--|---|--|--|
| Form 4 | | | | | | | | | | | |
| November 06, 200 |)6 | | | | | | | | | | |
| FORM 4 | UNITED STATE | S SECUD | C CECUDITIES AND EVOLANCE COMMISSION | | | | | | PPROVAL | | |
| | UNITED STATE | JNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | OMB Number: | 3235-0287 | | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b). | Filed pursuant to Section 17(a) of the | ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES SECURITIES Exchange Act of 1934, on 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | |
| (Print or Type Respon | ises) | | | | | | | | | | |
| RUSSELL THOMAS Symbol | | | . Issuer Name and Ticker or Trading mbol MCORE CORP [EMKR] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Last) (H | First) (Middle) | 3. Date of | Earliest Tra | ansaction | | | (Chec | sk all applicable | k all applicable) | | |
| C/O EMCORE (Month/Day/Y C/O EMCORE 11/05/2006 CORPORATION, 145 BELMONT DRIVE | | | - | | | | X_ DirectorX_ 10% Owner Officer (give title Other (specif below) below) | | | | |
| (Street) 4. If Amend | | | | dment, Date Original | | | 6. Individual or Joint/Group Filing(Check | | | | |
| Filed(Month/Day/Year) | | | | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) (S | State) (Zip) | | | | ~ . | | | | | | |
| | (Zip) | Table | | | | | uired, Disposed of | | - | | |
| | any | emed on Date, if /Day/Year) | 3. Transactic Code (Instr. 8) Code V | on(A) or Di (D) (Instr. 3, | ispose | d of | 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) | | |
| Common 11/0 Stock | 05/2006 | | А | 87 <u>(1)</u> | А | \$ 5.78 | 2,741,154 | D | | | |
| Common Stock | | | | | | | 2,280,035 | I | By AER 1997 Trust | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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) | 4. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Secur (Instr. | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|--|--|---|---|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

er

Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | |
|---|----------|---------------|---------|------|--|--|--|--|
| I B | Director | 10% Owner | Officer | Othe | | | | |
| RUSSELL THOMAS C/O EMCORE CORPORATION 145 BELMONT DRIVE SOMERSET, NJ 08873 | Х | Х | | | | | | |
| Signatures | | | | | | | | |
| Thomas Russell 11/0 | 6/2006 | | | | | | | |
| <u>**</u> Signature of D Reporting Person | ate | | | | | | | |

Explanation of Responses:

- * 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).

(1) Shares acquired pursuant to Directors' Stock Award Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.