

EMCORE CORP  
Form 3  
March 04, 2003

**FORM 3**

UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2005  
Estimated average burden  
hours per response. . .0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF  
SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of  
the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment  
Company Act of 1940

Filed By  
Romeo and Dye's  
Section 16 Filer  
www.section16.net

1. Name and Address of Reporting Person*		2. Date of Event Requiring Statement Month/Day/Year <b>02/28/03</b>		4. Issuer Name <b>and</b> Ticker or Trading Symbol <b>EMKR</b>	
(Last) (First) (Middle) <b>c/o EMCORE Corporation</b> <b>145 Belmont Drive</b>		3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below)	
(Street) <b>Somerset, NJ 08873</b>				6. If Amendment, Date of Original (Month/Day/Year)	
(City) (State) (Zip)		<b>Table I Non-Derivative Securities Beneficially Owned</b>		7. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	
1. Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	
4. Nature of Indirect Beneficial Ownership (Instr. 5)					
<b>EMCORE COMMON STOCK</b>		<b>7,040</b>		<b>D</b>	

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 5(b)(v).

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 control number

**FORM 3 (continued) Table II - Derivative Securities Beneficially Owned  
(e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/ Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Explanation of Responses:

Edgar Filing: EMCORE CORP - Form 3

By: /s/ John Gillen  
John Gillen

\*\*Signature of Reporting Person

March 4, 2003  
Date

\*\*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.

---

POWER OF ATTORNEY

Know all by these presents, that the undersigned hereby constitutes and appoints each of Howard W  
(1) execute for and on behalf of the undersigned, in the undersigned's capacity as an officer and  
(2) do and perform any and all acts for and on behalf of the undersigned which may be necessary o  
(3) take any other action of any type whatsoever in connection with the foregoing which, in the o  
The undersigned hereby grants to each such attorney-in-fact full power and authority to do and pe  
This Power of Attorney shall remain in full force and effect until the undersigned is no longer r

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this d

Signature/s/ John Gillen

Print Name John Gillen