

VEECO INSTRUMENTS INC

Reported by WANG SUSAN

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 05/15/15 for the Period Ending 05/14/15

Address TERMINAL DRIVE

PLAINVIEW, NY 11803

Telephone 516 677-0200

CIK 0000103145

Symbol VECO

SIC Code 3559 - Special Industry Machinery, Not Elsewhere Classified

Industry Semiconductors

Sector Technology

Fiscal Year 12/31



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

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

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 *					2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
WANG SUSAN					VEECO INSTRUMENTS INC [VECO]								X Direc	ctor	-	10% (Owner
(Last)	(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							Officer (give title below) Other (specify below)				(specify	
C/O VEECO INSTRUMENTS, TERMINAL					5/14/2015												
INSTRUME! DRIVE	N15, 1E	LKIVI	INAL														
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)					
PLAINVIEW, NY 11803 (City) (State) (Zip)												_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - Nor	1-Dei	rivativ	e Securi	ties Acq	ui	red, Di	spo	sed of	or E	Seneficially	y Owned			
1			2. 'Da	Trans. ate	2A. Deemed Execution Date, if	3. Trans. Code (Instr. 8)		4. Securi Acquired Disposed (Instr. 3,	l (A) l of ((A) or of (D) Follow (Instr.		nount of Securities Beneficially Owned wing Reported Transaction(s) . 3 and 4)			Ownership Form: Direct (D)	Beneficial Ownership	
						any	Code	V	Amount	(A) or (D)	Price					or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock				5/:	14/2015		A		3854 (1)	A	\$31.13		3	3854		D	
Tab	ole II - De	rivati	ve Securi	ities]	Benefi	cially O	wned (e	.g	. , puts	, cal	lls, wa	rrant	s, options	, convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed T Execution C Date, if any	4. Trans. Code	5. Nu Deriv Secur Acqu Dispo	mber of ative	6. Date Exercisable and Expiration Date			7. 'See De (In	Title and curities brivative str. 3 an	l Amou Underly Securit d 4)	nt of ing y	Derivative Security (Instr. 5) Graph of derivative Securities Beneficially Owned Following Reported Transactions		Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V (A)	(D)	Date Exercisable D		Expiration Date	Title Amor			Number of				

Explanation of Responses:

(1) These shares were awarded as restricted stock pursuant to the Veeco Instruments Inc. 2010 Stock Incentive Plan in consideration of services as a director. These shares are subject to certain restrictions which shall lapse on the earlier to occur of: (i) the date immediately preceding the date of the Company's 2016 Annual Meeting of Stockholders and (ii) the first anniversary of the award date.

Reporting Owners

Departing Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
WANG SUSAN C/O VEECO INSTRUMENTS TERMINAL DRIVE PLAINVIEW, NY 11803	X						

Signatures

Gregory A. Robbins, Attorney-in-fact

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 control number.

^{**} Signature of Reporting Person