FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL	

OMB Number: 3235-0287 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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*  MICLOT JOHN L						2. Issuer Name <b>and</b> Ticker or Trading Symbol  DENTSPLY INTERNATIONAL INC /DE/ [ XRAY ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				
(Last) (First) (Middle) 221 WEST PHILADELPHIA STREET WEST BUILDING/DENTSPLY					3. Di 06/2	3. Date of Earliest Transaction (Month/Day/Year) 06/27/2011								below)	(give title	below)		
(Street) YORK PA 17405 (City) (State) (Zip)					4.11	4. If Amendment, Date of Original Filed (Month/Day/Year)								. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					action	ar) i	CURITIES  2A. Deemer Execution I f any Month/Day	d Date,	3. Transacti Code (Ins	on E				5. Amount of Securities Form (D) Owned Following Reported Transaction(s)		. Ownership orm: Direct D) or Indirect ) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
		•	Table II - D						uired, Dis , options					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\)	Co	4. Transactio Code (Instr 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				Co	ode \	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares		(Instr. 4)			
Phantom Stock (Directors' Deferred Comp)	\$0 <sup>(1)</sup>	06/27/2011			A		485.9 <sup>(2)</sup>		(3)		(1)	Common Stock	485.9	\$37.21	2,092.309	) D		

## Explanation of Responses:

- 1. Not applicable to this transaction.
- 2. Dividend on existing account balance.
- ${\it 3. \ Value \ paid \ in \ stock \ upon \ retirement.}$

Brian M Addison, POA for

06/29/2011

\*\* 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.