FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washin

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

mton D.C. 20E40	
gton, D.C. 20549	OMB APPROVAL

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

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 DENTSPLY INTERNATIONAL INC /DE/								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
COLEMAN MICHAEL J						[XRAY]								X Director			10% Ow	ner		
(Last)	(Fi	rst)	(Middle)											Officer below)	(give title		Other (s below)	pecify		
221 WEST PHILADELPHIA STREET							3. Date of Earliest Transaction (Month/Day/Year) 05/23/2012													
WEST BUILDING/DENTSPLY						00/20/2012														
							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street)													Line	,		D	-ti D			
YORK PA 17405													X Form filed by One Reporting Person							
					_									Form filed by More than One Reporting Person						
(City)	(Si	tate)	(Zip)																	
		Tab	le I - Nor	ı-Deri	vativ	e Se	curitie	s A	cquired	l, Dis	sposed o	of, or Be	neficial	ly Owned	l					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				saction					3. 4. Securities Acquired (			ed (A) or	5. Amou				7. Nature			
				/Day/Ye	Execution Date if any (Month/Day/Yea			Code (Instr.			Disposed Of (D) (Instr. 3, 4		Securitie Benefici	ally (D)	(D) or	Indirect	of Indirect Beneficial			
				ear) 8)						Owned Following Reported				Ownership (Instr. 4)						
						Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3									
			_		_						, ,									
			Fable II - I									, or Bene ble secu		Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date,	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		•	7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e Coss Fally Do	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares							
Stock Option	\$38.02	05/23/2012			A		6,900		05/23/20	13 <sup>(2)</sup>	05/23/2022	Common Stock	6,900	\$0 <sup>(1)</sup>	6,900		D			
RSU (Restricted Stock Unit)	\$0	05/23/2012			A		1,710		05/23/20	15 <sup>(3)</sup>	(1)	Common Stock	1,710	\$0	6,057.0	16	D			

## **Explanation of Responses:**

- 1. Not applicable to this transaction.
- 2. Shares vest in annual one-third (1/3) increments over a three-year period ending May 23, 2015.
- 3. Shares vest in full (restrictions lapse) 3 years from the grant date.

Deborah M. Rasin, POA for Michael J. Coleman

05/25/2012

\*\* 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.