FORM 4

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

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APP	ROVAL
OMB Number:	3235-02

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).

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*  CHOLMONDELEY PAULA H				<u>I</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol  DENTSPLY INTERNATIONAL INC /DE/  XRAY ]						<u>/</u> [   (Che	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner				
(Last) (First) (Middle) 221 WEST PHILADELPHIA STREET SUITE 60W				0	3. Date of Earliest Transaction (Month/Day/Year) 07/10/2015							below)	(give title	below		
(Street) YORK (City)	P/	A tate)	17401 (Zip)	4.	. If Ame	endment, Di	ate of	Original Fil	ed (I	Month/Day	/Year)	Line	) 【  Form fi	ed by One F	iling (Check A Reporting Pers than One Rep	on
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
Date			. Transactio Pate Month/Day/	Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)		d (A) or r. 3, 4 and	5. Amoun Securities Beneficia Owned Fo	s Formulay (D) of (I) (II)	i. Ownership form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Code	<u> </u>	Amount	ount (A) or (D)		Transacti (Instr. 3 a	on(s)		(3 4)	
	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 Oate (Month/Day/Year) Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year)		Code	ransaction Derivative ode (Instr. Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownersh Form: Direct (D or Indirect (I) (Instr.	Beneficial Ownership t (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	1(5)	
RSU (Restricted Stock Unit)	\$0 <sup>(1)</sup>	07/10/2015		A		13.233 <sup>(2)</sup>		(3)		(4)	Common Stock	13.233	\$0	9,737.081	1 D	

## **Explanation of Responses:**

- 1. Shares convert to common stock on a 1:1 basis.
- 2. Dividend on existing vested or unvested Restricted Stock Unit (RSUs) awarded to Reporting Person, payable as additional units of Phantom Stock.
- ${\it 3. \ Dividends \ vest \ simultaneously \ with \ Restricted \ Stock \ Units \ to \ which \ they \ relate.}$
- 4. Not applicable to this transaction.

<u>Deborah M. Rasin, POA for</u> <u>Paula H. Cholmondeley</u>

07/14/2015

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.