FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL |
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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* CLARK CHRISTOPHER T (Last) (First) (Middle) 221 WEST PHILADELPHIA STREET WEST BUILDING/DENTSPLY (Street) YORK PA 17405 | | | | | | 2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/ [XRAY] 3. Date of Earliest Transaction (Month/Day/Year) 07/13/2012 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) President & C.O.O. 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
|---|---|--|---|-------|---|---|-------------------|-----|--|-----------------|-------|--|--|---|---|---|---------------------------------|--|--|
| (City) | | ate) | (Zip) | | , | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | 2A. Deemed Execution Date, | | | 3. Transactio | 4. Securities A | | ies Acquire | d (A) or | 5. Amour Securitie Beneficia Owned F Reported Transact | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | | : Direct Indirect str. 4) | '. Nature of Indirect Beneficial Ownership Instr. 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 or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution I if any (Month/Day | Date, | 4. Transaction Code (Instr. 8) | | of E | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | nd | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Ownersh Form: Direct (D or Indire (I) (Instr. | Ownership | Beneficial Ownership ct (Instr. 4) | |
| | | | | c | Code | v | (A) | (D) | Date Exercisable | Expira Date | ıtion | Title | Amount or Number of Shares | | | | | | |
| RSU (Restricted Stock Unit) | \$37.81 | 07/13/2012 | | | A | | 45 ⁽¹⁾ | | 07/13/2015 ⁽²⁾ | (3) | | Common Stock | 45 | \$37.81 | 54,388.7 | 719 | D | | |
| PRSU | \$37.81 | 07/13/2012 | | | A | | 24 ⁽⁴⁾ | | 07/13/2015 ⁽²⁾ | (3) | | Common Stock | 24 | \$37.81 | 13,804.1 | .73 | D | | |

Explanation of Responses:

- 1. Dividend on existing vested or unvested Restricted Stock Units (RSUs) awarded to participant, payable as additional units of phantom stock.
- 2. Vests in full (restrictions lapse) 3 years from date of grant.
- 3. Not applicable to this transaction.
- 4. Dividend on existing vested or unvested Performance based Restricted Stock Units (PRSUs) awarded to participant, payable as additional units of phantom stock.

Deborah M. Rasin, POA for Christopher T. Clark

07/13/2012

** 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.