FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| l | 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).

## 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

| 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)                                      |       |  |  |  |
|---|---|--|---|----------|---|--------|--|------------------------------------|--|--------------------------------------|----------|--|--|---|--|-------|--|--|--|
| MICLOT JOHN L   |   |  |   |          |   | XRAY ] |  |                                    |  |                                      |          |  |  | X Directo   | r  |       | 10% Ow   | ner  |  |
| (Last) (First) (Middle)                                   |   |  |   |          | -                                       | ANAI 1 |  |                                    |  |                                      |          |  |  | Officer below)                                      | (give title  |       | Other (s<br>below)   | pecify                                     |  |
| 221 WEST PHILADELPHIA STREET                              |   |  |   |          |   |        | 3. Date of Earliest Transaction (Month/Day/Year)<br>05/23/2015               |                                    |  |                                      |          |  |  |   |  |       |  |  |  |
| SUITE 60W   |   |  |   |          |   |        | 03/23/2013   |                                    |  |                                      |          |  |  |   |  |       |  |  |  |
| JOHE OUW  |   |  |   |          |   |        | 4. If Amendment, Date of Original Filed (Month/Day/Year)                     |                                    |  |                                      |          |  |  |   | 6. Individual or Joint/Group Filing (Check Applicable  |       |  |  |  |
| (Street)  |   |  |   |          |   |        |  |                                    |  |                                      |          |  |  | Line)  X Form filed by One Reporting Person         |  |       |  |  |  |
| YORK  | PA  | PA 174                                     |   |          |   |        |  |                                    |  |                                      |          | _  | ,                                      |   | rting Person<br>One Report   |       |  |  |  |
| (City)  | (State) (Zip)   |  |   | -        |   |        |  |                                    |  |                                      |          |  | Person                                 |   |  |       |  |  |  |
|   |   |  |   |          | <u> </u>                                |        |  |                                    | <del></del>  |                                      |          |  | <u> </u>                               |   |  |       |  |  |  |
|   |   | Tak  | ole I - Nor   | 1-Deriv  | vatıv                                   | e Se   | curii  | ties Acc                           | quired,  | Dis                                  | posed o  | t, or Be   | neficiali                              | y Owned   |  |       |  |  |  |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D. |   |  |   |          |   | ear)   | Execu  | eemed<br>Ition Date,<br>h/Day/Year | Code (I  | Transaction Disposed Code (Instr. 5) |          | ies Acquire<br>Of (D) (Ins   |  | Beneficia<br>Owned F                                | s<br>illy<br>ollowing  | Form: | Direct Indirect Etr. 4)  | 7. Nature of Indirect Beneficial Ownership |  |
|   |   |  |   |          |   |        |  |                                    | Code   | v                                    | Amount   | (A) or<br>(D)  | Price                                  | Reported<br>Transacti<br>(Instr. 3 a                | ion(s)   |       |  | Instr. 4)                                  |  |
| Common Stock 05/23/                                       |   |  |   |          |   | /2015  |  | М                                  |  | 1,739 A                              |          | \$0  | 2,6                                    | 2,648   |  | D     |  |  |  |
|   |   |  | Table II -  |          |   |        |  |                                    |  |                                      |          |  |  | Owned   |  |       |  |  |  |
|   |   |  |   | (e.g., p | puts,                                   | caii   | s, wa  | arrants,                           | option   | s, c                                 | onvertib | jie secu   | rities)                                |   |  |       |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)       | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |          | 4.<br>Transaction<br>Code (Instr.<br>8) |        |  |                                    | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                                      | е        | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s) |       | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4)      |  |
|   |   |  |   |          | Code                                    | ode V  |  | (D)                                | Date<br>Exercisal  | Date<br>Exercisable                  |          | Title  | Amount<br>or<br>Number<br>of<br>Shares |   | (Instr. 4)   |       |  |  |  |
| RSU<br>(Restricted<br>Stock                               | \$51.86   | 05/23/2015                                 |   |          | М                                       |        | (A)  | 1,739 <sup>(1)</sup>               | 05/23/20   | 15                                   | (2)      | Common<br>Stock  | 1,739                                  | \$0 <sup>(2)</sup>                                  | 5,548.76   | 67    | D  |  |  |

## **Explanation of Responses:**

- 1. Vesting of RSU granted on 5/23/2012 (and previously reported on Form 4) along with accumulated dividends (issued on a quarterly basis and also reported on Form 4s since the date of the grant).
- 2. Not applicable to this transaction.

<u>Deborah M. Rasin, POA for</u> <u>John L. Miclot</u>

05/27/2015

\*\* 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.