SEC Form 4	
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Instruction 1(b).

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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number:

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

					0	or Sec	tion 30(h) of f	the In	vestmer	nt Con	npany Act of	1940)						
1. Name and Address of Reporting Person [*] FRANK ANDREAS G						2. Issuer Name and Ticker or Trading Symbol <u>DENTSPLY SIRONA Inc.</u> [XRAY]									ationship of F all applicat Director		Person(s) to Issue 10% Ow		
(Last) C/O DENT	(Firs	, , , ,	/liddle)			3. Date of Earliest Transaction (Month/Day/Year) 04/12/2024							x	Officer (g below) Exec V		Other (sp below) Business Officer			
13320 BALLANTYNE CORPORATE PLACE				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv X	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(Street) CHARLOT	TE NC	2	8277		R	ule	10b5-1(d	c) T	ransa	actic	on Indica	atior	n		Formine				
(City)	(City) (State) (Zip) (Zip) (Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											atisfy the							
		Tal	ble I - No	n-Der	ivativ	ve Se	ecurities /	Acq	uired,	Dis	posed of,	or E	Bene	ficially C	wned				
1. Title of Security (Instr. 3) 2. Trans Date (Month/				/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (8)		on Disposed Of (es Acquired (A) or Df (D) (Instr. 3, 4 an		and 5) Securities Beneficial Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount		(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common St	ock		04/12/2024 A 503.503 ⁽¹⁾				1)	Α	\$ <mark>0</mark>	0 133,383.793		D							
							curities A ls, warrar								vned				
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,		action (Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/)		ate	7. Title and of Securities Underlying Derivative S (Instr. 3 and		es I Security	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporte Transac	ve O es Frially D or ng (I) d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)
				Code V		(A) (D)		Date Exercisable		Expiration Date	Title	e	Amount or Number of Shares		(Instr. 4)				

Phantom Stock (Supplemental Executive Commor Stock (2) 04/12/2024 Α 39.5619⁽³⁾ (2) (2) 39.5619 \$31.45 7,816.8295 Retirement Plan) SERP Explanation of Responses:

1. Represents dividends on restricted stock units (RSUs) awarded to the Reporting Person in the form of additional RSUs and are subject to the same vesting terms as the underlying awards. The dividends vest simultaneously with the RSUs to which they relate. Each RSU converts to common stock on a 1:1 basis.

2. Each share of phantom stock is the economic equivalent of one share of common stock. The shares of phantom stock become payable in common stock upon the reporting persons termination of employment. 3. Comprised of phantom stock acquired as a result of accrued dividends.

/s/ Dane Baumgardner, Attorney-04/15/2024 In-Fact for Andreas G. Frank

** 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.