FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnington, L	J.C. 20549
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STATEMENT	OF CHANGE	S IN BEN	EFICIAL (OWNERS	HIP

OMB APPROVAL 3235-0287 OMB Number: Estimated average burden hours per response:

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* <u>ALEXOS NICHOLAS W</u>					2. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [XRAY]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 13320 BALLANTYNE CORPORATE PLACE			3. Date of Earliest Transaction (Month/Day/Year) 07/12/2019								X	X Officer (give title below) Other (specify below) EVP, CFO							
(Street) CHARLOTTE NC 28277				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(State	e) (Z	ip)											Person					
		Tab	le I -	Non-Deri	vative	e Sec	urities A	\cqu	ired	, Disp	osed o	f, or E	Benef	icially	Owned				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/		Execution Date,		Transaction		n Dis	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		d Sed Bei Ow	Amount of curities neficially ned Following	6. Owners Form: Dire (D) or Indir (I) (Instr. 4	ect Indirec	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
							Code	v	Am	ount	(A) or (D)	Price	Tra	oorted nsaction(s) str. 3 and 4)					
Common Sto	ock			07/12/20	19			Α		47	'.565 ⁽¹⁾	Α	\$() 3	3,969.319 ⁽²	2) D			
Common Stock											50,000	I	FAMI DYN	By ALEXOS FAMILY DYNASTY TRUST					
Common Stock											50,000	I	W. Al)					
		Т	able	II - Deriva			rities Ac , warran								wned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year)		Execu	Deemed 4.		4. 5. Number Derivative Code (Instr. Securities		6. Date Exe Expiration I (Month/Day		te Exerc	rcisable and 7. Title and A		Amount es	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exerc	isable	Expiratio Date	n Title		Amount or Number of Shares		Transaction(s) (Instr. 4)			
Phantom Stock (Supplemental Executive Retirement Plan) SERP	(3)	07/12/2019			A		2.6063 ⁽⁴⁾		(3)	(3)		imon ock	2.6063	\$56.82 ⁽⁴⁾	1,695.1402	D		

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. Includes 155 shares acquired between January 1st June 30, 2019 under the Dentsply Sirona Employee Stock Purchase Plan.
- 3. 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.
- 4. Comprised of phantom stock acquired as a result of accrued dividends.

Dane Baumgardner, Attorney-

07/16/2019

** 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.