FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL			
OMB Number:	3235-0287			
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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).

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* MOSCH JAMES G					2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/ XRAY]						[Che	eck all applic	able)	ng Person(s) to Issuer 10% Owner Other (specify		ner	
(Last) (First) (Middle) 221 WEST PHILADELPHIA STREET WEST BUILDING/DENTSPLY				0	3. Date of Earliest Transaction (Month/Day/Year) 02/21/2012							X Officer (give title Other (specify below) Executive VP					
(Street) YORK PA 17405 (City) (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
1. Title of Security (Instr. 3) 2. Trans Date							Code (Instr. 5)		i (A) or	or 5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
			Table II - De					uired, Disp				(Instr. 3 a					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code (Instr.		5. Number of		<u> </u>		ble and 7. Title and of Securitie		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficiall Owned Following Reported	Owner Form: Direct or Ind (I) (Ins		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security		(Month/Day/Yea		e (Instr.	Derivati Securiti Acquire (A) or Dispose of (D) (li	es d ed nstr.	6. Date Exercis Expiration Dat (Month/Day/Ye		of Securiti Underlying Derivative	I Amount es J Security	Derivative Security	Securities Beneficially Owned Following Reported Transaction	Owne Form: Direct or Ind (I) (Ins	(D) irect	of Indirect Beneficial Ownership	
					` T	Derivati Securiti Acquire (A) or Dispose of (D) (li	es d ed nstr.	Expiration Dat	е	of Securiti Underlying Derivative	I Amount es J Security	Derivative Security	derivative Securities Beneficially Owned Following Reported Transaction	Owne Form: Direct or Ind (I) (Ins	(D) irect	of Indirect Beneficial Ownership	
Stock Option		02/21/2012		r) 8)	` T	Derivati Securiti Acquire (A) or Dispose of (D) (li 3, 4 and	es d ed nstr. 5)	Expiration Dat (Month/Day/Ye	e (ar)	of Securiti Underlying Derivative (Instr. 3 an	Amount or Number of	Derivative Security	derivative Securities Beneficially Owned Following Reported Transaction	Owne Form: Direct or Ind (I) (Ins	(D) irect tr. 4)	of Indirect Beneficial Ownership	
	Security	02/21/2012		Code	` T	Derivati Securiti Acquire (A) or Dispose of (D) (II 3, 4 and	es d ed nstr. 5)	Expiration Dat (Month/Day/Ye	Expiration Date	of Securiti Underlying Derivative (Instr. 3 an	Amount or Number of Shares	Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	(D) irect tr. 4)	of Indirect Beneficial Ownership	

Explanation of Responses:

- 1. Shares vest in increments of 1/3 over a three year period.
- 2. Not applicable to this transaction.
- 3. Not applicable to this transaction.

<u>Deborah M. Rasin, POA for</u> <u>James G. Mosch</u>

02/23/2012

** 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.