FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nashington,	D.C.	20549

STATEMENT	OF	CHANGES	IN F	BENEFICIAL	OWNERSHIP

l	OMB APPROVAL								
OMB Number: 3235-0									
l	Estimated average burd	en							
I	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).

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* Wagner Richard M					2. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [XRAY]										k all applica Director	,		10% Ov	vner	
(Last) C/O DENTS	(First	`	iddle)		3. Date of Earliest Transaction (Month/Day/Year) 04/12/2024									X	below)	give title hief Acc	counti	Other (s below) ng Office:	` '	
13320 BALLANTYNE CORPORATE PLACE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street) CHARLOT	TE NC	28	277											X	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication														
						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.														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
[2. Transa Date (Month/I	action 2A. Deemed Execution Date, if any (Month/Day/Year)					ies Acquired (A) or l Of (D) (Instr. 3, 4 ar			5. Amoun Securities Beneficial Owned For Reported	lly ollowing	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount (A)		Pric	e:e	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 04/					/2024				A		41.653 ⁽¹⁾ A			\$ 0	10,768.798			D		
	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. Deem Execution if any (Month/D	n Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Dat (Month/Day/Yo		ite	7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A) (D)		Date Exercisable		Expiration Date	or		unt ber es						
Phantom Stock (Supplemental Executive Retirement	(2)	04/12/2024			A		4.5982		(2)		(2)	Common Stock	4.59	82	\$31.45	908.56	002	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. 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.

/s/ Dane Baumgardner, Attorney-In-Fact for Richard M. 04/15/2024

Wagner

** 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.