FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | |
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OMB Number: 3235-0287 Estimated average burden 0.5 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

| 1. Name and | | | 2. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [XRAY] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | |
|--|--|--|--|------------------------------|---|--------------------------|---|--|------|--------------------|---|----------------------------------|--|--|--|--|--|--|
| <u>CLARK CHRISTOPHER T</u> | | | | | DENTSPLY SIRONA IIIC. [ARAY] | | | | | | | ` | Director | | | 10% Ow | ner | |
| (Last) (First) (Middle) | | | | | | | | | | | | | | ve title | Other (specify below) | | | |
| (Last) | Fir: PHILADE | | 3. Date of Earliest Transaction (Month/Day/Year) 03/04/2016 | | | | | | | | President & CEO Technologies | | | | | | | |
| 221 WEST PHILADELPHIA STREET SUITE 60W | | | | | 3/04/2 | .010 | | | | | | | | | | | | |
| (Street) | | | | 4 | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Indiv | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| YORK PA 17401 | | | 17401 | | | | | | | | | X | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | n Dorcon | |
| (City) (State) | | | (Zip) | | | | | | | | | Point lilet | a by More | lilaii O | пе кероппі | y Person | | |
| | | Т | able I - Non-D | erivat | tive S | ecurities | Acq | uired, [| Disp | osed of, | or Bene | eficially O | wned | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans Date (Month/ | | | | | | Execution D | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | | es Acquired (A) or Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Following F Transaction | Owned Reported | 6. Own Form: I (D) or I (I) (Inst | Direct Indirect Er. 4) | 7. Nature of ndirect Beneficial Ownership | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | (Instr. 3 and | | | | (Instr. 4) | |
| | 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. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | | | 6. Date Exercisable Expiration Date (Month/Day/Year) | | te | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | re es ally | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | Code | v | (A) | (D) | Date Exercisa | ble | Expiration Date | Title | Amount or Number of Shares | | Transact (Instr. 4) | tion(s) | | | |
| Supplemental Executive Retirement Plan (SERP) | (1) | 03/04/2016 | | A | | 2,226.644 ⁽²⁾ | | (1) | | (3) | Common Stock | 2,226.644 | \$53.27 | 32,514. | 3162 | D | | |
| Supplemental Executive Retirement Plan (SERP) | (1) | 03/04/2016 | | A | | 141.482 ⁽⁴⁾ | | (1) | | (3) | Common Stock | 141.482 | \$60.85 | 32,655. | 7982 | D | | |

Explanation of Responses:

- 1. Not applicable to this transaction.
- 2. Supplemental Executive Retirement Plan (SERP) allocation for the year 2015 based on closing price on 12/31/2014.
- 3. Value paid in stock following the reporting person's retirement.
- $4. \ Supplemental\ Executive\ Retirement\ Plan\ (SERP)\ dividend\ for\ the\ year\ 2015;\ based\ on\ 12/31/2015\ closing\ price.$

Justin H. McCarthy II, POA for 03/08/2016 Christopher T. Clark

** 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.