FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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CHANGES IN BENEFICIAL OWNERSHIP OMB Number:

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* WISE BRET W | | | | | 2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/ | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|--|---|---|---|--|--------|--|-------------------|---|-------------------|---|--|--|--|---------------------------------------|--------|--|
| WISE | BREI W | | | | RAY | _ | | | | | | | Oirector | | | 10% Ow | ner | |
| (Last) | (F | irst) | (Middle) | _ | | , | | | | | | | Officer (below) | give title | | Other (specification) | pecify | |
| 704 GOOSE NECK DRIVE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/03/2009 | | | | | | CHAIRMAN & C.E.O. | | | | | | | |
| (Street) | | | | _ 4 | . If Ame | endment, [| Date o | of Original Fi | led (Mo | onth/Da | y/Year) | 6. In Line | dividual or Jo | oint/Group F | Filing (| Check Appl | icable | |
| LITITZ | PA | A | 17543 | | | | | | | | | 2 | Form fil | ed by One | Repor | ting Person | | |
| (City) | (S | tate) | (Zip) | _ | | | | | | | | | Form fil Person | ed by More | than | One Reporti | ng | |
| | ` | <u> </u> | | | | | - 4 - | | | | D. | 6 | | | | | | |
| | | | ble I - Non-De | | | | | ' ' | ÷ | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | • | Execution Date | | , Transaction Disposed (Code (Instr. | | ties Acquired (A) or d Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | Code | / A | Amount (A) or (D) | | r Price | Transaction(s) (Instr. 3 and 4) | | | | nstr. 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. Transaction Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | | ration | Title | Amount or Number of Shares | | (Instr. 4) | on(s) | | | |
| Phantom Stock (SERP) | (1) | 03/03/2009 | | A | | 4,571.56 | | (1) | | (3) | Common Stock | 4,571.56 | \$28.24 ⁽²⁾ | 17,981. | 16 | D | | |

Explanation of Responses:

- 1. Not applicable to this transaction
- $2. \ Supplemental\ Executive\ Retirement\ Plan\ (SERP)\ allocation\ for\ 2008\ based\ on\ closing\ price\ on\ 12/31/2008$
- 3. Value paid in stock upon retirement

Remarks:

Brian M. Addison, POA

03/04/2009

** 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.