FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL OMB Number: Estimated average burden

1.0

hours per response:

Form 3 Holdings Reported.	
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Instruction 1(b).

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Form 4	4 Transactions	Reported.	Fil	ed pursuant t or Sectio					urities Excha Company Ac									
1. Name and Address of Reporting Person* WISE BRET W					2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/ [(XRAY)]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last)	(FI		(Middle)								belo							
			17402 (Zip)	4. If Amer	4. If Amendment, Date of Original Filed (Month/Day/Year)								fividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - Non-Deri	vative Sec	curitie	s A	cquire	d, D	isposed	of, or E	Beneficia	ally Own	ed					
1. Title of Security (Instr. 3) 2. Da			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution D if any (Month/Day	Date,		4. Se		curities Acquired (A) or Dispos) (Instr. 3, 4 and 5)			5. Amo Securit Benefic	es	6. Owner Form: (D) or	rship Direct	7. Nature of ndirect Beneficial Ownership		
				(MOHUI/Da)						(A) or (D)	Price	Issuer's		iscal Indire		(Instr. 4)		
		Т	able II - Deriva (e.g., p	ntive Secu outs, calls									I					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Num of Deriva Securi Acquii (A) or Dispos of (D) (Instr. and 5)	tive ities red sed 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		ve es ially ng ed etion(s)	10. Ownersl Form: Direct (D or Indire (I) (Instr.	Beneficial (D) Ownership rect (Instr. 4)		
					(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares							
Stock Option	\$44.28	12/15/2003		A	9,934		12/15/2	004	12/15/2013	Commo Stock	n 9,934	\$0	9,9	34	D			
Stock Option	\$44.28	12/15/2003		A	9,933		12/15/2	005	12/15/2013	Commo Stock	n 9,933	\$0	9,9	33	D			
Stock Option	\$44.28	12/15/2003		A	9,933		12/15/2	006	12/15/2013	Commo	n 9,933	\$0	9,9	33	D			

Explanation of Responses:

Remarks:

/s/ WISE, BRET W.

02/27/2004

** Signature of Reporting Person

Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

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.

^{*} 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).