FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington, D.C. 20549	.C. 20549
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Check this box if no longer subject	
o Section 16. Form 4 or Form 5	
bligations may continue. See	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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*     Vergis Janet S.					DE	2. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [ XRAY ]									elationship eck all app K Direc	,	ng Perso	n(s) to Is	
(Last)	(F	irst) (I	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/14/2023									Office belov	er (give title v)		Other (s below)	pecify
C/O DENTSPLY SIRONA INC 13320 BALLANTYNE CORPORATE PLACE						4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicane)  X Form filed by One Reporting Person				·
(Street) CHARLOTTE NC 28277					Dul										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.											ided to			
		Table	I - No	n-Deriva	ative S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Ben	eficia	ly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execution (Control of the Control of		Deemed cution Date, y nth/Day/Year)		3. 4. Se Transaction Code (Instr. 8)		Disposed 0	ties Acquired (A d Of (D) (Instr. 3,		(A) or 3, 4 and	Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following		Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A)	) or )	Price		ction(s) 3 and 4)			(Instr. 4)
Common Stock 04/14/2						2023			A 22.836 <sup>0</sup>		.)	A \$0		16,295.459		D			
		Tal									osed of, convertib				/ Owne	d			
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		ion Date,	n Date, Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		f   1 9   (	d. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of	ount mber ares						

## **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.

Dane Baumgardner, Attorney-04/18/2023 In-Fact for Janet S. Vergis

\*\* 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.