FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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

Name and Address of Reporting Person*     WISE BRET W				2. Issuer Name <b>and</b> Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
				XRAY						X Director		10% O	vner		
(Last)	(F	irst)	(Middle)	— <u>[</u>	ARAI J						Officer (	give title	Other ( below)	specify	
221 WEST PHILADELPHIA STREET				3. Date of Earliest Transaction (Month/Day/Year)					Chairman & C.E.O.						
SUITE 60W			10	07/10/2015											
SOILE 00W					If Amendment, Date of Original Filed (Month/Day/Year)					6 11	6. Individual or Joint/Group Filing (Check Applicable				
(Street)				_   "	. 11 //1111	endinent, De	ale oi	Original Filet	i (iviOritii/L	ay/ rear)	Line		iiil/Group Fiiii	ig (Check App	ilicable
YORK	PA	A	17401									X Form file	ed by One Re	porting Persor	1
,												Form file Person	ed by More th	an One Repor	ting
(City)	(S	tate)	(Zip)									Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
1. Title of Security (Instr. 3)  2. Trans: Date (Month/L			te	action Day/Year)  2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Inst	Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 3)		ed (A) or tr. 3, 4 and !	5. Amount of Securities Beneficially Owned Following Reported		Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
			Code V			Amoui	t (A) o	Price	Transaction (Instr. 3 ar			(Instr. 4)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
			(e.	g., put	s, ca	lls, warra	nts,	options,	conver	ible secu	rities)				
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)		nsaction Derivative Expiration Date of Secur le (Instr. Securities (Month/Day/Year) Underlyi		ng e Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)				
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	n Title	Amount or Number of Shares		(Instr. 4)		
RSU (Restricted Stock Unit)	\$0 <sup>(1)</sup>	07/10/2015		A		91.342 <sup>(2)</sup>		(3)	(4)	Common Stock	91.342	\$0	66,024.363	D	
PRSU	\$0 <sup>(1)</sup>	07/10/2015		A		141.719 <sup>(2)</sup>		(3)	(4)	Common Stock	141.719	\$0	89,029.131	. D	

## Explanation of Responses:

- 1. Shares convert to common stock on a 1:1 basis.
- 2. Dividend on existing vested or unvested Restricted Stock Unit (RSUs) awarded to Reporting Person, payable as additional units of Phantom Stock.
- ${\it 3. Dividends vest simultaneously with Restricted Stock Units to which they relate.}\\$
- 4. Not applicable to this transaction.

Deborah M. Rasin, POA for

07/14/2015

Bret W. Wise

\*\* 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.