SEC Form	4																		
F	ORM 4		UNIT	ED ST	ATE	S S						NGE	СОМ	MIS	SION				
			Washington, D.C. 20549														OMB APPROVAL		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).				STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940												Estima	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5		
transactior contract, ir the purcha of the issu the affirma	box to indicate h was made pun struction or wri lse or sale of ec er that is intend tive defense co -1(c). See Instru-	rsuant to a itten plan for quity securities led to satisfy onditions of							investi										
1. Name and Address of Reporting Person* Campion Simon D					2. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [XRAY] 5. Relationship of [(Check all applicat											,			
																uivo titlo	10% Owne		
(Last)		belo											(give title Other (specify below)						
C/O DENTSPLY SIRONA INC 13320-B BALLANTYNE CORPORATE PLAC				E	3. Date of Earliest Transaction (Month/Day/Year) 01/10/2025 Presiden										t, CEO & Member of BOD				
(Street) CHARLOTTE NC 28277					4. 11											int/Group Filing (Check Applicable Line) ed by One Reporting Person			
																d by More than One Reporting Person			
(City) (State) (Zip)																			
		Tal	ole I - N	on-Deri	vativ	ve Se	curities	a Ac	quired	d, Di	sposed o	f, or Be	enefici	ally (Owned				
Da				Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Beneficially Following Re		Owned (D) c eported (I) (II		nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D) Price		e	Transaction(3 and 4)	s) (Instr.			(Instr. 4)
Common Stock 01/10/2					/2025	25		Α		1,288.715 ⁽¹⁾ A		5 <mark>0</mark>	275,348.0351(2)(3)			D			
			Table II								oosed of,				wned			'	
					puts	, call					convertit	1		,			-		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transaction Code (Instr. 8)				6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amoun Securities Underly Derivative Security (Instr. 3 and 4)		lying	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporter Transac	re es ally Ig d	10. Ownershij Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership ect (Instr. 4)
					Code	v	(A)		Date Exerci:	sable	Expiration Date	Amor Numi Title Share		erof		(Instr. 4)			
Phantom Stock (Supplemental Executive Retirement Plan) SERP	(4)	01/10/2025			Α		30.2285		(4)	(4)	Common Stock	ⁿ 30.2	285 ⁽⁵⁾ \$18.51		3,526.3436		D	
Explanation o				14.4.5		, 				DOL							1 71		
 кергезепts dr 	videnas on rest	ricted stock units (RS	∪s) awarde	u to the Re	porting	g Persoi	1 in the forr	n ot a	uditiona	i KSUs	and are subje	ct to the s	ame vesti	ng term	s as the under	iying awar	us. The	uividends v	est

simultaneously with the RSUs to which they relate. Each RSU converts to common stock on a 1:1 basis.

2. Includes 309 shares acquired between July 1st - December 31, 2024 under the Dentsply Sirona Employee Stock Purchase Plan.

3. Includes 644.0760 shares acquired through dividend reinvestment on 10/10/2024, Includes 858.853 shares acquired through dividend reinvestment on 1/10/2025.

4. Each share of phantom stock is the economic equivalent of one share of common stock. The shares of phantom stock become payable in common stock upon the reporting persons termination of employment.

5. Comprised of phantom stock acquired as a result of accrued dividends.

/s/ Dane Baumgardner, Attorney-01/14/2025

In-Fact for Simon D. Campion

** 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.