FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

	Check this box if no longer subject
\neg	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

1. Name and Address of Reporting Person* MAZELSKY JONATHAN JAY						2. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [XRAY]								(Che		ship of Reporting Po applicable) rector		erson(s) to Issuer	
(Last)	ast) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 05/25/2023										Officer (give title below)		Other (s below)	specify
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 Applicable Line) X Form filed by One Reporting Person						
(Street)	treet) HARLOTTE NC 28277												Form filed by More than One Reporting Person						
(City)	(5	tate) (.	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.												ended to	
		Table	I - No	n-Deriva	tive S	ecur	ities	Acq	uired,	Dis	osed of	, or	Bene	ficia	lly Owr	ned			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day					y/Year) Execu		Deemed cution Date, y hth/Day/Year)		Transaction Disposed Code (Instr. and 5)		ties Acquired (<i>A</i> I Of (D) (Instr. 3,			Securi Benefi Owned Follow	5. Amount of Securities Seneficially Owned Following		Direct 0 I ct (I) 0	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A (D	() or ()	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock 05/25/2						2023			A		5,419 ⁽¹	9 ⁽¹⁾ A		\$ <mark>0</mark>	5	5,419		D	
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)	ative Conversion Date Execution Date, if any			4. Transaction Code (Instr. 8)				6. Date Exercisable at Expiration Date (Month/Day/Year)		te	and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		S (I	8. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y D oi	D. wnership orm: irect (D) r Indirect) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	or Num ate Expiration of		Numl	ber						

Explanation of Responses:

1. This grant consists entirely of Restricted Stock Units (RSUs) that vest in full (restrictions lapse) one year from date of grant.

/s/ Dane Baumgardner,

Attorney-In-Fact for Jonathan 05/26/2023 Jay Mazelsky

** 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.