SEC Form	4																		
F		UNITED STATES SECURITIES AND EXCHANGE COMMISSION 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). Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities					MENT OF CHANGES IN BENEFICIAL OWNER Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									IP	OMB Number: Estimated average burden hours per response:			3235-0287	
of the issue the affirmat Rule 10b5-	er that is intend tive defense co 1(c). See Instru	ed to satisfy nditions of uction 10.			2 10	2. Issuer Name and Ticker or Trading Symbol								ationship of I	Reporting	Person	(s) to Issue		
1. Name and Address of Reporting Person [®] <u>Frohning Andrea L.</u>						DENTSPLY SIRONA Inc. [XRAY]								(Check all applicable) Director 10% Owner				vner	
(Last) (First) (Middle) C/O DENTSPLY SIRONA INC 13320-B BALLANTYNE CORPORATE PLACE						3. Date of Earliest Transaction (Month/Day/Year) 10/11/2024								SVP, CHRO					
(Street) CHARLOTTE NC 28277					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person 					
(City) (State) (Zip)																			
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Trans Date (Month/				saction 2 E /Day/Year) if		ecurities Acq 2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (1 8) Code	ction	4. Securities Disposed Of Amount	Acquired	(A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock 10/11				1/202	/2024			Α		71.782(1)	A	\$0	14,09	0.4		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day		Code (Inst		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/)		ate	7. Title an of Securit Underlyin Derivative (Instr. 3 an	ies g Security	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporte Transac	ve es ally ug d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares	umber	(Instr. 4)				
Phantom Stock (Supplemental Executive Retirement Plan) SERP	(2)	10/11/2024			A		10.7782 ⁽³⁾	782 ⁽³⁾)	(2)	Common Stock	10.7782	\$24.5	1,661.0	0391	D		

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.

2. 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. 3. Comprised of phantom stock acquired as a result of accrued dividends.

/s/ Dane Baumgardner, Attorney-10/15/2024

 In-Fact for Andrea Frohning
 In-Fact for Andrea Frohning

 ** 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.