FORM 4

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

Washington, D.C. 20549

CTATEMENT OF CLIANICES IN DENIETICIAL OWNER	
STATEMENT OF CHANGES IN BENEFICIAL OWNER	RSHIP

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/						[ Che	Relationship of Reporting Person(s) to Issuer (Check all applicable)						
THE PART IT					XRAY ]						X	Officer (	ector icer (give title		10% Ow Other (s	1		
(Last)	(F	First)	(Middle)	L								X	below)			below)	pecily	
221 MECT DILL A DEL DILLA CEDEET					3. Date of Earliest Transaction (Month/Day/Year) 07/12/2013							Chairman & C.E.O.						
WEST BUILDING/DENTSPLY				- 1	0//12/2	2013												
						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable					
(Street)												Line)		ad bu Ona I	Danas	tina Davasa		
YORK	PA	A	17405									X	_	,	•	ting Person	, a	
(City)	(S	State)	(Zip)	-	Form filed by More than One Report Person							rig						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4)			d (A) or r. 3, 4 and 5)	5. Amount Securities Beneficial Owned Fo Reported	Form (D) o ollowing (I) (In		Direct I Indirect E tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code			v	Amount	(A) or (D)	Price	Transactio (Instr. 3 ar	on(s)			msu. 4)			
	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 Date, if any (Month/Day/Year)	Code	action (Instr.	5. Number of Derivative Securities Acquired (AD Disposed of (D) (Instr. 3, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4)			ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
												Amount		(Instr. 4)				
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Number of Shares						
RSU (Restricted Stock Unit)	\$0 <sup>(1)</sup>	07/12/2013		A		109.44 <sup>(2)</sup>		(3)		(4)	Common Stock	109.44	\$0	73,553.863		D		
PRSU	\$0 <sup>(1)</sup>	07/12/2013		A		144.185 <sup>(2)</sup>		(3)		(4)	Common Stock	144.185	\$0	77,152.3	317	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

07/16/2013

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.