FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB A	PPROVAL
OMB Number:	3235-028

37 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).

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* CHOLMONDELEY PAULA H						2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/ [XRAY]										5. Relationship of Reporti (Check all applicable) X Director			10% Owner		
(Last) (First) (Middle) 221 WEST PHILADELPHIA STREET WEST BUILDING/DENTSPLY						/12/2	013					Day/Year)		below)			Other (below)				
(Street) YORK (City)	PA (S		17405 (Zip)		_ 4. li	4. If Amendment, Date of Original Filed (Month/Day/Yea									Line	Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date			·,	3. Transaction Code (Instr. 8)						Benefici	es ally Following	Form (D) o	vnership i: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code V		Amount		(A) or (D)	Price	Transac	Transaction(s) (Instr. 3 and 4)			(111511.4)	
Common Stock 03				03/12	2/2013					M		9,000)	A	\$0	9,	360		D		
Common	Stock			03/12	2/2013	3				S		9,000)	D	\$42.	360		D			
		Т	able II -									sed of, onverti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,		ransaction ode (Instr.		of		Date Exe piration onth/Day	Date		Amo Seco Und Deri	7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owr Forr Dire or Ir (I) (II	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat	te ercisabl		xpiration ate	Title		Amount or Number of Shares						
Stock Option	\$25.48	03/12/2013			M			9,000	08	3/31/2007	7 08	3/31/2014		nmon ock	9,000	\$0	0		D		

Explanation of Responses:

Deborah M. Rasin, POA for Paula H. Cholmondeley

03/13/2013

** Signature of Reporting Person

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.